Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047 2008 Open to Public Inspection

		ilde ocivi		The digunization may have to dood a copy of this feeting of the copy of the co		i inspection
<u>A '</u>	For the	2008 cal	endar y	ear, or tax year beginning , and ending	_	
<u>B</u> _	Check if app	plicable	Please	C Name of organization	D Emplo	yer identification number
	Address ch	ange	use IRS	DOWNTOWN OUTREACH MINISTRIES	_	
一	Name chan		label or print or	Doing Business As	38-	2971961
\equiv		·	type	Number and street (or P O box if mail is not delivered to street address) Room/suite	E Teleph	none number
\sqcup	Initial return		See	414 W COURT ST		
Ш	Termination	n	Specific	City or town, state or country, and ZIP + 4	G Gross rece	epts\$ 249,099
П	Amended re	eturn	Instruc- tions.	FLINT MI 48503	O 0/035 1000	λριο ψ = - γ
\equiv				e and address of principal officer	H(a) Is this	a group return for
Ш	Application	pending	i Maii	e and address on principal officer	affiliate	
					H(b) Are all	affiliates
					include	
			v	501(c) (3) ◄ (insert no) 4947(a)(1) or 527	-	attach a list (see instructions)
<u> </u>		npt status		501(c) (3) ◀ (insert no) 4947(a)(1) or 527		
	Website					exemption number
	Type of org					M State of legal domicile MI
	art I		<u>mm</u> a			
	1 B	riefly de	scribe (the organization's mission or most significant activities		
ø	1	TO P	ROVI	DE FOOD, CLOTHING AND HOUSEHOLD ITEMS TO THOSE IN NEED.	٠	
Ē						
Ë						
Š	2 C	heck thi	s hoy	If the organization discontinued its operations or disposed of more than 25% of its ass	ets	
ŏ	3 N			g members of the governing body (Part VI, line 1a)	3	16
ග්	3 14		-		4	16
Ë⁄2	₫ <u>*</u>		-	pendent voting members of the governing body (Part VI, line 1b)		6
¥	\$ 5 I			employees (Part V, line 2a)	5	
Activities & Governance	¥ 6 T	otal num	iber of	volunteers (estimate if necessary)	6	
F	'a '	otal gros	ss unre	lated business revenue from Part VIII, line 12 column (O)	7a	
	1 D N	et unrela	ated bu	isiness taxable income from Form 990-1; life 34	7b	0
Bygque, C D	"			d grants (Part VIII, line 1h) revenue (Part VIII, line 2g) AUG 2 4 2009		Current Year
ھ	ቀ ^{8 C}			d grants (Part VIII, line 1h)	32,942	228,184
9	_) 9 P	_		revenue (Part VIII, line 2g)	0 001	10 015
ě	野10 lr	rvestme	nt incor	me (Part VIII, column (A), lines 3, 4, and 7d)	3,001	10,915
2	嵬11 ○	ther rev	enue (F	Part VIII, column (A), lines 5, 6d, 8c, 9c, 10 (3-10), U []		10,000
₹				add lines 8 through 11 (must equal Part VIII, column (A), line 12)	35,943	249,099
0	∦ 313 G	Grants ar	nd sımıl	ar amounts paid (Part IX, column (A), lines 1-3)	12,143	35,752
(14 B	enefits p	oaid to	or for members (Part IX, column (A), line 4)		
s	15 S	alaries,	other c	ompensation, employee benefits (Part IX, column (A), lines 5–10)	59,959	95,100
enses	16aP	rofessio	nal fun	draising fees (Part IX, column (A), line 11e)		
þe	ЬТ	otal fund	draising	expenses (Part IX, column (D), line 25) 25,998		
Expe			-		56,787	57,301
					78,889	188,153
		-			7,054	60,946
5 8	8 75 7	CVCIIGO	1000 0	Beginning		End of Year
sets	20 ⊤	otal ass	ets (Pa	rt X, line 16) 27	79,514	340,658
Net Assets or	21 T	otal liabi	ılıtıes (F	Part X, line 26)		198
3 3	22 N				79,514	340,460
	Part II			re Block		
<u> </u>				Ities of perfury I declare that I have examined this return, including accompanying schedules and statements,	and to the he	est of my knowledge
		and	belief, it	t is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which	n preparer has	any knowledge
Sig	an			si lovollon L. Mergo	1 21.	auct 20 2009
He				The file of the fi		51151 0 W JOW J
ne	:I C			ITE OF OFFICER DOUGLAS K. NEDCER TREASURER	Date	
				00 121021 0 0 0 0 0 0 1 1 1 1 1 1 1 1 1		
_			ype or	print name and title		Brongrade identifican sumber
Pa	.:A	Pre	parer's	Date Chec	k if	Preparer's identifying number (see instructions)
			ature	WILLIAM S. MORGAN 7/22/09 emplo	oyed 🕨 느	P00433120
	eparer	,	'e nam-	TAYLOR & MORGAN, CPA, PC	EIN	▶ 38-2401965
US	e Only	I if se	is name If-emplo	CONTRACTOR DESIGNATION OF THE PRINTING D	Phone	
				dZIP+4 FLINT, MI 48532-5491	no D	810-230-8200
Ma	y the IRS	3 discus	s this re	eturn with the preparer shown above? (see instructions)		Yes No
DAA				Paperwork Reduction Act Notice, see the separate instructions.		Form 990 (2008)

DAA For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

<u> </u>				
4d Other program services (D	escribe in Schedule	O)		
(Expenses \$	ınclu	ding grants of \$) (Revenue \$)
4e Total program service exp	enses 🕨 \$	117,521 (Mus	t equal Part IX, Line 25, column (B))	
				Form 990 (2008)

