

**Return of Organization Exempt From Income Tax**

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

Department of the Treasury  
Internal Revenue Service

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

**A** For the 2009 calendar year, or tax year beginning **JUL 1, 2009** and ending **JUN 30, 2010**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	Please use IRS label or print or type.  See Specific Instructions.	<b>C</b> Name of organization <b>MICHIGAN NONPROFIT ASSOCIATION</b> Doing Business As Number and street (or P.O. box if mail is not delivered to street address) Room/suite <b>1048 PIERPONT STE 3</b> City or town, state or country, and ZIP + 4 <b>LANSING, MI 48911</b>	<b>D</b> Employer identification number <b>38-2959692</b>  <b>E</b> Telephone number <b>517-492-2400</b>  <b>G</b> Gross receipts \$ <b>7,494,079.</b> <b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)  <b>H(c)</b> Group exemption number ▶
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c) ( <b>3</b> ) ◀ (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		<b>J</b> Website: ▶ <b>WWW.MNAONLINE.ORG</b> <b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶ <b>NONPR</b> <b>L</b> Year of formation: <b>1990</b> <b>M</b> State of legal domicile: <b>MI</b>	
<b>Part I Summary</b>			

<b>1</b>	Briefly describe the organization's mission or most significant activities: <b>TO INCREASE THE CAPACITY OF MI'S NONPROFITS TO SERVE, STRENGTHEN, AND TRANSFORM COMMUNITIES.</b>		
<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<b>39</b>
<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<b>39</b>
<b>5</b>	Total number of employees (Part V, line 2a)	<b>5</b>	<b>53</b>
<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	<b>0</b>
<b>7a</b>	Total gross unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<b>0.</b>
<b>b</b>	Net unrelated business taxable income from Form 990-T, line 34	<b>7b</b>	<b>0.</b>
<b>8</b>	Contributions and grants (Part VIII, line 1h)	<b>Prior Year</b>	<b>Current Year</b>
<b>9</b>	Program service revenue (Part VIII, line 2g)	<b>4,272,639.</b>	<b>6,902,429.</b>
<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<b>677,581.</b>	<b>490,270.</b>
<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<b>21,674.</b>	<b>24,658.</b>
<b>12</b>	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<b>50,381.</b>	<b>76,722.</b>
<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	<b>5,022,275.</b>	<b>7,494,079.</b>
<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	<b>802,921.</b>	<b>2,695,255.</b>
<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		
<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	<b>2,591,520.</b>	<b>2,409,502.</b>
<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ <b>35,631.</b>		
<b>17</b>	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)	<b>1,861,148.</b>	<b>2,216,202.</b>
<b>18</b>	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	<b>5,255,589.</b>	<b>7,320,959.</b>
<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	<b>-233,314.</b>	<b>173,120.</b>
<b>20</b>	Total assets (Part X, line 16)	<b>Beginning of Current Year</b>	<b>End of Year</b>
<b>21</b>	Total liabilities (Part X, line 26)	<b>4,077,264.</b>	<b>4,479,905.</b>
<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	<b>352,772.</b>	<b>582,293.</b>
		<b>3,724,492.</b>	<b>3,897,612.</b>

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer  <b>KYLE CALDWELL, PRESIDENT/CEO</b> Type or print name and title	Date
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<b>Paid Preparer's Use Only</b>	Preparer's signature Firm's name (or yours if self-employed), address, and ZIP + 4 <b>ABRAHAM &amp; GAFFNEY, P.C.</b> <b>3511 COOLIDGE RD., SUITE 100</b> <b>EAST LANSING, MI 48823</b>	Date <b>01/27/11</b>	Check if self-employed <input type="checkbox"/>	Preparer's identifying number (see instructions) EIN ▶ Phone no. ▶ <b>(517) 351-6836</b>
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May the IRS discuss this return with the preparer shown above? (see instructions)  Yes  No

Part III Statement of Program Service Accomplishments

1 Briefly describe the organization's mission:
MICHIGAN NONPROFIT ASSOCIATION (MNA) INCREASES THE CAPACITY OF MICHIGAN'S NONPROFITS TO SERVE, STRENGTHEN AND TRANSFORM COMMUNITIES.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No
If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No
If "Yes," describe these changes on Schedule O.

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

4a (Code: ) (Expenses \$ 2,957,351. including grants of \$ 1,936,223.) (Revenue \$ 17,375.)
PUBLIC GRANTS - THROUGH STATE AND FEDERAL FUNDING SOURCES, THE ASSOCIATION PROVIDES CAPACITY BUILDING SERVICES, INCLUDING TRAINING AND TECHNICAL ASSISTANCE, TO SMALL AND MID-SIZE NONPROFIT ORGANIZATIONS AS WELL AS COLLEGES AND UNIVERSITIES.

4b (Code: ) (Expenses \$ 1,409,575. including grants of \$ 314,462.) (Revenue \$ 316,266.)
EDUCATIONAL SERVICES - THE ASSOCIATION PROVIDES THROUGH ITS LANSING AND METRO DETROIT OFFICES HIGH-QUALITY, LOW-COST TRAINING TO NONPROFIT BOARDS, STAFF, AND VOLUNTEERS THROUGHOUT MICHIGAN INCLUDING STATEWIDE CONFERENCES AND SMALLER REGIONAL SEMINARS.

4c (Code: ) (Expenses \$ 1,218,430. including grants of \$ 78,345.) (Revenue \$ 24,225.)
VOLUNTEERISM - THE ASSOCIATION HAS A STRONG COMMITMENT TO VOLUNTEERISM THROUGH ITS AFFILIATIONS WITH THE MICHIGAN CAMPUS COMPACT AND THE VOLUNTEER CENTERS OF MICHIGAN, ITS PARTNERSHIP WITH THE MICHIGAN COMMUNITY SERVICE COMMISSION, AND WITH THE SUPPORT OF THE CONNECTMICHIGAN ALLIANCE ENDOWMENT.

4d Other program services. (Describe in Schedule O.)
(Expenses \$ 1,373,649. including grants of \$ 366,225.) (Revenue \$ 209,126.)

4e Total program service expenses \$ 6,959,005.

