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EXTENDED TO NOVEMBER 16, 2020

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

- Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0047

2019

Open to Public Inspection

Form 990-PF

Department of the Treasury
Internal Revenue Service

For calendar year 2019 or tax year beginning

, and ending

Name of foundation
ETHEL AND JAMES FLINN FOUNDATION

Number and street (or P.O. box number if mail is not delivered to street address)
333 W. FORT STREET

Room/suite
1950

City or town, state or province, country, and ZIP or foreign postal code
DETROIT, MI 48226

G Check all that apply:
☐ Initial return
☐ Final return
☐ Address change
☐ Initial return of a former public charity
☐ Amended return
☐ Name change

H Check type of organization:
☒ Section 501(c)(3) exempt private foundation
☐ Section 4947(a)(1) nonexempt charitable trust
☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16)
\$ 66,025,602.

J Accounting method:
☒ Cash
☐ Other (specify) _____

A Employer identification number
38-2143122

B Telephone number
313-309-3436

C If exemption application is pending, check here ☐

D 1. Foreign organizations, check here ☐
 2. Foreign organizations meeting the 85% test, check here and attach computation ☐

E If private foundation status was terminated under section 507(b)(1)(A), check here ☐

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

Part I Analysis of Revenue and Expenses		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received					
2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B					
3 Interest on savings and temporary cash investments		3,600.	3,600.		STATEMENT 2
4 Dividends and interest from securities		1,494,848.	1,494,848.		STATEMENT 3
5a Gross rents					
b Net rental income or (loss)					
6a Net gain or (loss) from sale of assets not on line 10		2,681,036.			STATEMENT 1
b Gross sales price for all assets on line 6a		16,263,084.			
7 Capital gain net income (from Part IV, line 2)			3,655,631.		
8 Net short-term capital gain				N/A	
9 Income modifications					
10a Gross sales less returns and allowances					
b Less Cost of goods sold					
c Gross profit or (loss)					
11 Other income		163,144.	-84,692.	0.	STATEMENT 4
12 Total. Add lines 1 through 11		4,342,628.	5,069,387.	0.	
13 Compensation of officers, directors, trustees, etc		373,000.	111,011.	0.	261,989.
14 Other employee salaries and wages		99,014.	33,750.	0.	65,264.
15 Pension plans, employee benefits		92,187.	28,273.	0.	63,914.
16a Legal fees STMT 5		14,759.	4,526.	0.	10,233.
b Accounting fees STMT 6		24,700.	7,481.	0.	17,219.
c Other professional fees STMT 7		267,506.	61,157.	0.	206,349.
17 Interest					
18 Taxes STMT 8		39,560.	0.	0.	0.
19 Depreciation and depletion					
20 Occupancy		44,435.	13,627.	0.	30,808.
21 Travel, conferences, and meetings		17,969.	2,771.	0.	15,198.
22 Printing and publications		2,051.	629.	0.	1,422.
23 Other expenses STMT 9		53,642.	16,452.	0.	37,190.
24 Total operating and administrative expenses. Add lines 13 through 23		1,028,823.	279,677.	0.	709,586.
25 Contributions, gifts, grants paid		2,586,950.			2,586,950.
26 Total expenses and disbursements. Add lines 24 and 25		3,615,773.	279,677.	0.	3,296,536.
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements		726,855.			
b Net investment income (if negative, enter -0-)			4,789,710.		
c Adjusted net income (if negative, enter -0-)				0.	

Part II Balance Sheets		Beginning of year		End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
Assets	1 Cash - non-interest-bearing	209,873.	211,878.	211,878.	
	2 Savings and temporary cash investments	569,649.	445,228.	445,228.	
	3 Accounts receivable				
	Less: allowance for doubtful accounts				
	4 Pledges receivable				
	Less: allowance for doubtful accounts				
	5 Grants receivable				
	6 Receivables due from officers, directors, trustees, and other disqualified persons				
	7 Other notes and loans receivable				
	Less: allowance for doubtful accounts				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges				
	10a Investments - U.S. and state government obligations				
	b Investments - corporate stock STMT 10	21,356,168.	21,142,377.	24,660,623.	
	c Investments - corporate bonds STMT 11	14,375,963.	13,997,907.	13,743,701.	
	11 Investments - land, buildings, and equipment basis				
Less accumulated depreciation					
12 Investments - mortgage loans					
13 Investments - other STMT 12	18,813,745.	20,311,368.	26,165,583.		
14 Land, buildings, and equipment basis					
Less accumulated depreciation					
15 Other assets (describe MINING AND GAS INTE)	939,057.	939,057.	798,589.		
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	56,264,455.	57,047,815.	66,025,602.		
Liabilities	17 Accounts payable and accrued expenses				
	18 Grants payable				
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable				
	22 Other liabilities (describe)				
23 Total liabilities (add lines 17 through 22)	0.	0.			
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. <input checked="" type="checkbox"/>				
	24 Net assets without donor restrictions	56,264,455.	57,047,815.		
	25 Net assets with donor restrictions				
	Foundations that do not follow FASB ASC 958, check here <input type="checkbox"/>				
	26 Capital stock, trust principal, or current funds				
	27 Paid-in or capital surplus, or land, bldg., and equipment fund				
	28 Retained earnings, accumulated income, endowment, or other funds				
	29 Total net assets or fund balances	56,264,455.	57,047,815.		
30 Total liabilities and net assets/fund balances	56,264,455.	57,047,815.			