is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A is The organization required to complete Schedule B, Schedule of Contributors? 2 is the organization required to complete Schedule B, Schedule of Contributors? 3 but the cognization required to complete Schedule B, Schedule of Contributors? 4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities on behalf of or in opposition to caradicates for public office? If "Yes," complete Schedule C, Part II 5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and recompring requirement and proxy tas? If "Yes," complete Schedule C, Part II 5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and recompring requirement and proxy tas? If Yes," complete Schedule C, Part II 5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization shaped to provide search or the distribution or investment of amounts in such funds or accounts? If If Yes," complete Schedule D, Part II 5 Obtit the organization receive or hold a consensation essement, including seasements to preserve open space, the environment, hatoric lorid across-protocy essement, including seasements to preserve open space, the environment, hatoric lorid across-protocy organization received to the organization received t		n 990 (2008) DOWNTOWN OUTREACH MINISTRIES 38-29/1961			age 3
1 is the organization described in section 501(c/X) or 4947(a/1) (other than a private foundation)? If "Yes," complete Schedule A 1 is the organization required to complete Schedule B. Schedule of Contributors? 2 is the organization and office? If "Yes," complete Schedule C. Part I 3	<u>P</u>	art IV Checklist of Required Schedules			
single organization required to complete Schedule B. Schedule of Contributors? 3 Did the organization regulared in complete Schedule B. Schedule of Contributors? 4 Section 501(c)(3) organization regulared in contributors and section of the complete Schedule C. Part II 5 Schedule C. Part II 5 Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C. Part II 6 Did the organization maintain and your devised finds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or advocunts? If 'Yes,' complete Schedule C. Part III 7 Did the organization maintain and organization subject to the section 6033(e) notice and reporting requirement and proxy lax' If 'Yes,' complete Schedule C. Part III 8 Did the organization maintain and organization in such funds or advocunts? If 'Yes,' complete Schedule C. Part III 9 Did the organization maintain and offections of vorks of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D. Part II 9 Did the organization maintain and offections of vorks of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D. Part IV 10 Did the organization maintain and maintain I Part X, line 21, serve as a custodan for amounts not listed in Part X, or provide cride tourseling, debt management, crided repair, or debt negolitation services? If 'Yes,' complete Schedule D. Part IV 10 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25° If 'Yes,' complete Schedule D. Part IV 10 Did the organization receive an audited financial statement for the year for which it is completes Schedule D. Part V. VIII X, or X as applicable 11 Did the organization receive an audited financial statement for the year for which it is complete Schedule D. Part VIII VIII X, or X as applicable 11 Did the organization receive an audited financial statement for the year for which it is complete Schedule D. Part II VIII X, or		to the exposuration decombed to continue 504/a)/2) or 4047/a)/4) (other than a provide foundation)? If "Voc."		Yes	No_
2 X Dot the organization required to complete Schedule B, Schedule of Contributors? 2 Dot the organization engage in direct or indered profited profited campaign activities? If "Yes," complete Schedule C, Part I Schedule	1			x	
3 Die the organization regage in direct or undirect political campalign activities on behalf of or in opposition to candidates for public office? If very, complete Schedule C, Part II 5 Section 50 f(c)(3) organizations. Did the organization engage in lobbying activities? If Yes," complete Schedule C, Part II 5 Section 50 f(c)(4), 90 f(c)(5), and 50 f(c)(6) organizations. Is the organization subject to the section 6003(e) notice and reporting requirement and proxy lax? If Yes," complete Schedule C, Part III 5 Did the organization maintain and yoken advised finds or any accountary if Yes," complete Schedule C, Part III 7 Did the organization maintain and yoken advised finds or any accountary if Yes," complete Schedule C, Part III 8 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic fand areas, or historic structures? If Yes," complete Schedule D, Part II 9 Did the organization maintain and ollections of works of art, historical treasures, or other smittal assets of If Yes," complete Schedule D, Part II 10 Did the organization maintain amount in Part X, line 21, serve as a custodan for amounts not listed in Part X, or provide cord counseling, debt management, codiff repair, or debt regolatation services? If If Yes," complete Schedule D, Part IV 10 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25° If Yes," complete Schedule D, Part V V II 10 Did the organization receive an audited financial statement for the year for which it is completes Schedule D, Part V V III X, or X as applicable 11 Did the organization receive an audited financial statement for the year for which it is completes Schedule D, Part V V V V V V V V V V V V V V V V V V V	2				
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7 Did the organization receive or hold a conservation essement, including easements to preserve open space, the environment, histonic land areas, or histonic structures? If "Yes," complete Schedule D, Part III 7 X X complete Schedule D, Part III 7 X X provide credit counseling, debt management, credit repair, or debt negolation services? If "Yes," complete Schedule D, Part IV 1 Did the organization or port 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 negolation services? If "Yes," complete Schedule D, Part IV 1 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 1 1 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Part S IV, IV, IVII, IV, X or X as applicable 1 1 X X 1 Sib ne organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAPP If "Yes," complete Schedule D, Part S IV, IV, IVII, IV, X or X as applicable 1 1 X X 1 Sib ne organization as school described in section 170(b)(1)(A)(n)? If "Yes," complete Schedule E 1 1 X X 1 Sib ne organization as action as a school described in section 170(b)(1)(A)(n)? If "Yes," complete Schedule E 1 1 X X 1 X X 1 X X X Y X Y X Y X Y X Y		provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
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complete Schedule D, Part III Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25° If "Yes," complete Schedule D, Part V Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25° If "Yes," complete Schedule D, Part V Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 12			7		<u> </u>
9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V 10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 Did the organization hold assets an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Part V 11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Part V 12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the U.S." If "Yes," complete Schedule E 15 Did the organization maintain an office, employees, or agents outside of the U.S. Part I 16 Did the organization or eport on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 18 X 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule F, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule I, Part II II 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule I, Part I I III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule	8	·			v
x, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part V 10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Part VI, VII, VII, X, or Xa sa applicable 12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 13 Is the organization as chool described in section 17(0)(I/A)(VI) If "Yes," complete Schedule E 13 X 14 Ib did the organization maintain an office, employees, or agents outside of the U S? 15 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S? If "Yes," complete Schedule F, Part II 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garls or assistance to any organization or enthy located outside the United States? If "Yes," complete Schedule F, Part III 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 X 18 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part III 18 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III 19 X 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III 21 Did the organization operate one or more hospitals? If "Yes," complete Schedule I, Parts I and III 22 X 23 Did the organization operate one or more hospitals? If "Yes," complete Schedule I, Parts I and III 24 Did the organization have a tax-exempt bond issue with an outstandi	_	·	8		
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10 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25°; If "Yes," complete Schedule D, Part V I I Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25°; If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable 11					x
11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25° If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable 12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAPP If "Yes," complete Schedule D, Parts XI, XII, and XIII 13 Is the organization a school described in section 170(b)(1)A(n)r) If "Yes," complete Schedule E 13 X 14 Did the organization maintain an office, employees, or agents outside of the U.S.? 15 Did the organization have aggregate revenues or expenses of more than \$1,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part II 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part II 16 Did the organization orport on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization orport more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 18 Did the organization orport more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part III 19 Did the organization orport more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule I, Parts I and III 19 Did the organization orport more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule I, Parts I and III 20 Did the organization report more than \$15,000 on Part IX, column (A), line 12e If "Yes," complete Schedule I, Parts I and III 21 Did the organization or than School on Part IX, column (A), line 12e If "Yes," complete Schedule I, Parts I and III 21 Did the organizati	10				×
Parts VI, VII, VIII, IX, or X as applicable 12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 13 Is the organization a accordance with GAAP? If "Yes," complete Schedule E 13 X 14a Did the organization maintain an office, employees, or agents outside of the U.S? 15 Did the organization maintain an office, employees, or agents outside of the U.S? 15 Did the organization report and aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part II 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 17 Did the organization report more than \$15,000 on Part IX, column (A), line 14; "Yes," complete Schedule F, Part II 18 Did the organization report more than \$15,000 on Part IX, column (A), line 14; "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 on Part IX, column (A), line 14; "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 on Part IX, column (A), line 17; "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III 19 Did the organization report more than \$15,000 on Part IX, column (A), line 17; "Yes," complete Schedule I, Parts I and III 20 Did the organization report more than \$5,000 on Part IX, column (A), line 17; "Yes," complete Schedule I, Parts I and III 21 Did the organization report more than \$5,000 on Part IX, column (A), line 17; "Yes," complete Schedule I, Parts I and III 22 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$10,000 as of the last day of the year, that was			1.0		
12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII 13 Is the organization a school described in section 170(b)(1)(A)(ii) If "Yes," complete Schedule E 13 X 14a Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S? If "Yes," complete Schedule F, Part II 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garls or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part III 19 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part III 19 X 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III 21 Did the organization report more than \$15,000 on Part IX, column (A), line 12e If "Yes," complete Schedule I, Parts I and III 22 Did the organization report more than \$5,000 on Part IX, column (A), line 12es," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and III 23 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 24 Did the organiz	•		11	х	
that was prepared in accordance with GAAP? if "Yes," complete Schedule D, Parts XI, XII, and XIII 13 is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14 is the organization maintain an office, employees, or agents outside of the U S? 15 bid the organization maintain an office, employees, or agents outside of the U S? 16 bid the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U S? If "Yes," complete Schedule F, Part II 16 bid the organization report on Part IX, column (A), line 3, more than \$5,000 of garginats or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part III 17 bid the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 18 bid the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 19 bid the organization report more than \$15,000 on Part IXII, line 93 if "Yes," complete Schedule G, Part III 19 bid the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III 19 bid the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III 20 bid the organization operate one or more hospitals? If "Yes," complete Schedule I, Parts I and II 21 bid the organization operate one or more hospitals? If "Yes," complete Schedule I, Parts I and II 22 bid the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and II 23 bid the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and II 24 bid the organization have a tax-exempt bond issue with an outstanding principal amount of more than 25 should be organization maintain an escrow account o	12				
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E 14a Did the organization maintain an office, employees, or agents outside of the U.S.? 15 Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part II 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part II 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 on Part IX, line 9a? If "Yes," complete Schedule G, Part II 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$5,000 on Part IX, column (A), line 12! If "Yes," complete Schedule I, Parts I and II 20 Did the organization report more than \$5,000 on Part IX, column (A), line 12! If "Yes," complete Schedule I, Parts I and II 21 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 6? If "Yes," complete Schedule I, Parts I and III 22 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 questions 24b—24d and complete Schedule K If "No," go to question 25. 25 Did the organization ma			12		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 U S ? If "Yes," complete Schedule F, Part I 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of garits or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 on Part IXI, line 9a? If "Yes," complete Schedule G, Part II 19 Did the organization operate one or more hospitals' If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals' If "Yes," complete Schedule G, Part III 19 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 20 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and III 21 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and III 23 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 questions 24b-24d and complete Schedule K If "No," go to question 25. 24a Did the organization maintain an escrow account other than a refunding escrow at any time during the year 25b Did the organization maintain an escrow account other than a refunding escrow at any time duri	13	·	13		X
business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization report more than \$15,000 on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part III 19 X 10 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III 19 X 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III 21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and III 22 X 23 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and III 22 X 23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and III 23 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 questions 24b—24d and complete Schedule K. If "No," go to question 25. 24a X 25 Did the organization invest any proceeds of tax-exempt bonds beyond a temporary peniod exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year 24c Use of the organization become aware that it had engaged in an	14a	Did the organization maintain an office, employees, or agents outside of the U S ?	14a		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III 19 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and III 20 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 21 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 X 23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and III 22 X 23 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 questions 24b—24d and complete Schedule K If "No," go to question 25. 25 Did the organization maintain an escrow account other than a refunding escrow at any time during the year 26 Did the organization maintain an escrow account other than a refunding escrow at any time during the year? 25 Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," comp	b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,			
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16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 on Part IXIII, lines 1c and 8a? If "Yes," complete Schedule G, Part III 19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III 19 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III 20 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and II 21 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and III 22 X 23 X 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b–24d and complete Schedule K If "No," go to question 25. 24a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25b X 26 Was a loan to or by a current or former officer, director, trustee, key employee, or disqualified person outstanding as of the end of the organization's tax year' If "Yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assist	15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any			
to individuals located outside the United States? If "Yes," complete Schedule F, Part III 17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 18 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III 19 X 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III 21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and III 22 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and III 23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and III 24 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 questions 24b-24d and complete Schedule K If "No," go to question 25. b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24c Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25b X 26 Was a loan to or by a current or former officer, director, trustee, key employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or		organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		X
17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part II 18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II 19 Did the organization operate one or more than \$15,000 on Part VIII, lines 9a? If "Yes," complete Schedule G, Part III 19 X 20 Did the organization operate one or more hospitals? If "Yes," complete Schedule G, Part III 21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and III 22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 22 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule I, Parts I and III 23 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than 3100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K If "No," go to question 25. b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization an 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? 24d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25b X 26 Was a loan to or by a current or former officer, director, trustee, key employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II 26 X 27 Did the organization provide a grant or other assista	16				
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27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or	20		26		x
	27		20	<u> </u>	-
Substantial contributor, or to a person related to such an individual? If thes, complete scriedule L. Fart III		substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		x