**Part IV Checklist of Required Schedules**

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i> .....	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? .....	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> .....		X
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities? <i>If "Yes," complete Schedule C, Part II</i> ...	X	
5	<b>Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations.</b> Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? <i>If "Yes," complete Schedule C, Part III</i> .....		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> .....		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> .....		X
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> .....		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> .....		X
11	Is the organization's answer to any of the following questions "Yes"? <i>If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable</i> .....	X	
	<ul style="list-style-type: none"> <li>• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i></li> <li>• Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i></li> <li>• 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></li> <li>• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i></li> <li>• Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i></li> <li>• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? <i>If "Yes," complete Schedule D, Part X.</i></li> </ul>		
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII.</i>	X	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional</i> .....		
		Yes	No
			X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> .....		X
14a	Did the organization maintain an office, employees, or agents outside of the United States? .....		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If "Yes," complete Schedule F, Part I</i> .....		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Part II</i> .....		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Part III</i> .....		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> .....		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> .....		X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> .....		X
20	Did the organization operate one or more hospitals? <i>If "Yes," complete Schedule H</i> .....		X

**Part IV Checklist of Required Schedules** (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II .....	X	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III .....		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J .....		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25 .....		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? .....		
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? .....		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .....		
25a	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I .....		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I .....		X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II .....		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III .....		X
28	Was the organization a party to a business transaction with one of the following parties, (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .....		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV .....		X
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV .....		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M .....		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M .....		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .....		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II .....		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I .....		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1 .....		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 .....		X
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2 .....		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI .....		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? .....		
	<b>Note.</b> All Form 990 filers are required to complete Schedule O. ....	X	

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable		
	<b>1a</b> 58		
<b>b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
	<b>1b</b> 0		
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
	<b>1c</b>		
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	<b>2a</b> 53		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return. (see instructions)	X	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		X
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		
	<b>3b</b>		
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
<b>b</b>	If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
<b>c</b>	If "Yes," to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?		
	<b>5c</b>		
<b>6a</b>	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?		X
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
	<b>6b</b>		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
	<b>7d</b>		
<b>e</b>	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
<b>g</b>	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		X
<b>h</b>	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?		X
	<b>7e</b>		
	<b>7f</b>		
	<b>7g</b>		
	<b>7h</b>		
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
	<b>8</b>		
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966?		
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
	<b>9a</b>		
	<b>9b</b>		
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>	

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

**Section A. Governing Body and Management**

		Yes	No
1a	Enter the number of voting members of the governing body		
	1a		39
b	Enter the number of voting members that are independent		
	1b		39
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?		X
6	Does the organization have members or stockholders?		X
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?		X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		X

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

	Yes	No
10a		X
b		
10b		
11	X	
11A		
12a	X	
b		
12b	X	
c		
12c	X	
13	X	
14	X	
15		
a	X	
b		X
16a		X
b		
16b		

**Section C. Disclosure**

- 17 List the states with which a copy of this Form 990 is required to be filed **MI**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply.  
 Own website     Another's website     Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **TINA BRUCE - 517-492-2405**  
**1048 PIERPONT STE 3, LANSING, MI 48911**

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

**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
KATHY AGARD DIRECTOR	1.00	X					0.	0.	0.	
EDWARD BLEWS DIRECTOR	1.00	X					0.	0.	0.	
IBRAHAM AHMED DIRECTOR	1.00	X					0.	0.	0.	
MICHAEL BOULUS DIRECTOR	1.00	X					0.	0.	0.	
CHARLES ANDERSON DIRECTOR	1.00	X					0.	0.	0.	
DELOIS CALDWELL DIRECTOR	1.00	X					0.	0.	0.	
KATHY HAYES DIRECTOR	1.00	X					0.	0.	0.	
SHEILAH P. CLAY DIRECTOR	1.00	X					0.	0.	0.	
ROB COLLIER DIRECTOR	1.00	X					0.	0.	0.	
SUZANNE GREENBERG DIRECTOR	1.00	X					0.	0.	0.	
JAMES CRISP DIRECTOR	1.00	X					0.	0.	0.	
KARLA HALL DIRECTOR	1.00	X					0.	0.	0.	
MICHAEL HANSEN DIRECTOR	1.00	X					0.	0.	0.	
JENNIFER GOULET DIRECTOR	1.00	X					0.	0.	0.	
SUSAN HERMAN DIRECTOR	1.00	X					0.	0.	0.	
DAVID EISLER VICE CHAIR	2.00	X					0.	0.	0.	
BARBARA HILL SECRETARY	2.00	X					0.	0.	0.	

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

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
DENISE HUBBARD DIRECTOR	1.00	X					0.	0.	0.	
SCOTT DZURKA DIRECTOR	1.00	X					0.	0.	0.	
MONICA KOSTIELNEY DIRECTOR	1.00	X					0.	0.	0.	
ANGELA GAABO DIRECTOR	1.00	X					0.	0.	0.	
JANE MARSHALL DIRECTOR	1.00	X					0.	0.	0.	
PAULA CUNNINGHAM DIRECTOR	1.00	X					0.	0.	0.	
RUSSELL MAWBY DIRECTOR	1.00	X					0.	0.	0.	
SHARON PARKS DIRECTOR	1.00	X					0.	0.	0.	
WILLIAM MAYES TREASURER	2.00	X					0.	0.	0.	
DAVID PRICE BOARD CHAIR	2.00	X					0.	0.	0.	
<b>1b Total</b> .....							<b>308,389.</b>	<b>0.</b>	<b>72,938.</b>	

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

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual .....		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual .....		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person .....		X

**Section B. Independent Contractors**

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

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

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

SEE SCHEDULE J-2 FOR PART VII, SECTION A CONTINUATION

**Part VIII Statement of Revenue**

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1 a	Federated campaigns .....	1a					
	b	Membership dues .....	1b	407,116.				
	c	Fundraising events .....	1c					
	d	Related organizations .....	1d					
	e	Government grants (contributions)	1e	1,611,031.				
	f	All other contributions, gifts, grants, and similar amounts not included above .....	1f	4,884,282.				
	g	Noncash contributions included in lines 1a-1f: \$						
	h	<b>Total.</b> Add lines 1a-1f .....		6,902,429.				
	Program Service Revenue	2 a	<b>FEES AND SPONSORSHIP</b>	Business Code 561000	490,270.	490,270.		
b								
c								
d								
e								
f		All other program service revenue .....						
g		<b>Total.</b> Add lines 2a-2f .....		490,270.				
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) .....		24,658.			24,658.	
	4	Income from investment of tax-exempt bond proceeds .....						
	5	Royalties .....						
	6 a	Gross Rents .....	(i) Real	(ii) Personal				
	b	Less: rental expenses .....						
	c	Rental income or (loss) .....						
	d	Net rental income or (loss) .....						
	7 a	Gross amount from sales of assets other than inventory .....	(i) Securities	(ii) Other				
b	Less: cost or other basis and sales expenses .....							
c	Gain or (loss) .....							
d	Net gain or (loss) .....							
8 a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 .....	a						
		b	Less: direct expenses .....	b				
		c	Net income or (loss) from fundraising events .....					
9 a	Gross income from gaming activities. See Part IV, line 19 .....	a						
		b	Less: direct expenses .....	b				
		c	Net income or (loss) from gaming activities .....					
10 a	Gross sales of inventory, less returns and allowances .....	a						
		b	Less: cost of goods sold .....	b				
		c	Net income or (loss) from sales of inventory .....					
Miscellaneous Revenue		Business Code						
11 a	<b>OTHER REVENUE</b>	900099	76,722.	76,722.				
b								
c								
d	All other revenue .....							
e	<b>Total.</b> Add lines 11a-11d .....		76,722.					
12	<b>Total revenue.</b> See instructions. ....		7,494,079.	566,992.	0.	24,658.		