Part III. Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	56,264,455.
2 Enter amount from Part I, line 27a	2	726,855.
3 Other increases not included in line 2 (itemize) GRANTS RETURNED	3	56,505.
4 Add lines 1, 2, and 3	4	57,047,815.
5 Decreases not included in line 2 (itemize)	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	57,047,815.

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Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a K-1 PARTNERSHIP INCOME	P		
b SCHWAB REDEMPTIONS	P		
c CAPITAL GAIN DISTRIBUTIONS	P		
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a 974,595.			974,595.
b 14,714,350.		12,607,453.	2,106,897.
c 574,139.			574,139.
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.			(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
a			974,595.
b			2,106,897.
c			574,139.
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	3,655,631.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8	{ }	3	3,655,631.

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2018	3,140,369.	65,184,792.	.048176
2017	3,165,943.	63,908,668.	.049539
2016	2,984,039.	59,877,278.	.049836
2015	3,121,006.	62,134,898.	.050230
2014	2,849,159.	64,110,600.	.044441

2 Total of line 1, column (d)	2	.242222
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	.048444
4 Enter the net value of noncharitable-use assets for 2019 from Part X, line 5	4	64,172,432.
5 Multiply line 4 by line 3	5	3,108,769.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	47,897.
7 Add lines 5 and 6	7	3,156,666.
8 Enter qualifying distributions from Part XII, line 4	8	3,296,536.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.
See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary-see instructions)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b		1	47,897.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		2	0.
3 Add lines 1 and 2		3	47,897.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	47,897.
6 Credits/Payments:			
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a	79,560.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	23,000.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7	102,560.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	0.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	54,663.	
11 Enter the amount of line 10 to be. Credited to 2020 estimated tax <input checked="" type="checkbox"/> Refunded <input type="checkbox"/>	11	0.	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. <input checked="" type="checkbox"/> \$ 0. (2) On foundation managers. <input checked="" type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input checked="" type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.		X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	X	
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	X	
b If "Yes," has it filed a tax return on Form 990-T for this year?	X	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <input checked="" type="checkbox"/> MI		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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Part VII-A Statements Regarding Activities (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>WWW.FLINNFOUNDATION.ORG</u>	X	
14 The books are in care of ► <u>ANDREA M. COLE</u> Telephone no. ► <u>313-309-3436</u> Located at ► <u>333 W. FORT STREET, SUITE 1950, DETROIT, MI</u> ZIP+4 ► <u>48226</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year		N/A
16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►		X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here		X
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2019?		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019? If "Yes," list the years ►	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions)	N/A	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. ►		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2019.)	N/A	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?		X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year, did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ Nob If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions
Organizations relying on a current notice regarding disaster assistance, check here

N/A

☒

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

☐ Yes ☒ No

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

N/A

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?

☐ Yes ☒ No**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 14		373,000.	43,552.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
ARNITA THORPE - 333 W. FORT STREET, SUITE 1950, DETROIT, MI 48226	EXECUTIVE ASSISTANT 40.00	99,000.	16,689.	0.

Total number of other employees paid over \$50,000

0

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
THE CENTER FOR MICHIGAN (BRIDGE) 4100 N. DIXBORO ROAD, ANN ARBOR, MI 48105	MENTAL HEALTH AWARENESS PRINT SERI	77,000.
METRO PARENT MAGAZINE 22041 WOODWARD AVENUE, FERNDALE, MI 48226	MENTAL HEALTH AWARENESS PRINT SERI	60,000.

Total number of others receiving over \$50,000 for professional services

0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 THE FOUNDATION PARTNERED WITH METRO PARENT MAGAZINE AND THE CENTER FOR MICHIGAN TO PUBLISH STATEWIDE MENTAL HEALTH AWARENESS MONTHLY PRINT SERIES.	143,000.
2 SEQUENTIAL INTERCEPT MODEL IN WAYNE COUNTY TO DIVERT PEOPLE WITH BEHAVIORAL HEALTH CONDITIONS FROM CRIMINAL JUSTICE SYSTEM INTO COMMUNITY TREATMENT.	42,238.
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	

Total. Add lines 1 through 3

0.