Part IV	Checklist of Required Schedules	(continued)
	.	

	·		Yes	No_
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			
	employee), or an indirect business relationship through ownership of more than 35% in another entity			
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			
	Part IV	28a		<u> </u>
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			
	complete Schedule L, Part IV	28b		<u> </u>
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		<u> </u>
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	-		
	Part I	31	<u>. </u>	X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	İ		
	Schedule N, Part II	32	<u> </u>	<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33	ļ. —	X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34	ļ	<u> </u>
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	35	<u> </u>	X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36	ļ	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	37		X
		Earr	~ uuli	(2008)

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance				
	•			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of				
	U S Information Returns Enter -0- if not applicable	1a 0	-		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0	-		
C	Did the organization comply with backup withholding rules for reportable payments to vendors and rep	оопаріе			x
_	gaming (gambling) winnings to prize winners?	1 1	1c		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax	2a 6			
	Statements, filed for the calendar year ending with or within the year covered by this return		2b		x
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returnates. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see	115 :	10		
	instructions)				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covere	d by			
Ju	this return?		3a	l	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O		3b_		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other fin	ancial	•		
	account)?		4a		<u> </u>
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				.
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transactions and taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction.		5b		
С	If "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity		50		
_	Regarding Prohibited Tax Shelter Transaction?		5c 6a	-	x
6a	Did the organization solicit any contributions that were not tax deductible? If "Yes," did the organization include with every solicitation an express statement that such contribution.	one or	Ua_	<u> </u>	
b	qifts were not tax deductible?) (15 OI	6b		
7	Organizations that may receive deductible contributions under section 170(c).				
a	Did the organization provide goods or services in exchange for any quid pro quo contribution of more	than			
-	\$75?		7a		X _
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as			
	required to file Form 8282?	r i	7c	<u> </u>	X_
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	4	1	
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a p	ersonal		1	.,
	benefit contract?	.0	7e	 	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr		7f	 	X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		7 <u>g</u>		-
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-0	o do	7h		x
8	required? Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sec	tion	1		1
Ū	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a spot				
	organization, have excess business holdings at any time during the year?	· ·	8]	X
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.				
а	Did the organization make any taxable distributions under section 4966?		9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?		9b	<u> </u>	X
10	Section 501(c)(7) organizations. Enter	1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a	4		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	-		
11	Section 501(c)(12) organizations. Enter	11			
a	Gross income from members or shareholders	11a	-		
b	Gross income from other sources (Do not net amounts due or paid to other sources against	11b			
120	amounts due or received from them) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		12a	1	1
12a b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1041 12b		1	†

38-2971961 Form 990 (2008) DOWNTOWN OUTREACH MINISTRIES Page 6 Governance, Management, and Disclosure (Sections A, B, and C request information about policies not Part VI required by the Internal Revenue Code.) Section A. Governing Body and Management Yes No For each "Yes" response to lines 2-7b below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O See instructions 16 Enter the number of voting members of the governing body 16 **b** Enter the number of voting members that are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with X 2 any other officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct 3 X 3 supervision of officers, directors or trustees, or key employees to a management company or other person? X Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed? 4 4 $\overline{\mathbf{x}}$ 5 Did the organization become aware during the year of a material diversion of the organization's assets? 6 Does the organization have members or stockholders? 6 7a Does the organization have members, stockholders, or other persons who may elect one or more members X 7a of the governing body? X 7b b Are any decisions of the governing body subject to approval by members, stockholders, or other persons? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X 8a The governing body? X Each committee with authority to act on behalf of the governing body? 8b X 9a Does the organization have local chapters, branches, or affiliates? If "Yes," does the organization have written policies and procedures governing the activities of such chapters, 9Ь affiliates, and branches to ensure their operations are consistent with those of the organization? Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations 10 X 10 must describe in Schedule O the process, if any, the organization uses to review the Form 990 Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reached at 11 X the organization's mailing address? If "Yes," provide the names and addresses in Schedule O 11 Section B. Policies Yes No X 12a 12a Does the organization have a written conflict of interest policy? If "No," go to line 13 b Are officers, directors or trustees, and key employees required to disclose annually interests that could give 12b rise to conflicts? Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c describe in Schedule O how this is done Does the organization have a written whistleblower policy? 13 13 14 14 Does the organization have a written document retention and destruction policy? 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision 15a The organization's CEO, Executive Director, or top management official? 15b Other officers or key employees of the organization? Describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement X 16a with a taxable entity during the year? If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard 16b the organization's exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed **None** Section 6104 requires an organization to make its Form 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 X Upon request Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest 19 policy, and financial statements available to the public State the name, physical address, and telephone number of the person who possesses the books and records of the 20