**Part IX Statement of Functional Expenses**

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.  
 All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 .....	2,695,255.	2,695,255.		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 .....				
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 .....				
4 Benefits paid to or for members .....				
5 Compensation of current officers, directors, trustees, and key employees .....	206,950.	56,525.	150,425.	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) .....				
7 Other salaries and wages .....	1,744,015.	1,714,572.	12,820.	16,623.
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) .....	108,085.	97,463.	9,718.	904.
9 Other employee benefits .....	215,737.	200,867.	13,650.	1,220.
10 Payroll taxes .....	134,715.	120,604.	12,799.	1,312.
11 Fees for services (non-employees):				
a Management .....				
b Legal .....	82,240.	74,508.	6,840.	892.
c Accounting .....	37,656.	29,085.	7,582.	989.
d Lobbying .....				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees .....				
g Other .....	850,804.	823,366.	24,720.	2,718.
12 Advertising and promotion .....				
13 Office expenses .....	319,880.	307,763.	10,811.	1,306.
14 Information technology .....	188,426.	172,976.	13,688.	1,762.
15 Royalties .....				
16 Occupancy .....	150,522.	111,386.	34,620.	4,516.
17 Travel .....	194,427.	187,378.	6,412.	637.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings .....	254,086.	250,968.	2,767.	351.
20 Interest .....				
21 Payments to affiliates .....				
22 Depreciation, depletion, and amortization .....	12,028.	11,171.	800.	57.
23 Insurance .....				
24 Other expenses. Itemize expenses not covered above. (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)				
a <b>ORGANIZATIONAL DUES</b> .....	46,814.	44,927.	1,669.	218.
b <b>MISCELLANEOUS</b> .....	40,010.	23,481.	14,677.	1,852.
c <b>EQUIPMENT RENTAL</b> .....	28,788.	26,688.	1,858.	242.
d <b>STAFF/BOARD DEVELOPMENT</b> .....	10,521.	10,022.	467.	32.
e .....				
f All other expenses .....				
25 Total functional expenses. Add lines 1 through 24f	7,320,959.	6,959,005.	326,323.	35,631.
26 Joint costs. Check here <input type="checkbox"/> if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation ...				

**Part X Balance Sheet**

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing .....	2,795.	<b>1</b>	4,215.
	<b>2</b> Savings and temporary cash investments .....	1,994,199.	<b>2</b>	1,540,928.
	<b>3</b> Pledges and grants receivable, net .....	1,931,037.	<b>3</b>	2,860,058.
	<b>4</b> Accounts receivable, net .....	49,567.	<b>4</b>	42,336.
	<b>5</b> Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L .....		<b>5</b>	
	<b>6</b> Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L .....		<b>6</b>	
	<b>7</b> Notes and loans receivable, net .....		<b>7</b>	
	<b>8</b> Inventories for sale or use .....		<b>8</b>	
	<b>9</b> Prepaid expenses and deferred charges .....	72,113.	<b>9</b>	16,843.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D .....	<b>10a</b> 95,540.		
	<b>b</b> Less: accumulated depreciation .....	<b>10b</b> 80,015.	27,553.	<b>10c</b> 15,525.
	<b>11</b> Investments - publicly traded securities .....		<b>11</b>	
	<b>12</b> Investments - other securities. See Part IV, line 11 .....		<b>12</b>	
	<b>13</b> Investments - program-related. See Part IV, line 11 .....		<b>13</b>	
	<b>14</b> Intangible assets .....		<b>14</b>	
	<b>15</b> Other assets. See Part IV, line 11 .....		<b>15</b>	
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34) .....		4,077,264.	<b>16</b>	4,479,905.
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses .....	194,209.	<b>17</b>	474,391.
	<b>18</b> Grants payable .....		<b>18</b>	
	<b>19</b> Deferred revenue .....	158,086.	<b>19</b>	107,902.
	<b>20</b> Tax-exempt bond liabilities .....		<b>20</b>	
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D .....		<b>21</b>	
	<b>22</b> Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L .....		<b>22</b>	
	<b>23</b> Secured mortgages and notes payable to unrelated third parties .....		<b>23</b>	
	<b>24</b> Unsecured notes and loans payable to unrelated third parties .....		<b>24</b>	
	<b>25</b> Other liabilities. Complete Part X of Schedule D .....	477.	<b>25</b>	0.
	<b>26 Total liabilities.</b> Add lines 17 through 25 .....		352,772.	<b>26</b>
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets .....	755,415.	<b>27</b>	545,458.
	<b>28</b> Temporarily restricted net assets .....	2,969,077.	<b>28</b>	3,352,154.
	<b>29</b> Permanently restricted net assets .....		<b>29</b>	
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds .....		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund .....		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds .....		<b>32</b>	
<b>33</b> Total net assets or fund balances .....		3,724,492.	<b>33</b>	3,897,612.
<b>34</b> Total liabilities and net assets/fund balances .....		4,077,264.	<b>34</b>	4,479,905.

**Part XI Financial Statements and Reporting**

	Yes	No
1 Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? .....	X	X
b Were the organization's financial statements audited by an independent accountant? .....	X	
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? ..... If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? .....	X	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. ....	X	

Form 990 (2009)

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

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2009**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

Name of the organization **MICHIGAN NONPROFIT ASSOCIATION** Employer identification number **38-2959692**

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

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1  A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).
- 2  A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).
- 4  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).
- 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)(vi). (Complete Part II.)
- 8  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3% 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 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I                      b  Type II                      c  Type III - Functionally integrated                      d  Type III - Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 

	Yes	No
(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? .....		
(ii) A family member of a person described in (i) above? .....		
(iii) A 35% controlled entity of a person described in (i) or (ii) above? .....		
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of support
			Yes	No	Yes	No	Yes	No	
<b>Total</b>									

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule A (Form 990 or 990-EZ) 2009

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") .....						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf .....						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge ...						
<b>4 Total.</b> Add lines 1 through 3 .....						
<b>5</b> 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) .....						
<b>6 Public support.</b> Subtract line 5 from line 4.						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
<b>7</b> Amounts from line 4 .....						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on ...						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) .....						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) .....					<b>12</b>	
<b>13 First five years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> .....						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	2628095.	2373906.	3608767.	4272639.	6902429.	19785836.
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	418,638.	432,933.	865,368.	677,581.	490,270.	2884790.
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5	3046733.	2806839.	4474135.	4950220.	7392699.	22670626.
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						0.
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0.
c Add lines 7a and 7b						0.
<b>8 Public support</b> (Subtract line 7c from line 6.)						22670626.

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9 Amounts from line 6	3046733.	2806839.	4474135.	4950220.	7392699.	22670626.
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	10,714.	34,023.	49,809.	21,674.	24,658.	140,878.
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	10,714.	34,023.	49,809.	21,674.	24,658.	140,878.
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	13,880.	26,177.	37,828.	50,381.	76,722.	204,988.
13 Total support (Add lines 9, 10c, 11, and 12.)	3071327.	2867039.	4561772.	5022275.	7494079.	23016492.