414 W COURT ST

MI 48503

810-234-2479

FLINT

organization > BRENDA WOODS

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

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

- 1a Complete this table for all persons required to be listed. 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, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- 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 or	rganization did not comp	<u>ensat</u>	e an	y offi	cer,	dire	ctor,	trustee, or key employee	, 	<u> </u>		
(A)	(B)	D	. /	()) 		I-A	(D)	(E)	(F) Estimated		
Name and Title	Average hours per week	or director		Officer		a Highest compensated employee		Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations		
BRENDA WOODS												
EX DIRECTOR	40					<u> </u>	<u> </u>	20,243	0	0		
SEE ATTACHED	LIST					i		0	o	о		
			-	-		-	-					
		-		-			_					
		+-			_		-	1				
		-										
		\perp			_	<u> </u>						
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			ĺ									

Form	990 (2008) DOWN	NTOWN OUTREA	CH N	<u> </u>	IIS	TR	IE	<u>s_</u>	38-297				Page
	rt VII Section A	A. Officers, Directors, T	rustee	s, Ke	y Er	nplo	yees	s, an	d Highest Compensated	Employees (continued)			
	(A) Name and title	(B) Average	_ _		checl		hat a		(D) Reportable	(E) Reportable		nated	
		hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	compe from organ and r	ner nsation the	
			+-								-		
		!	 -										
			-										
				<u> </u>		ļ					-		
				-									
<u> </u>	Total			<u> </u>]	<u> </u>	L	▶	20,243	3			-
2	-	dividuals (including those	ın 1a)	who	гесе	eived	moi	·	an \$100,000 in reportable				
-	_	n ket opv former officer	directo	ror	tructi	00 1	· • · • •	mple	oyee, or highest compensa	ated .		Yes	No
3	employee on line 1. For any individual li	a? If "Yes," complete Sc isted on line 1a, is the su	hedule ım of re	J fo	r suc table	h inc	dividi npen	ual satic	on and other compensations," complete Schedule J fo	n from	3		X
5	ındıvıdual	•							ny unrelated organization for		4	-	X
		to the organization? If "Y									5	1	X
1		for your five highest cor	mpens	ated	ınde	pend	dent	cont	ractors that received more	than \$100,000 of	···		
	Componication nom	(A) Name and business address							Descri	(B) ption of services		(C) Compen	sation
			_						·····				-
			<u>.</u>			•		-		······································			
2			ncludin	g the	se ir	າ 1)	who	rece	eived more than \$100,000 i	n			
<u> </u>	compensation from	the organization										0 m 99	n (200

Pa	rt V	III Staten	ent of Rev	⁄enu€)					
-		•					(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections
s s	10	Fodorated com	noige	1 10				revenue		512, 513, or 514
ant	1a	Federated carr	-	1a 1b	-					
g.	D	Membership de		1c						
ifts	٥	Fundraising ev		1d						
s, g	a	Related organi Government grants (1e	··					
ion	e	All other contribution	•	"						
but		and similar amounts		1f	2	28,184				
ntri d o		Noncash contribution	ne included in lines							
Program Service Revenue Contributions, gifts, grants and other similar amounts	9 h	Total. Add line		ia-ii v	,	•	228,184			
-er		Total: / too iiiic	3 14 11			Busn. Code	,			
en.	2a					1				
Re	b									
ice	С									
Sen	d									
E	е									
ogra	f	All other progra	am service re	venue						
P	g	Total. Add line	s 2a–2f			•				
	3	Investment inc	ome (includin	g dıvıd	ends, intere	est, and				
		other similar ai	mounts)			▶	10,915			10,915
	4	Income from in	nvestment of t	ax-exe	mpt bond p	roceeds 🕨				
	5	Royalties				•				
			(ı) Rea	<u> </u>	(II) F	Personal				
	6a	Gross Rents			1					
	b	Less rental exps			-					
	С	Rental inc or (loss)								
	d 7a	Net rental inco Gross amount from			1 7	011				
		sales of assets	(ı) Securi	ties) Other				
		other than inventory								
	Ь	Less cost or other								
		basis & sales exps Gain or (loss)			-					
	d	Net gain or (los	se)							
	i	Gross income from	-	vents						
e	""	(not including \$	m ramarationing o							
en		of contributions r	eported on line	1c)						
Other Revenue		See Part IV, line	-	•	a					
er	b	Less direct ex		1	o .	-				
ŧ	С	Net income or	(loss) from fu	ndraisi	ng events	•				
	9a	Gross income fro	om gaming activ	ities						
		See Part IV, line	19		a					
	b	Less direct ex	penses	J	b					
		Net income or			ctivities	•				
	10a	Gross sales of	-	SS						
		returns and all			a					
		Less cost of g			b [
	<u> </u>	Net income or			nventory	Duran Outs				<u> </u>
			ellaneous Rever	nue	.	Busn. Code	10.000	10 000		
	11a	Misc Inco	me				10,000	10,000		
	b									
	9	All other								
	d	All other reven Total. Add line				•	10,000			
	12	Total Revenue		h 2a 3	4 5 64	· •	10,000			
	' -	9c, 10c, and 1		· · · · 29 · ·	, , , , , , , , , ,	, u, oo,	249,099	10,000	0	10,915
								,		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

	All other organizations must co		e not required to complet	te columns (B), (C), and (D	
	not include amounts reported on lines 6b, , 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
	Grants and other assistance to governments and				
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
_	the U.S. See Part IV, line 22	35,752	35,752		
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	20,243		20,243	
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	68,246	51,184	8,531	8,531
8	Pension plan contributions (include section 401(k)		02/201		
0	and section 403(b) employer contributions)				
9	Other employee benefits				
_	Payroll taxes	6,611	4,959	826	826
10 11	Fees for services (non-employees):		-,,,,,,,		
	` ' ' '				
a		····			
b	T F	6,271	4,703	784	784
C		0,2/1	4,703	703	704
	Lobbying Co. Red IV has 17				
е	· F				
f	Investment management fees				
9					
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties	6 552	4 015	819	819
16	Occupancy	6,553	4,915	019	019
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	-			
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	10.760		10.760	
22	Depreciation, depletion, and amortization	10,762		10,762	
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)	10 366			10 260
a		12,369	6 44 5	1 000	12,369
b	MAINTENANCE/RENTAL	8,551	6,413	1,069	1,069
C	INSURANCE	3,308	2,480	414	414
d	MISCELLANEOUS	2,660	1,994	333	333
е	TRASH REMOVAL	2,273	1,705	284	284
f		4,554	3,416	569	569
25	Total functional expenses. Add lines 1 through 24f	188,153	117,521	44,634	25,998
26	Joint Costs. Check here 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	<u> </u>			Form 990 (2008)