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here

**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2009 (line 8, column (f) divided by line 13, column (f))	15	98.50 %
16 Public support percentage from 2008 Schedule A, Part III, line 15	16	98.45 %

**Section D. Computation of Investment Income Percentage**

17 Investment income percentage for 2009 (line 10c, column (f) divided by line 13, column (f))	17	.61 %
18 Investment income percentage from 2008 Schedule A, Part III, line 17	18	.70 %

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

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

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

**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2009**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Department of the Treasury  
Internal Revenue Service

▶ **Complete if the organization is described below.**

▶ **Attach to Form 990 or Form 990-EZ.** ▶ **See separate instructions.**

**Open to Public Inspection**

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <b>MICHIGAN NONPROFIT ASSOCIATION</b>	Employer identification number <b>38-2959692</b>
---	---

**Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.**

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ..... ▶ \$ \_\_\_\_\_
- 3 Volunteer hours .....

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ..... ▶ \$ \_\_\_\_\_
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? .....  Yes  No
- 4a Was a correction made? .....  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ..... ▶ \$ \_\_\_\_\_
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ..... ▶ \$ \_\_\_\_\_
- 4 Did the filing organization file Form 1120-POL for this year? .....  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.

For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2009 LHA

**Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

- A Check  if the filing organization belongs to an affiliated group.  
 B Check  if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals												
1a Total lobbying expenditures to influence public opinion (grass roots lobbying) .....														
b Total lobbying expenditures to influence a legislative body (direct lobbying) .....														
c Total lobbying expenditures (add lines 1a and 1b) .....														
d Other exempt purpose expenditures .....														
e Total exempt purpose expenditures (add lines 1c and 1d) .....														
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.														
<table border="1" style="width: 100%;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:													
Not over \$500,000	20% of the amount on line 1e.													
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.													
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.													
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.													
Over \$17,000,000	\$1,000,000.													
g Grassroots nontaxable amount (enter 25% of line 1f) .....														
h Subtract line 1g from line 1a. If zero or less, enter -0- .....														
i Subtract line 1f from line 1c. If zero or less, enter -0- .....														
j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**  
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

**Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).**

	(a)		(b)
	Yes	No	Amount
<b>1</b> During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
<b>a</b> Volunteers? .....		X	
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .....	X		
<b>c</b> Media advertisements? .....		X	
<b>d</b> Mailings to members, legislators, or the public? .....	X		189.
<b>e</b> Publications, or published or broadcast statements? .....		X	
<b>f</b> Grants to other organizations for lobbying purposes? .....		X	
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body? .....	X		1,039.
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? .....	X		1,056.
<b>i</b> Other activities? If "Yes," describe in Part IV .....	X		
<b>j</b> Total. Add lines 1c through 1i .....			2,284.
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? .....		X	
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912 .....			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .....			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? .....			

**Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).**

	Yes	No
<b>1</b> Were substantially all (90% or more) dues received nondeductible by members? .....	1	
<b>2</b> Did the organization make only in-house lobbying expenditures of \$2,000 or less? .....	2	
<b>3</b> Did the organization agree to carryover lobbying and political expenditures from the prior year? .....	3	

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes."**

<b>1</b> Dues, assessments and similar amounts from members .....	1	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
<b>a</b> Current year .....	2a	
<b>b</b> Carryover from last year .....	2b	
<b>c</b> Total .....	2c	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .....	3	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? .....	4	
<b>5</b> Taxable amount of lobbying and political expenditures (see instructions) .....	5	

**Part IV Supplemental Information**

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

**PART II-B, LINE 1(I), OTHER LOBBYING ACTIVITIES:**

**MAILINGS AND OTHER CONTACT WITH LEGISLATORS AND OTHER GOVERNMENT**

**OFFICIALS REGARDING ISSUES AND LEGISLATURE THAT IS OF INTEREST TO OUR**

**MEMBER ORGANIZATIONS. DISTRIBUTION OF INFORMATION ABOUT SUCH ITEMS AT**

**SEMINARS.**

Schedule D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Attach to Form 990. See separate instructions.

Name of the organization

MICHIGAN NONPROFIT ASSOCIATION

Employer identification number

38-2959692

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-9 regarding conservation easements.

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

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

Table with 3 columns: Question, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1a-1b regarding collections of art and historical treasures.

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a  Public exhibition
  - b  Scholarly research
  - c  Preservation for future generations
  - d  Loan or exchange programs
  - e  Other \_\_\_\_\_
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b If "Yes," explain the arrangement in Part XIV and complete the following table:
- |                                       | Amount |
|---------------------------------------|--------|
| c Beginning balance .....             | 1c     |
| d Additions during the year .....     | 1d     |
| e Distributions during the year ..... | 1e     |
| f Ending balance .....                | 1f     |
- 2a Did the organization include an amount on Form 990, Part X, line 21?  Yes  No
- b If "Yes," explain the arrangement in Part XIV.

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance .....					
b Contributions .....					
c Net investment earnings, gains, and losses					
d Grants or scholarships .....					
e Other expenditures for facilities and programs .....					
f Administrative expenses .....					
g End of year balance .....					

- 2 Provide the estimated percentage of the year end balance held as:
- a Board designated or quasi-endowment ▶ \_\_\_\_\_%
  - b Permanent endowment ▶ \_\_\_\_\_%
  - c Term endowment ▶ \_\_\_\_\_%
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |   | Yes    | No |
|---|--------|----|
| (i) unrelated organizations .....   | 3a(i)  |    |
| (ii) related organizations .....  | 3a(ii) |    |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? ..... | 3b     |    |
- 4 Describe in Part XIV the intended uses of the organization's endowment funds.

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

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land .....				
b Buildings .....				
c Leasehold improvements .....				
d Equipment .....		95,540.	80,015.	15,525.
e Other .....				
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶				<b>15,525.</b>

**Part VII Investments - Other Securities.** See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
Financial derivatives .....		
Closely-held equity interests .....		
Other .....		
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 12.) ▶		

**Part VIII Investments - Program Related.** See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
<b>Total.</b> (Col (b) must equal Form 990, Part X, col (B) line 13.) ▶		

**Part IX Other Assets.** See Form 990, Part X, line 15.

(a) Description	(b) Book value
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 15.) ▶	

**Part X Other Liabilities.** See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Amount	
Federal income taxes		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col (B) line 25.) ▶		

2. FIN 48 Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48.

<b>Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements</b>		
1	Total revenue (Form 990, Part VIII, column (A), line 12)	7,494,079.
2	Total expenses (Form 990, Part IX, column (A), line 25)	7,320,959.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	173,120.
4	Net unrealized gains (losses) on investments	
5	Donated services and use of facilities	
6	Investment expenses	
7	Prior period adjustments	
8	Other (Describe in Part XIV.)	
9	Total adjustments (net). Add lines 4 through 8	0.
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	173,120.

<b>Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return</b>		
1	Total revenue, gains, and other support per audited financial statements	7,494,079.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	
a	Net unrealized gains on investments	2a
b	Donated services and use of facilities	2b
c	Recoveries of prior year grants	2c
d	Other (Describe in Part XIV.)	2d
e	Add lines 2a through 2d	2e 0.
3	Subtract line 2e from line 1	3 7,494,079.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a
b	Other (Describe in Part XIV.)	4b
c	Add lines 4a and 4b	4c 0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5 7,494,079.

<b>Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return</b>		
1	Total expenses and losses per audited financial statements	7,320,959.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	
a	Donated services and use of facilities	2a
b	Prior year adjustments	2b
c	Other losses	2c
d	Other (Describe in Part XIV.)	2d
e	Add lines 2a through 2d	2e 0.
3	Subtract line 2e from line 1	3 7,320,959.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:	
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a
b	Other (Describe in Part XIV.)	4b
c	Add lines 4a and 4b	4c 0.
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)	5 7,320,959.