P	art)	(Balance Sheet										
					(A)		(B)					
		· · · · · · · · · · · · · · · · · · ·			Beginning of year		End of y	_				
	1	Cash—non-interest bearing			112,687	_1_		6,3				
	2	Savings and temporary cash investments			116,827	2	15	4,7	86			
	3	Pledges and grants receivable, net		_		3						
	4	Accounts receivable, net		_		4						
	5	Receivables from current and former officers, directors, t					ļ					
		employees, or other related parties Complete Part II of S				5						
	6	Receivables from other disqualified persons (as defined		t e e e e e e e e e e e e e e e e e e e								
		4958(f)(1)) and persons described in section 4958(c)(3)(B). Co	mplete		_						
		Part II of Schedule L		<u> </u>		6	 					
ets	7	Notes and loans receivable, net		<u> </u>		7	 					
Assets	8	Inventories for sale or use	8									
Ä	9	Prepaid expenses and deferred charges	۱	70 300		9_	 					
	10a		10a	70,300								
	b	Less accumulated depreciation Complete	405	10,762	50,000	10c	5	9,5	:38			
		Part VI of Schedule D	10b	10,702	50,000	11	 	<i></i>				
	11	Investments—publicly traded securities		-		12						
	12	Investments—other securities. See Part IV, line 11 Investments—program-related See Part IV, line 11		-		13						
	13	Intangible assets				14	 	_				
	14 15	Other assets See Part IV, line 11				15	<u> </u>					
	16	Total assets. Add lines 1 through 15 (must equal line 34	1)		279,514	16	34	0,6	558			
	17	Accounts payable and accrued expenses				17			98			
	18	Grants payable				18						
		19 Deferred revenue 19										
	20	Tax-exempt bond liabilities				20						
es.	21	Escrow account liability. Complete Part IV of Schedule D)			21						
Liabilities	22	Payables to current and former officers, directors, truste		v T								
ģ		employees, highest compensated employees, and disqu		• • • • • • • • • • • • • • • • • • •								
Ë		persons Complete Part II of Schedule L				22						
	23	Secured mortgages and notes payable to unrelated third	partie	es		23						
	24	Unsecured notes and loans payable				24	ļ					
	25	Other liabilities. Complete Part X of Schedule D				25						
	26	Total liabilities. Add lines 17 through 25				26		1	<u> 198</u>			
ces		Organizations that follow SFAS 117, check here ▶	anc	ı								
Š		complete lines 27 through 29, and lines 33 and 34.										
Balan	27	Unrestricted net assets				27	 					
ñ	28	Temporarily restricted net assets		-		28	 					
or Fund	29	Permanently restricted net assets	. t	<u></u> -		29						
F		Organizations that do not follow SFAS 117, check her	e► [X								
ō		and complete lines 30 through 34.					1					
its	30	Capital stock or trust principal, or current funds		<u> </u>		30	+					
Assets	31	Paid-in or capital surplus, or land, building, or equipmen		, . F	279,514	31	3/	0,4	160			
Ä	32	Retained earnings, endowment, accumulated income, o	r otnei	· funas	279,514	32		0,4				
Net	33	Total net assets or fund balances		-	279,514	33 34		0,6				
	34	Total liabilities and net assets/fund balances			219,314	34		. O , t	, , , ,			
	art :	XI Financial Statements and Reporting						Yes	No			
1	۵۵	counting method used to prepare the Form 990.	ash	X Accrual Oth	er							
2:		ere the organization's financial statements compiled or rev					2a	[X			
		ere the organization's financial statements audited by an i		•	 -		2b		X			
		"Yes" to lines 2a or 2b, does the organization have a community			or oversight of							
`		e audit, review, or compilation of its financial statements a					2c	_]	_			
3		s a result of a federal award, was the organization required										
		e Single Audit Act and OMB Circular A-133?		•			3a					
_ 1		"Yes," did the organization undergo the required audit or a	udıts?				3b					
							Form	ggn	(2009			

SCHEDULE A

(Form 990 or 990-EZ)

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

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

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

DOWNTOWN OUTREACH MINISTRIES

Employer identification number 38-2971961

_Pa	art I	Reas	on for Public Charity	Status (All organizations	must c	complet	e tnis	paπ.) (see ir	istruc	tions)			
The	orga	nızation ıs not	a private foundation becaus	e it is (Please check only one o	organızatı	on.)								
1	Ц	A church, cor	nvention of churches, or asse	ociation of churches described i	ın sectior	170(b)(1)(A)(i).							
2	Ц	A school des	cribed in section 170(b)(1)(/	A)(ii). (Attach Schedule E.)										
3	Ш	A hospital or	a cooperative hospital service	ce organization described in sec	ction 170	(b)(1)(A)(i	iii). (Atta	ch Sche	edule H)				
4		A medical res	search organization operated	d in conjunction with a hospital o	described	ın sectio	n 170(b)	(1)(A)(ii	ii). Ente	r the ho	spital's nai	ne,		
	_	city, and state	е											
5		An organizatı	on operated for the benefit of	of a college or university owned	or operat	ed by a go	overnme	ntal uni	t descri	bed in				
	_	section 170(b)(1)(A)(iv). (Complete Part	II)										
6	Ш	A federal, sta	ite, or local government or g	overnmental unit described in s	ection 17	0(b)(1)(A)(v).							
7	X	An organizati	on that normally receives a	substantial part of its support fro	om a gove	ernmental	unit or f	rom the	genera	l public	;			
		described in s	section 170(b)(1)(A)(vi). (Co	omplete Part II)										
8	Ц	A community	trust described in section 1	70(b)(1)(A)(vi). (Complete Part	: II)									
9	Ш	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												
	$\overline{}$	•	-	0, 1975 See section 509(a)(2).	•									
10	Н	-	-	exclusively to test for public safe										
11	Ш	•	•	exclusively for the benefit of, to										
		•		ed organizations described in se						section	l			
				he type of supporting organizati			. 1			h.a.				
_	П	a ∐ Type	<u> </u>	c Type III-Function			d		e III–Ot					
е	Ш		•	anization is not controlled direc and other than one or more put	-						,			
		•	section 509(a)(2).	and other than one of more put	uliciy sup	Jorted Org	ailizatio	iis desc	iibea iii	360001	'			
f				rmination from the IRS that it is	a Tyne I	Tyne II (or Type	III sunna	orting					
•		•	check this box	initiation from the fixe that it is	a Type I	i ypo ii, t	J. 1, p.c	ш эаррс	, u					\Box
g		_		tion accepted any gift or contrib	ution from	any of th	ne							لــا
9		following per	_	act, accepted any gift of contains		,								
				ontrols, either alone or together	with perso	ons descr	ıbed ın (n)				Ţ,	Yes	No
		•	•	f the supported organization?			`	,			110	\neg		
			member of a person describ									ı(ii)	\neg	
			•	described in (i) or (ii) above?								J (111)		
h			•	he organizations the organization	on suppor	ts								
	Nam	e of supported	(II) EIN	(iii) Type of organization		organization	(v) Did v	ou notify	(vi)	s the	(vii)	Amou	int of	
(-,		anization	(11) 2	(described on lines 1-9	1 ' '	sted in your		nization in	organizat			uppor		
				above or IRC section	governing	document?		of your		zed in the S ?				
			· · · · · · · · · · · · · · · · · · ·	(see instructions))	Yes	No	Yes	nort?	Yes	No				
					+	1			1					
			<u> </u>	<u> </u>	 									
				_										
								-						
					 	<u> </u>		ļ						
Tota	1					1								

10%-facts-and-circumstances test—2007. 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 stop here. Explain in Part IV how the