**Part XIV Supplemental Information**

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

**PART X: FEDERAL TAX LAW PROVIDES TAX BENEFITS TO NONPROFIT**

ORGANIZATIONS RECOGNIZED AS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (CODE). THE CODE REQUIRES THAT TAX-EXEMPT ORGANIZATIONS MUST COMPLY WITH FEDERAL TAX LAW TO MAINTAIN TAX-EXEMPT STATUS AND AVOID PENALTIES.

AS AN EXEMPT ORGANIZATION AS DESCRIBED IN SECTION 501(C)(3) OF THE CODE THAT HAS BEEN CLASSIFIED AS OTHER THAN A PRIVATE FOUNDATION, MICHIGAN

**Part XIV** Supplemental Information (continued)

NONPROFIT ASSOCIATION IS ONLY SUBJECT TO TAX ON UNRELATED BUSINESS INCOME AS DEFINED BY SECTION 509(A)(1) OF THE CODE. MICHIGAN NONPROFIT ASSOCIATION HAS NO UNRELATED BUSINESS INCOME FOR THE YEAR ENDED JUNE 30, 2010. ACCORDINGLY, A PROVISION FOR INCOME TAXES HAS NOT BEEN MADE ON THE FINANCIAL STATEMENTS.

THE AMOUNT OF INCOME TAX BENEFIT THAT MAY BE DISALLOWED BY THE INTERNAL REVENUE SERVICE (IRS), IF ANY, CANNOT BE DETERMINED AT THIS TIME ALTHOUGH MICHIGAN NONPROFIT ASSOCIATION EXPECTS SUCH AMOUNTS, IF ANY, TO BE IMMATERIAL.

INTEREST AND/OR PENALTIES ON AN AMOUNT OF INCOME TAXES DEEMED UNDERPAID, IF ANY, WILL BE CLASSIFIED AS INCOME TAXES IN THE FINANCIAL STATEMENTS. MICHIGAN NONPROFIT ASSOCIATION HAS NOT RECOGNIZED ANY INTEREST OR PENALTIES PAYABLE IN THE STATEMENT OF FINANCIAL POSITION AS OF JUNE 30, 2010, OR INTEREST OR PENALTIES EXPENSE IN THE STATEMENT OF ACTIVITIES FOR THE YEAR THEN ENDED.

MICHIGAN NONPROFIT ASSOCIATION IS SUBJECT TO IRS AND STATE EXAMINATIONS FOR A PERIOD OF AT LEAST THREE (3) YEARS AFTER THE FORM 990 HAS BEEN FILED.

**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

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

OMB No. 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization

**MICHIGAN NONPROFIT ASSOCIATION**

Employer identification number  
**38-2959692**

**Part I General Information on Grants and Assistance**

**1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

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

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

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARAB COMMUNITY CENTER FOR ECONOMIC & SOCIAL SERVICES ACCESS	23-7444497	501(C)(3)	15,000.	0.			PUBLIC POLICY
AGAPE FINANCIAL OF NORTHWEST MICHIGAN	27-0374129	501(C)(3)	7,146.	0.			CAPACITY BUILDING
ALBION HEATH CARE ALLIANCE	42-1551109	501(C)(3)	7,146.	0.			CAPACITY BUILDING
ALBION VOLUNTEER SERVICE ORGANIZATION	38-2970255	501(C)(3)	8,485.	0.			CAPACITY BUILDING
ALMA COLLEGE	38-1359083	501(C)(3)	60,261.	0.			EDUCATION
ANDRE BOSSE CENTER	38-3466092	501(C)(3)	9,146.	0.			CAPACITY BUILDING

**2** Enter total number of section 501(c)(3) and government organizations **122.**

**3** Enter total number of other organizations **11.**

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

Schedule I (Form 990) 2009

**Part III**

**Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

**Part IV Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

SCHEDULE I, PART I, LINE 2: ORGANIZATIONS APPROVED FOR FEDERAL FINANCIAL AWARDS ARE REQUIRED TO SIGN A MEMORANDUM OF UNDERSTANDING WITH THE MICHIGAN NONPROFIT ASSOCIATION. THE MEMORANDUM EXPLAINS THE CONDITIONS OF THE AWARD, REPORTING STRUCTURES, AMOUNT AND PURPOSE OF THE AWARD. THE MEMORANDUM IS SIGNED BY AN AUTHORIZED REPRESENTATIVE OF BOTH THE RECIPIENT ORGANIZATION AND MICHIGAN NONPROFIT ASSOCIATION.

IN ADDITION, STAFF STAY IN COMMUNICATION WITH Awardees at least monthly to monitor progress and offer technical assistance. A compliance audit takes

Name of the organization

Employer identification number  
**38-2959692**

**MICHIGAN NONPROFIT ASSOCIATION**

**Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)**

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ANGEL CARE CHILD CARE, INC.	26-3478643	501(C)(3)	6,000.	0.			CAPACITY BUILDING
ANGEL FOUNDATION, INC.	20-1000748	501(C)(3)	6,500.	0.			CAPACITY BUILDING
THE ARTS ALLIANCE	26-0638491	501(C)(3)	7,146.	0.			CAPACITY BUILDING
ASIAN & PACIFIC ISLANDER AMERICAN VOTE-MICHIGAN	26-4514751	501(C)(3)	15,000.	0.			PUBLIC POLICY
BAKER-DONORA CENTER	68-0650544	501(C)(3)	15,000.	0.			PUBLIC POLICY
BALDWIN COMMUNITY SCHOOLS	38-6002152	501(C)(3)	8,000.	0.			EDUCATION
BATTLE CREEK COMMUNITY FOUNDATION	38-2045459	501(C)(3)	8,000.	0.			EDUCATION
BAY AREA COMMUNITY FOUNDATION	38-2418086	501(C)(3)	50,000.	0.			EDUCATION

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Schedule I-1 (Form 990) 2009

Name of the organization

Employer identification number  
**38-2959692**

**MICHIGAN NONPROFIT ASSOCIATION**

**Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)**

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BAY AREA MUSIC FOUNDATION	26-4046964	501(C)(3)	6,000.	0.			CAPACITY BUILDING
BIG BROTHERS BIG SISTERS OF THE LAKESHORE, INC.	38-1918631	501(C)(3)	6,000.	0.			CAPACITY BUILDING
BIG BROTHERS BIG SISTERS OF NORTHCENTRAL MICHIGAN	23-7310849	501(C)(3)	5,635.	0.			CAPACITY BUILDING
BIG BROTHERS BIG SISTERS OF NORTHWESTERN MICHIGAN	23-7043163	501(C)(3)	5,447.	0.			CAPACITY BUILDING
BLACK ARTS & CULTURAL CENTER	38-2730761	501(C)(3)	5,949.	0.			CAPACITY BUILDING
BOYS & GIRLS CLUB OF LENAWEЕ	38-3558470	501(C)(3)	7,167.	0.			CAPACITY BUILDING
BRANCH COUNTY LITERACY COUNCIL	38-2902642	501(C)(3)	7,646.	0.			CAPACITY BUILDING
BRIDGE THE GAP MINISTRIES OF NORTH AMERICA, INC.	35-2306270	501(C)(3)	6,000.	0.			CAPACITY BUILDING

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BUILDING BLOCKS OF KALAMAZOO	06-1705642	501(C)(3)	7,146.	0.			CAPACITY BUILDING
CALVIN COLLEGE	38-3071514	501(C)(3)	30,000.	0.			EDUCATION
CAREER TRANSITIONS, INC.	38-2598177		8,000.	0.			EDUCATION
CATHOLIC SOCIAL SERVICES OF OAKLAND COUNTY	38-1554661	501(C)(3)	15,000.	0.			PUBLIC POLICY
CENTRAL MICHIGAN UNIVERSITY	38-6004447		33,500.	0.			EDUCATION
CHAR-EM UNITED WAY	23-7049778	501(C)(3)	12,151.	0.			CAPACITY BUILDING/VOLUNTEERISM
CHILDREN'S BEREAVEMENT NETWORK	38-3590814	501(C)(3)	6,000.	0.			CAPACITY BUILDING
CHRISTIAN NEIGHBORS SE	38-3451688	501(C)(3)	8,420.	0.			CAPACITY BUILDING

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CITY CONNECT DETROIT	38-3570727	501(C)(3)	25,000.	0.			PUBLIC POLICY
COMMUNITIES IN SCHOOLS OF MANCELONA	27-0726563	501(C)(3)	12,316.	0.			CAPACITY BUILDING/EDUCATION
COMMUNITY EN COMPASS	38-3279226	501(C)(3)	9,146.	0.			CAPACITY BUILDING
COMMUNITY FOUNDATION OF GREATER FLINT	38-2190667	501(C)(3)	15,000.	0.			PUBLIC POLICY
THE COMMUNITY FOUNDATION OF THE HOLLAND/ZEEBLAND AREA	38-6095283	501(C)(3)	8,000.	0.			EDUCATION
COMMUNITY RELATIONS COALITION	38-3501994	501(C)(3)	5,000.	0.			PUBLIC POLICY
CONSORTIUM FOR COMMUNITY DEVELOPMENT	38-3563013	501(C)(3)	8,000.	0.			EDUCATION
COUNCIL OF MICHIGAN FOUNDATIONS	38-6263347	501(C)(3)	515,000.	0.			EDUCATION

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CREATING CHANGE IN BATTLE CREEK NEIGHBORHOODS	38-6006959	501(C)(3)	6,860.	0.			CAPACITY BUILDING
CREATIVE SPIRIT CENTER, INC.	38-3211474	501(C)(3)	6,375.	0.			CAPACITY BUILDING
CULTURAL ALLIANCE OF SOUTHEASTERN MICHIGAN	26-1476029	501(C)(3)	265,000.	0.			CAPACITY BUILDING
DELTA COLLEGE	38-6034011		10,419.	0.			EDUCATION
DISABILITIES NETWORK/NORTHERN MICHIGAN	27-0500871	501(C)(3)	7,146.	0.			CAPACITY BUILDING
DISPUTE RESOLUTION CENTER OF WEST MICHIGAN	38-2699957	501(C)(3)	6,000.	0.			CAPACITY BUILDING
DOMINION FAMILY SERVICES	38-3293614	501(C)(3)	9,636.	0.			CAPACITY BUILDING
EASTERN MICHIGAN UNIVERSITY	38-2953297	501(C)(3)	8,000.	0.			EDUCATION

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Schedule I-1 (Form 990) 2009

Name of the organization **MICHIGAN NONPROFIT ASSOCIATION** Employer identification number **38-2959692**

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)								
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
<u>EASTERN MICHIGAN UNIVERSITY</u>	<u>38-6005986</u>		<u>151,251.</u>	<u>0.</u>			<u>EDUCATION</u>	
<u>ECUMENICAL SENIOR CENTER</u>	<u>38-3021624</u>	<u>501(C)(3)</u>	<u>5,768.</u>	<u>0.</u>			<u>CAPACITY BUILDING</u>	
<u>FIRST DAY SHOE FUND</u>	<u>20-4881364</u>	<u>501(C)(3)</u>	<u>6,000.</u>	<u>0.</u>			<u>CAPACITY BUILDING</u>	
<u>FITNESS COUNCIL OF JACKSON</u>	<u>38-2738223</u>	<u>501(C)(3)</u>	<u>8,363.</u>	<u>0.</u>			<u>CAPACITY BUILDING</u>	
<u>FLINT CHILDREN'S MUSEUM</u>	<u>38-2329711</u>	<u>501(C)(3)</u>	<u>5,255.</u>	<u>0.</u>			<u>CAPACITY BUILDING</u>	
<u>GENESEE FREE-NET</u>	<u>38-3120768</u>	<u>501(C)(3)</u>	<u>7,146.</u>	<u>0.</u>			<u>CAPACITY BUILDING</u>	
<u>GRAND RAPIDS COMMUNITY FOUNDATION</u>	<u>38-2877959</u>	<u>501(C)(3)</u>	<u>8,000.</u>	<u>0.</u>			<u>EDUCATION</u>	
<u>GRAND RAPIDS DREAM</u>	<u>26-2828146</u>	<u>501(C)(3)</u>	<u>5,396.</u>	<u>0.</u>			<u>CAPACITY BUILDING</u>	

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GRAND TRAVERSE AREA COMMUNITY LIVING MANAGEMENT CORP.	38-2297819	501(C)(3)	5,100.	0.			CAPACITY BUILDING
GRANDVILLE AVENUE ARTS AND HUMANITIES, INC.	38-2297819	501(C)(3)	5,100.	0.			CAPACITY BUILDING
GREAT LAKES CENTER FOR YOUTH DEVELOPMENT	38-3522344	501(C)(3)	16,791.	0.			CAPACITY BUILDING/VOLUNTEERISM
GREATER HOPES FAMILY SERVICES	38-3382535	501(C)(3)	7,146.	0.			CAPACITY BUILDING
HOLBROOK AVENUE CHURCH OF GOD	33-0993350	501(C)(3)	7,464.	0.			CAPACITY BUILDING
HUMAN DEVELOPMENT COMMISSION	38-1792679	501(C)(3)	5,000.	0.			VOLUNTEERISM
IMMANUEL CHRISTIAN REFORMED CHURCH	38-3463709		7,146.	0.			CAPACITY BUILDING
INDEPENDENT SECTOR	52-1081024	501(C)(3)	41,722.	0.			CAPACITY BUILDING