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

Schedule A (Form 990 or 990-EZ) 2008

18

Page 3

38	-2	97	1	a	6	1

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

Sec	tion A. Public Support						
Cal	endar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	luna_					
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an 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 1-5	-				ļ	
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
C	Add lines 7a and 7b				 	 	
8	Public support (Subtract line 7c from line 6)						
Sac	tion B. Total Support	L		<u> </u>	. <u>F</u>		
$\overline{}$	lendar year (or fiscal year beginning in) ▶	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	(4) 2004	(5) 2000	(6) 2000	(4) 2001	(0,200	(.,
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
13	Total support. (Add lines 9, 10c, 11,						<u> </u>
	and 12.)						
14	First five years. If the Form 990 is for the organization, check this box and stop here		st, second, third, fo	urth, or fifth tax ye	ear as a section 50	11(c)(3)	▶ □
Sec	tion C. Computation of Public Su		itage				
15	Public support percentage for 2008 (line 8			nn (f))		15	%
16	Public support percentage from 2007 Scho					16	%
Sec	tion D. Computation of Investme						
17	Investment income percentage for 2008 (I			3, column (f))		17	%
18	Investment income percentage from 2007	Schedule A, Part	IV-A, line 27h			18	%
19a	33 1/3 % support tests—2008. If the orga			e 14, and line 15	s more than 33 1/	3 %, and line	
	17 is not more than 33 1/3 %, check this b						▶
b	33 1/3 % support tests—2007. If the orga						ŗ
	line 18 is not more than 33 1/3 %, check the						▶ _
20	Private foundation. If the organization did	I not check a box	on line 14, 19a or	19b, <u>check th</u> is bo	x and see instruct	ions	<u> </u>

Page 4

Schedule A (Form 990 or 990-EZ) 2008 DOWNTOWN OUTREACH MINISTRIES 38-2971961

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

Schedule A (Form 990 or 990-EZ) 2008

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

▶ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. OMB No 1545-0047 Open to Public Inspection

Name of the organization

Employer identification number

	•		
	OWNTOWN OUTREACH MINISTRIES		38-2971961
Pa	Organizations Maintaining Donor Advised Futhe organization answered "Yes" to Form 990,	ınds or Other Similar Funds or . Part IV line 6	Accounts. Complete if
	the organization answered Tes to Form 550,	(a) Donor advised funds	(b) Funds and other accounts
4	Total number at and of year	(a) Bonor advised rands	(b) Funds and other accounts
1	Total number at end of year Aggregate contributions to (during year)		
3	Aggregate contributions to (during year) Aggregate grants from (during year)		
A	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in writing the	at the assets held in donor advised	l
	funds are the organization's property, subject to the organization's exc		☐ Yes ☐ No
6	Did the organization inform all grantees, donors, and donor advisors in		
	used only for charitable purposes and not for the benefit of the donor of	• •	
	impermissible private benefit?		Yes No
Pá	art II Conservation Easements. Complete if the org	anization answered "Yes" to For	rm 990, Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization (chec	k all t <u>ha</u> t apply)	
	Preservation of land for public use (e.g., recreation or pleasure)	Preservation of an historically in	nportant land area
	Protection of natural habitat	Preservation of certified historic	structure
	Preservation of open space		
2	Complete lines 2a-2d if the organization held a qualified conservation	contribution in the form of a conservation	n easement
	on the last day of the tax year		
			Held at the End of the Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic structure inc	cluded in (a)	2c
d	Number of conservation easements included in (c) acquired after 8/17		2d
3	Number of conservation easements modified, transferred, released, e	xtinguished, or terminated by the organization	ation during
	the taxable year		
4	Number of states where property subject to conservation easement is		
5	Does the organization have a written policy regarding the periodic mor	nitoring, inspection, violations, and	
	enforcement of the conservation easements it holds?		∐ Yes ☐ No
6	Staff or volunteer hours devoted to monitoring, inspecting, and enforce		
7	Amount of expenses incurred in monitoring, inspecting, and enforcing		
8	Does each conservation easement reported on line 2(d) above satisfy 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?	the requirements of section	Yes No
a	In Part XIV, describe how the organization reports conservation easer	ments in its revenue and expense statems	
•	balance sheet, and include, if applicable, the text of the footnote to the		
	the organization's accounting for conservation easements		
Pa	art III Organizations Maintaining Collections of Art	, Historical Treasures, or Other	Similar Assets.
	Complete if the organization answered "Yes" to	o Form 990, Part IV, line 8.	
	•		
1a	If the organization elected, as permitted under SFAS 116, not to report	rt in its revenue statement and balance sh	neet works of
	art, historical treasures, or other similar assets held for public exhibition	on, education, or research in furtherance o	of public service,
	provide, in Part XIV, the text of the footnote to its financial statements	that describes these items.	
b	If the organization elected, as permitted under SFAS 116, to report in		
	historical treasures, or other similar assets held for public exhibition, e	education, or research in furtherance of pu	ublic service,
	provide the following amounts relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works of art, historical treasures, or		rovide the
	following amounts required to be reported under SFAS 116 relating to	these items	
a	Revenues included in Form 990, Part VIII, line 1		5
b	Assets included in Form 990, Part X		▶ \$

Sche		OUTREACH MINI			<u>3-29719</u>			Page 2
Pa	rt III Organizations Maintaining	Collections of Art, I	Historical Trea	sures, or C	Other Simi	ar Asset	s (continu	ued)
.3	Using the organization's accession and other items (check all that apply)	records, check any of the	following that are a	significant us	e of its collec	tion		
а	Public exhibition	d 🔲 Loan o	r exchange prograi	ns				
b	Scholarly research	e Other						
C	Preservation for future generations	_						
4	Provide a description of the organization's co Part XIV	llections and explain how t	hey further the orga	anızatıon's exe	empt purpose	ın		
5	During the year, did the organization solicit or assets to be sold to raise funds rather than to				ar		Yes	☐ No
Pa	art IV Trust, Escrow and Custod	ial Arrangements. C	omplete if orga	inization ar	swered "Y	es" to Fo	rm 990,	
	Part IV, line 9, or reported a	an amount on Form 9	990, Part X, line	e 21.				
1a	Is the organization an agent, trustee, custodia	an or other intermediary for	contributions or of	her assets no	t	_	_	_
	included on Form 990, Part X?						Yes	∐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the following	table					
	· · · · · · · · · · · · · · · · · · ·						Amount	
С	Beginning balance					1c		
	Additions during the year					1d		
е	Distributions during the year					1e		
f	Ending balance					1f		
2a	Did the organization include an amount on Fo	orm 990, Part X, line 21?					Yes	No
	If "Yes," explain the arrangement in Part XIV					_	_	
	art V Endowment Funds. Comp	lete if organization ar	nswered "Yes"	to Form 99	0, Part IV,	line 10.		
		(a) Current year	(b) Prior year	(c) Two year	s back (d) Th	ree years bad	ck (e) Four	years back
1a	Beginning of year balance							
b	Contributions							
С	Investment earnings or losses							
d	Grants or scholarships							
е	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						
а	Board designated or quasi-endowment > _	%						
b	Permanent endowment ▶ %							
C	Term endowment ▶ %							
3a	Are there endowment funds not in the posses	ssion of the organization th	at are held and adı	ninistered 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	s listed as required on Scho	edule R?				3b	
4								
Pa	ert VI Investments—Land, Build	<u>ings, and Equipmen</u>	<u>t. See Form 99</u>	<u>90, Part X,</u>	<u>line 10.</u>			
	Description of investment	(a) Cost or other basis	(b) Cost or o	i	(c) Depreciati	on	(d) Book	value
		(investment)	basis (othe	·	······			
1a	Land		50	,000			5	<u>50,000</u>
b	Buildings							
С	Leasehold improvements							
	Equipment		ļ				-	
	Other			,300	10	,762		9,538
Total	I. Add lines 1a-1e (Column (d) should equal F	form 990, Part X, column (B), line 10(c))			<u> </u>	5	<u> 9,538</u>