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INGHAM COUNTY COURT	38-6005629		5,000.	0.			EDUCATION
INTERNATIONAL ALLIANCE OF HOPE	38-2018800	501(C)(3)	5,000.	0.			CAPACITY BUILDING
INTERNATIONAL MEDIA EXCHANGE	26-1571388	501(C)(3)	6,146.	0.			CAPACITY BUILDING
INTER-TRIBAL COUNCIL OF MICHIGAN	38-1893519	501(C)(3)	14,330.	0.			PUBLIC POLICY
JACKSON JUNIOR WELFARE LEAGUE	38-6066849	501(C)(3)	6,000.	0.			CAPACITY BUILDING
JACKSON SCHOOL OF THE ARTS ASSOCIATION	38-3581314	501(C)(3)	6,000.	0.			CAPACITY BUILDING
JOINT-RELIGIOUS ORGANIZING NETWORK FOR ACTION AND HOPE	38-1393843		7,146.	0.			CAPACITY BUILDING
KALAMAZOO COUNTY CHILD ABUSE & NEGLECT COUNCIL, INC.	38-2221084	501(C)(3)	6,000.	0.			CAPACITY BUILDING

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KALAMAZOO DEACONS CONFERENCE	38-2018800	501(C)(3)	7,146.	0.			CAPACITY BUILDING
KALAMAZOO COUNTY POVERTY REDUCTION INITIATIVE	26-0256608	501(C)(3)	7,146.	0.			CAPACITY BUILDING
KELSEY COMMUNITY WELLNESS CENTER FOUNDATION, INC.	38-3453261	501(C)(3)	6,000.	0.			CAPACITY BUILDING
KIDS 'N' STUFF: AN INTERACTIVE EXPERIENCE FOR KIDS	38-3580496	501(C)(3)	5,635.	0.			CAPACITY BUILDING
LAKE SUPERIOR STATE UNIVERSITY	38-2576021		40,000.	0.			EDUCATION
LATIN AMERICANS FOR SOCIAL AND ECONOMICAL DEVELOPMENT, INC.	38-1892670	501(C)(3)	15,000.	0.			PUBLIC POLICY
LATIN AMERICANS UNITED FOR PROGRESS	38-2099880	501(C)(3)	8,709.	0.			CAPACITY BUILDING
LEELANAU CHRISTIAN NEIGHBORS INC.	38-3345824	501(C)(3)	7,000.	0.			CAPACITY BUILDING

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LENAWEE COMMUNITY FOUNDATION	38-6095474	501(C)(3)	5,000.	0.			VOLUNTEERISM
LIVING WATER MINISTRIES OF WEST MICHIGAN	20-2158217	501(C)(3)	7,146.	0.			CAPACITY BUILDING
LOVE IN THE NAME OF CHRIST OF NORTHWEST ALLEGAN COUNTY	38-3484039	501(C)(3)	8,114.	0.			CAPACITY BUILDING
LUTHERAN CITY MINISTRIES, INC.	38-3414123	501(C)(3)	5,510.	0.			CAPACITY BUILDING
MADONNA UNIVERSITY	38-1498763	501(C)(3)	25,217.	0.			CAPACITY BUILDING
MARITIME HERITAGE ALLIANCE	38-2528874	501(C)(3)	5,900.	0.			CAPACITY BUILDING
MARYGROVE COLLEGE	38-1358399	501(C)(3)	69,539.	0.			EDUCATION
MICHIGANA CENTER FOR GAMBLING RECOVERY	26-2813704	501(C)(3)	6,000.	0.			CAPACITY BUILDING

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MICHIGAN 2-1-1	05-0609172	501(C)(3)	10,000.	0.			PUBLIC POLICY
MICHIGAN CITIZENS EDUCATION FUND	52-2113282	501(C)(3)	15,000.	0.			PUBLIC POLICY
MICHIGAN STATE UNIVERSITY	38-6005984	501(C)(3)	14,714.	0.			EDUCATION/VOLUNTEERISM
STATE VOICE	20-1115618	501(C)(3)	25,000.	0.			PUBLIC POLICY
MOTT COMMUNITY COLLEGE	38-1914697	501(C)(3)	8,000.	0.			EDUCATION
MT. NEBO MBC	43-2663077	501(C)(3)	5,146.	0.			CAPACITY BUILDING
MY BROTHERS KEEPER OF GENESEE COUNTY	56-2511247	501(C)(3)	6,000.	0.			CAPACITY BUILDING
NAMI WASHTEENAW COUNTY	38-2766001	501(C)(3)	8,146.	0.			CAPACITY BUILDING

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NEIGHBORHOOD SERVICE ORGANIZATION	38-1561624	501(C)(3)	17,500.	0.			PUBLIC POLICY
NONPROFIT ALLIANCE	38-1942332	501(C)(3)	23,790.	0.			PUBLIC POLICY/CAPACITY BUILDING
NONPROFIT NETWORK	38-3444092	501(C)(3)	26,850.	0.			PUBLIC POLICY/CAPACITY BUILDING/VOLUNTEERISM
NORTHSKY NONPROFIT NETWORK	38-2009127	501(C)(3)	11,790.	0.			CAPACITY BUILDING
NORTHWEST DETROIT NEIGHBORHOOD DEVELOPMENT	38-3008144	501(C)(3)	8,000.	0.			EDUCATION
OPEN DOOR AND NEXT DOOR SHELTERS	23-7088427	501(C)(3)	7,146.	0.			CAPACITY BUILDING
PARENT TO PARENT OF SOUTHWEST MICHIGAN	02-0726664	501(C)(3)	6,290.	0.			CAPACITY BUILDING
POH RILEY FOUNDATION	20-0442217	501(C)(3)	8,000.	0.			EDUCATION

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PRIORITY CHILDREN	38-3086969	501(C)(3)	15,000.	0.			PUBLIC POLICY
REACHING OUR COMMUNITY KIDS	38-3541096	501(C)(3)	7,382.	0.			CAPACITY BUILDING
REENTRY ROUNDTABLE	20-1934390	501(C)(3)	7,146.	0.			CAPACITY BUILDING
ROBERT E. WEISS ADVOCACY CENTER FOR CHILDREN & YOUTH	43-2031361	501(C)(3)	6,000.	0.			CAPACITY BUILDING
SAGINAW COUNTY COMMUNITY ACTION COMMITTEE	38-1797894	501(C)(3)	15,000.	0.			PUBLIC POLICY
SANILAC COUNTY KIDS' CONNECTION	20-4109978	501(C)(3)	5,932.	0.			CAPACITY BUILDING
SNAP, INC. PRE SCHOOL	23-7427587	501(C)(3)	7,146.	0.			CAPACITY BUILDING
ST. CLAIR COUNTY RESA	38-1709221		50,000.	0.			EDUCATION

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STUART AREA RESTORATION ASSOCIATION	38-2322813	501(C)(3)	6,000.	0.			CAPACITY BUILDING
STURGIS PUBLIC SCHOOLS	38-6003657	501(C)(3)	8,000.	0.			EDUCATION
THE FREMONT AREA COMMUNITY FOUNDATION	38-1443367	501(C)(3)	8,000.	0.			EDUCATION
GRAND VALLEY STATE UNIVERSITY	38-1684280	501(C)(3)	5,850.	0.			CAPACITY BUILDING
UNITED WAY 211 MIDLAND CALL CENTER	20-8782528	501(C)(3)	6,146.	0.			CAPACITY BUILDING
UNITED WAY OF ST. CLAIR COUNTY	38-1357996	501(C)(3)	5,000.	0.			VOLUNTEERISM
UNIVERSITY OF MICHIGAN	38-6006309		102,651.	0.			EDUCATION
URBAN LEAGUE OF FLINT	38-1358229	501(C)(3)	15,000.	0.			PUBLIC POLICY