Part VII In	vestments—Other Securities. See F	Form 990, F	Part X, line 12.		
	(a) Description of security or category (including name of security)		(b) Book value	(c) Method Cost or end-of-y	of valuation ear market value
Inancial derivative	s and other financial products				······································
Closely-held equity					<u> </u>
Other	interests				
			······································		
		-			· · · · · · · · · · · · · · · · · · ·
otal. (Column (b)	should equal Form 990, Part X, col. (B) line 12) ▶			
Part VIII In	vestments—Program Related. See	Form 990,	Part X, line 13.		
	(a) Description of investment type		(b) Book value		of valuation
				Cost or end-of-y	ear market value
		ļ			
Total. (Column (b)	should equal Form 990, Part X, col (B) line 13) •			
Fotal. (Column (b) Part IX Or	ther Assets. See Form 990, Part X,	line 15.			
Fotal. (Column (b) Part IX O	ther Assets. See Form 990, Part X,	line 15.			(b) Book value
Fotal. (Column (b) Part IX O	ther Assets. See Form 990, Part X,	line 15.			(b) Book value
Fotal. (Column (b) Part IX O	ther Assets. See Form 990, Part X,	line 15.			(b) Book value
Fotal. (Column (b) Part IX O	ther Assets. See Form 990, Part X,	line 15.			(b) Book value
Fotal. (Column (b) Part IX Of	ther Assets. See Form 990, Part X,	line 15.			(b) Book value
Fotal. (Column (b) Part IX O	ther Assets. See Form 990, Part X,	line 15.			(b) Book value
Total. (Column (b) Part IX O	ther Assets. See Form 990, Part X,	line 15.			(b) Book value
Fotal. (Column (b) Part IX O	ther Assets. See Form 990, Part X,	line 15.			(b) Book value
Fotal. (Column (b) Part IX Or	ther Assets. See Form 990, Part X,	line 15.			(b) Book value
Fotal. (Column (b) Part IX Or	ther Assets. See Form 990, Part X,	line 15.			(b) Book value
Part IX O	ther Assets. See Form 990, Part X, (a) Des	line 15.			(b) Book value
Part IX Or	should equal Form 990, Part X, col (B) line 15	line 15. scription			(b) Book value
Part IX Or	should equal Form 990, Part X, col (B) line 15	line 15. scription	(b) Amount		(b) Book value
Part IX Or	should equal Form 990, Part X, col (B) line 15 ther Liabilities. See Form 990, Part (a) Description of liability	line 15. scription	(b) Amount		(b) Book value
Part IX Or	should equal Form 990, Part X, col (B) line 15 ther Liabilities. See Form 990, Part (a) Description of liability	line 15. scription	(b) Amount		(b) Book value
Part IX Or	should equal Form 990, Part X, col (B) line 15 ther Liabilities. See Form 990, Part (a) Description of liability	line 15. scription	(b) Amount	>	(b) Book value
Part IX Of	should equal Form 990, Part X, col (B) line 15 ther Liabilities. See Form 990, Part (a) Description of liability	line 15. scription	(b) Amount		(b) Book value
Part IX Of	should equal Form 990, Part X, col (B) line 15 ther Liabilities. See Form 990, Part (a) Description of liability	line 15. scription	(b) Amount		(b) Book value
Part IX Of	should equal Form 990, Part X, col (B) line 15 ther Liabilities. See Form 990, Part (a) Description of liability	line 15. scription	(b) Amount		(b) Book value
Part IX Of	should equal Form 990, Part X, col (B) line 15 ther Liabilities. See Form 990, Part (a) Description of liability	line 15. scription	(b) Amount		(b) Book value
Part IX Of	should equal Form 990, Part X, col (B) line 15 ther Liabilities. See Form 990, Part (a) Description of liability	line 15. scription	(b) Amount		(b) Book value
Part IX Of	should equal Form 990, Part X, col (B) line 15 ther Liabilities. See Form 990, Part (a) Description of liability	line 15. scription	(b) Amount		(b) Book value
Part IX Of	should equal Form 990, Part X, col (B) line 15 ther Liabilities. See Form 990, Part (a) Description of liability	line 15. scription	(b) Amount		(b) Book value
Part IX Of	should equal Form 990, Part X, col (B) line 15 ther Liabilities. See Form 990, Part (a) Description of liability	line 15. scription	(b) Amount		(b) Book value

Sche	dule D (Form 990) 2008 DOWNTOWN OUTREACH MINISTRIES	38-297196	1	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to	Financial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)		1	
2	Total expenses (Form 990, Part iX, column (A), line 25)		2	
3	Excess or (deficit) for the year Subtract line 2 from line 1		3_	
4	Net unrealized gains (losses) on investments		4	·
5	Donated services and use of facilities		5	
6	Investment expenses		6	
7	Prior period adjustments		7	
8	Other (Describe in Part XIV)		8	
9	Total adjustments (net) Add lines 4-8		9	
10_	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	· · · · · · · · · · · · · · · · · · ·	10	
Pa	rt XII Reconciliation of Revenue per Audited Financial Statemen	nts With Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12	1 1		
а	Net unrealized gains on investments			
b	Donated services and use of facilities	2b		
С	Recoveries of prior year grants	2c	1	
d	Other (Describe in Part XIV)			
е	Add lines 2a through 2d		2e_	
3	Subtract line 2e from line 1	1 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	┨	
b	Other (Describe in Part XIV)	4b	┨. '	
C	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)	nete With Evpenses nor I	5	
	rt XIII Reconciliation of Expenses per Audited Financial Stateme	ents with Expenses per i	I	<u> </u>
1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	_{2a}		
a	Donated services and use of facilities	2b	1	
b	Prior year adjustments	2c	1	
C	Losses reported on Form 990, Part IX, line 25	2d	1	
d	Other (Describe in Part XIV)	20	2e	
3	Add lines 2a through 2d Subtract line 2e from line 1		3	
Д	Amounts included on Form 990, Part IX, line 25, but not on line 1:	ſ	<u> </u>	
٠,	Investment expenses not included on Form 990, Part VIII, line 7b	4a		
a h	Other (Describe in Part XIV)	4b	1	
c	Add lines 4a and 4b		4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18.)		5	
Pa	rt XIV Supplemental Information			
	olete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 3, 5, and 9, and	nes 1a and 4; Part IV, lines 1b		_
	b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b; and Part XIII, lines 2d			
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Schedule (Form 969) 2008 DOWNTOWN OUTREACH MINISTRIES 38-2971961 Page 1 Part XIV Supplemental Information (consumed)	Schedule D (Fo	orm 990) 2008	DOWNTOWN	OUTREACH	MINISTRIES	38-2971961	Page 5
	Part XIV	Suppleme	ental Information	(continued)			
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SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service Name of the organization

Grants and Other Assistance to Organizations, Governments, and Individuals in the U.S.

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

OMB No 1545-0047

▶ Attach to Form 990.