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VANGUARD COMMUNITY DEVELOPMENT CORPORATION	38-3201091	501(C)(3)	17,000.	0.			PUBLIC POLICY
VOLUNTEER CENTER OF SOUTHWEST MICHIGAN, INC.	38-2286827	501(C)(3)	5,000.	0.			VOLUNTEERISM
VSA ARTS OF MICHIGAN - GRAND RAPIDS, INC.	84-1698531	501(C)(3)	7,146.	0.			CAPACITY BUILDING
WASHTENAW AREA COUNCIL FOR CHILDREN	38-2245181	501(C)(3)	6,000.	0.			CAPACITY BUILDING
WAYNE STATE UNIVERSITY	38-6028429	501(C)(3)	63,045.	0.			EDUCATION
WEST MICHIGAN GLASS SOCIETY	05-0561644	501(C)(3)	6,000.	0.			CAPACITY BUILDING
WEST MICHIGAN HISPANIC CHAMBER OF COMMERCE, INC	20-1483629		14,999.	0.			PUBLIC POLICY
WEST MICHIGAN TEAM	20-8873170	501(C)(3)	7,146.	0.			CAPACITY BUILDING

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WESTERN MICHIGAN UNIVERSITY	38-6007327	501(C)(3)	31,438.	0.			EDUCATION
WESTSHORE DISPUTE RESOLUTION CENTER	38-3214950	501(C)(3)	5,040.	0.			CAPACITY BUILDING
WIDOWED PERSONS SERVICE	28-2436940	501(C)(3)	5,595.	0.			CAPACITY BUILDING
WOMENS NETWORK INC.	26-2699012	501(C)(3)	7,146.	0.			CAPACITY BUILDING
WOODLAWN PRESCHOOL	38-1391175	501(C)(3)	7,146.	0.			CAPACITY BUILDING
WOODWARD ACADEMY SUPPORT FOUNDATION	38-3398072	501(C)(3)	1,500.	0.			VOLUNTEERISM
YOUTH KARATE-KA ASSOCIATION	38-3403433	501(C)(3)	5,495.	0.			CAPACITY BUILDING



**SCHEDULE J-2**  
(Form 990)

Department of the Treasury  
Internal Revenue Service

**Continuation Sheet for Form 990**

▶ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.  
▶ See the Instructions for Form 990.

OMB No. 1545-0047

**2009**  
Open to Public  
Inspection

Name of the Organization

**MICHIGAN NONPROFIT ASSOCIATION**

Employer Identification number  
**38-2959692**

**Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees**

(A) Name and title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
ANNE ROSEWARNE DIRECTOR	1.00	X					0.	0.	0.	
JACQUELINE TAYLOR DIRECTOR	1.00	X					0.	0.	0.	
DAVID SEAMAN DIRECTOR	1.00	X					0.	0.	0.	
CAROLE TOUCHINSKI, CFRM DIRECTOR	1.00	X					0.	0.	0.	
JOHN SCHNEIDER DIRECTOR	1.00	X					0.	0.	0.	
JENEE VELASQUEZ DIRECTOR	1.00	X					0.	0.	0.	
JAMES PEARL DIRECTOR	1.00	X					0.	0.	0.	
DAVID FIKE DIRECTOR	1.00	X					0.	0.	0.	
BEN BALDUS DIRECTOR	1.00	X					0.	0.	0.	
REGGIE LAGRAND DIRECTOR	1.00	X					0.	0.	0.	
BILL LIEBOLD DIRECTOR	1.00	X					0.	0.	0.	
ELIZABETH SIVER DIRECTOR	1.00	X					0.	0.	0.	
PAULA VANDAM DIRECTOR	1.00	X					0.	0.	0.	
CAROLYN BLOODWORTH DIRECTOR	1.00	X					0.	0.	0.	
KYLE CALDWELL PRESIDENT/CEO	40.00		X				126,200.	0.	21,315.	
DAN THOMPSON COO	40.00		X				80,750.	0.	21,081.	
ANDY WOLBER EMPLOYEE	40.00				X		101,439.	0.	30,542.	

SCHEDULE O  
(Form 990)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on  
Form 990 or to provide any additional information.  
▶ Attach to Form 990.

OMB No. 1545-0047

2009

Open to Public  
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Name of the organization

MICHIGAN NONPROFIT ASSOCIATION

Employer identification number

38-2959692

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

PUBLIC POLICY - IN AFFILIATION WITH THE COUNCIL OF MICHIGAN

FOUNDATIONS, THE ASSOCIATION PROMOTES THE INVOLVEMENT OF MICHIGAN'S

NONPROFIT COMMUNITY IN PUBLIC POLICY BY TRAINING ITS LEADERS, BUILDING

THE CAPACITY OF ITS ORGANIZATIONS AND ENCOURAGING COLLABORATION WITH

PUBLIC POLICYMAKERS.

EXPENSES \$ 813439. INCLUDING GRANTS OF \$ 347016. REVENUE \$ 21685.

NONPROFIT OUTREACH - THE ASSOCIATION SERVES BOTH ITS MEMBERS AND THE

NONPROFIT SECTOR STATEWIDE THROUGH A VARIETY OF PROGRAMS AND SERVICES.

EXPENSES \$ 560210. INCLUDING GRANTS OF \$ 19209. REVENUE \$ 187441.

FORM 990, PART VI, SECTION B, LINE 11: THE 990 IS PRESENTED AND DISCUSSED  
AT A BOARD MEETING AND APPROVED PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C: ANNUAL DISCLOSURES ARE REVIEWED BY  
MANAGEMENT AND THE BOARD OF DIRECTORS

FORM 990, PART VI, SECTION B, LINE 15A: CONSIDER COMPENSATION PAID TO OTHER  
INDIVIDUALS IN SIMILAR POSITIONS AND GEOGRAPHIC AREA AS A BASIS FOR  
COMPENSATION.

FORM 990, PART VI, SECTION C, LINE 19: AVAILABLE THROUGH THE ORGANIZATIONS  
WEBSITE AND UPON REQUEST.

FORM 990, PART XI, LINE 2C:

LHA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990.  
932211  
02-03-10

Schedule O (Form 990) 2009

**SCHEDULE O**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990**

Complete to provide information for responses to specific questions on  
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▶ Attach to Form 990.

OMB No. 1545-0047

**2009**

Open to Public  
Inspection

Name of the organization <b>MICHIGAN NONPROFIT ASSOCIATION</b>	Employer identification number <b>38-2959692</b>
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THE AUDIT COMMITTEE REQUESTS BIDS FOR AUDIT SERVICES. THEY REVIEW THE  
 BIDS AND MAKE A RECOMMENDATION TO THE BOARD. THE BOARD OF TRUSTEES  
 SELECTS THE AUDIT FIRM TO PROVIDE SERVICES. THE COMPLETED AUDIT IS  
 PRESENTED TO, REVIEWED, AND APPROVED BY THE AUDIT COMMITTEE AND THE  
 BOARD OF TRUSTEES.