DOWNTOWN OUTREACH MINISTRIES

General Information on Grants and Assistance

Part I

2008	Open to Public Inspection

Employer identification number 38-2971961

Ŷ.			1	1				I	1	- [
Yes X N	wered "Yes" on ore than \$5,000. Use ▶	(h) Purpose of grant or assistance								
5	anization ansv nt received mo	(g) Description of non-cash assistance								
ol assistance, and	plete if the org no one recipie	(f) Method of valuation (book, FMV, appraisal, other)								
engionity for the grants	ited States. Com Check this box if	(e) Amount of non-cash assistance								
istance, the grantees in the United States	zations in the Unione than \$5,000.	(d) Amount of cash grant assistance (f) Method of valuation (book, FMV, appraisal, assistance other)								
ants or ass rant funds	l Organi eived m ace is r	(c) IRC section if applicable								
ie amount of the gra ice? iltoring the use of g	vernments and cipient that recipient that recipient if additional sp	(b) EIN								organizations
Does the organization maintain records to substantiate the amount of the grants of assistance, the grantees engibinity for the grants of assistance, and the selection criteria used to award the grants or assistance? Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" on 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	(a) Name and address of organization or government								Enter total number of section 501(c)(3) and government organizations
1 Does the se 2 Description	100	-								2 Enter

3 Enter total number of other organizations

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

Schedule I (Form 990) 2008

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Schedule I (Form 990)	Schedule I (Form 990) 2008 DOWNTOWN OUTREACH MINISTRIES	REACH MINISTR		38-2971961		Page 2
Part III Gran	Grants and Other Assistance to Individuals in the United Schedule I-1 (Form 990) if additional space is needed	to Individuals in the	United States. Compeeded	nplete if the organiza	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.	rm 990, Part IV, line 22.
(a) Type o	(a) Type of grant or assistance	(b) Number of	(c) Amount of	(d) Amount of	(e) Method of valuation (book,	(e) Method of valuation (book, (f) Description of non-cash assistance
		recipients	cash grant	non-cash assistance	FMV, appraisal, other)	
CLOTHING			1,937			
COATS AND BOOTS	BOOTS		307			
FOOD PANTRY	м		12,994			
SPECIAL PROGRAMS	OGRAMS		20,514			
Part IV Supp	olemental Information. Co	omplete this part to p	provide the informatic	on required in Part I,	Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.	onal information.

Schedule I (Form 990) 2008

Department of the Treasury Internal Revenue Service

Depreciation and Amortization

(Including Information on Listed Property)

▶ See separate instructions.
▶ Attach to your tax return.

OMB No. 1545-0172

Attachment

Identifying number Name(s) shown on return DOWNTOWN OUTREACH MINISTRIES 38-2971961 Business or activity to which this form relates Indirect Depreciation **Election To Expense Certain Property Under Section 179** Part I Note: If you have any listed property, complete Part V before you complete Part I. 250,000 1 1 Maximum amount. See the instructions for a higher limit for certain businesses 2 2 Total cost of section 179 property placed in service (see instructions) 800,000 3 Threshold cost of section 179 property before reduction in limitation (see instructions) 3 Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-4 4 5 Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If marned filling separately, see instructions 5 (a) Description of property (c) Elected cost (b) Cost (business use only) 6 7 7 Listed property Enter the amount from line 29 8 Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7 9 Tentative deduction Enter the smaller of line 5 or line 8 9 10 10 Carryover of disallowed deduction from line 13 of your 2007 Form 4562 Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions) 11 11 Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11 12 12 Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12 13 13 Note: Do not use Part II or Part III below for listed property Instead, use Part V Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.) Part II Special depreciation allowance for qualified property (other than listed property) placed in service 14 10,150 14 during the tax year (see instructions) 15 Property subject to section 168(f)(1) election 15 16 Other depreciation (including ACRS) MACRS Depreciation (Do not include listed property.) (See instructions.) Part III Section A 17 MACRS deductions for assets placed in service in tax years beginning before 2008 If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here 18 Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System (b) Month and (c) Basis for depreciation (d) Recovery (business/investment use (e) Convention (f) Method (g) Depreciation deduction (a) Classification of property year placed in period service only-see instructions) 19a 3-year property b 5-year property 160 1,120 HY 200DB 7.0 7-year property C 10-year property 452 9,030 15.0 HY 150DB 15-year property 20-year property S/L 25 yrs 25-year property S/L 27 5 yrs MM Residential rental property MM S/L 27 5 yrs MM S/L 39 yrs Nonresidential real property MM S/L Section C-Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System 20a Class life S/L 12 yrs S/L b 12-year 40 yrs. MM S/L 40-year Summary (See instructions.) Part IV 21 Listed property Enter amount from line 28 21 Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21 10,762 Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instr For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs

DOWNOUTREAC DOWNTOWN OUTREACH MINISTRIES

38-2971961

FYE: 12/31/2008

Less: Dispositions

Net Grand Totals

Less: Start-up/Org Expense

Federal Asset Report

07/22/2009 2:51 PM

0

0

0

0

60,150

0

0 10,762

Form 990, Page 1

Date Bus Sec Basis Cost % 179Bonus for Depr PerConv Meth Prior Current In Service Asset Description 7-year GDS Property: 2 Fence 2,240 7 HY 200DB 1,280 3/17/08 1,120 0 1,280 2,240 1,120 15-year GDS Property: 3 Roof 8/20/08 18,060 X 9,030 15 HY 150DB 9,482 9,482 18,060 9,030 Other Depreciation: 0 0 1/01/06 50,000 1 Land 50,000 0 -- Land 0 0 50,000 50,000 **Total Other Depreciation** 0 50,000 50,000 0 **Total ACRS and Other Depreciation** 70,300 60,150 0 10,762 **Grand Totals**

0

70,300

Downtown Outreach Mi	nistries - Board of Directo	rs			
Revised 01/21/09					
Court St United Me	ethodist				
Rick Adams	6278 N. Oak Rd	Davison	48423	810-653-0489	
Shirley Stevens	11211 Brookshire	Grand Blanc	48439	810-694-5392	
Rev. Doug Mercer	11017 Hawthorne	Byron	48418	810-266-5073	Treas.
Rev. Robert Wright	225 W. Court St	Flint	48503	810-234-4651	Ex-Offico
First Pres.					
Dawn Vallee	1412 Brookwood	Filnt	48503	810-238-3392	Pres.
Gail Hutchison	13371 Pomona Dr.	Fenton	48430	810-629-4467	Sec.
Dee Lada	3415 Edgewood Ct.	Davison	48423	810-241-8092	
Rev. John Musgrave	746 S. Saginaw	Flint	48503	810-234-8673	Ex-Offico
St. Paul's	740 S. Saginaw	Fint	70000	010-23-4 0073	LX-O.IICO
Ruth Scott	3542 Kent St	Flint	48503	810-742-0477	
Jackie Elliott	7144 Torrey Rd	Swartz Creek	48473	810-655-4728	
Elizabeth Cook	1224 Springs Barrow	Flint	48532	810-732-5916	
Rev. Marty Field	711 S. Saginaw	Flint	48503	810-234-8637	Ex-Offico
Riverside Taber					
Rosemary Krefeld	4196 Crestknoll	Grand Blanc	48439	810-695-1102	
Rev. Tom Mattiuzzo	429 N.B. Chavez	Flint		810-234- 6 246	Ex-Office
Community Repres		T HEIC		010-204-0240	LX-OIIICO
Maryetta Muller	5930 Cross Creek	Swartz Creek	48473	810-630-6062	V P
Ruth Weir	3155 N. McKinley	Flushing		810-487-0165	
Staff					
Brenda Woods	414 VAL COURT ST	Fliat	49500	910 224 2470	
Tom Knight	414 W. Court St	Flint		810-234-2479	
Karen Dukes	414 W. Court St	Flint		810-234-2479	~
Andre' Brown	414 W. Court St	Flint		810-234-2479	
MINITE DIOWII	414 W. Court St	Flint	48503	810-234-2479	