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Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	64,110,322.
b	Average of monthly cash balances	1b	1,039,355.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	65,149,677.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	65,149,677.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	977,245.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	64,172,432.
6	Minimum investment return. Enter 5% of line 5	6	3,208,622.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	3,208,622.
2a	Tax on investment income for 2019 from Part VI, line 5	2a	47,897.
b	Income tax for 2019. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	47,897.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,160,725.
4	Recoveries of amounts treated as qualifying distributions	4	56,505.
5	Add lines 3 and 4	5	3,217,230.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	3,217,230.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	3,296,536.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	3,296,536.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	47,897.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	3,248,639.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				3,217,230.
2 Undistributed income, if any, as of the end of 2019				
a Enter amount for 2018 only			208,579.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2019				
a From 2014				
b From 2015				
c From 2016				
d From 2017				
e From 2018				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from Part XII, line 4: ► \$ 3,296,536.				
a Applied to 2018, but not more than line 2a			208,579.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2019 distributable amount				3,087,957.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:	0.			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				129,273.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2015				
b Excess from 2016				
c Excess from 2017				
d Excess from 2018				
e Excess from 2019				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2019, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section

☐ 4942(j)(3) or ☐ 4942(j)(5)

2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

b 85% of line 2a

c Qualifying distributions from Part XII, line 4, for each year listed

d Amounts included in line 2c not used directly for active conduct of exempt activities

e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c

3 Complete 3a, b, or c for the alternative test relied upon:

a "Assets" alternative test - enter:

(1) Value of all assets

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed

c "Support" alternative test - enter:

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)

(3) Largest amount of support from an exempt organization

(4) Gross investment income

Tax year

(a) 2019

(b) 2018

Prior 3 years

(c) 2017

(d) 2016

(e) Total

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

NONE

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

SEE STATEMENT 15

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution **	Amount
a Paid during the year				
ALL WELL-BEING SERVICES 1423 FIELD ST DETROIT, MI 48214		PC	TO IMPROVE AND UPGRADE ELECTRONIC HEALTH RECORD.	60,000.
ASSOCIATION FOR CHILDREN'S MENTAL HEALTH 6017 W ST JOE HWY STE 200 LANSING, MI 48917-4874		PC	FOR GENERAL OPERATING SUPPORT. ACMH PROVIDES ADVOCACY SUPPORT FOR INDIVIDUAL CHILDREN AND THEIR	10,000.
BEAUMONT HEALTH FOUNDATION 26901 BEAUMONT BOULEVARD SOUTHFIELD, MI 48033-0000		PC	TO IMPLEMENT MENTAL HEALTH SERVICES VIA TELE-COUNSELING MODEL FOR TEENS ATTENDING ANNAPOLIS HIGH SCHOOL	75,000.
C-ASIST 24513 FORD RD DEARBORN, MI 48128-1131		PC	TO INCREASE ACCESS TO MENTAL HEALTH AND PRIMARY CARE FOR THE UNDERPRIVILEGED IN WAYNE COUNTY.	50,000.
CASS COMMUNITY SOCIAL SERVICES 11745 ROSA PARKS BLVD DETROIT, MI 48206-1269		PC	TO TRAIN ALL STAFF TO IMPLEMENT THE EVIDENCE-BASED SEEKING SAFETY APPROACH TO TRAUMA-INFORMED CARE	50,000.
Total	SEE CONTINUATION SHEET(S)			3a 2,586,950.
b Approved for future payment				
NONE				
Total				3b 0.

Part XV. Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
COMMON GROUND 1410 S. TELEGRAPH RD BLOOMFIELD HILLS, MI 48302		PC	TO SUPPORT COUNSELING AND THERAPY PROVIDED BY COUNSELORS WHOSE SALARIES HAVE BEEN JEOPARDIZED BY	50,000.
COMMUNITY FDN FOR SOUTHEASTERN MICHIGAN 333 W FORT STREET, STE 2010 DETROIT, MI 48226-3134		PC	TO SUPPORT THE SAFETY AND JUSTICE COLLABORATIVE AIMED AT SUPPORTING THE INVESTMENT OF PUBLIC	25,000.
COVENANT COMMUNITY CARE, INC. 559 W GRAND BLVD DETROIT, MI 48216-2200		PC	TO INTEGRATE BEHAVIORAL HEALTH CARE INTO MICHIGAN AVENUE CLINIC AND COVENANT PREGNANCY CENTER.	100,000.
COVENANT HOUSE MICHIGAN 2959 MARTIN LUTHER KING JR BLVD DETROIT, MI 48208-2475		PC	TO SUPPORT HOMELESS YOUNG ADULTS WITH CO-OCCURRING DISORDERS AT RESIDENTIAL FACILITY.	100,000.
DETROIT WAYNE INTEGRATED HEALTH NETWORK 707 W. MILWAUKEE DETROIT, MI 48202		PC	TO SUPPORT A POST-BOOKING DIVERSION PROGRAM FOR PERSONS WITH MENTAL HEALTH DISORDERS AND	100,000.
FREEDOM HOUSE DETROIT 2630 W LAFAYETTE BLVD DETROIT, MI 48216-2019		PC	TO HIRE A LICENSED CARE COUNSELOR TO PROVIDE ON-SITE PSYCHOTHERAPY AND PSYCHOSOCIAL TREATMENT	50,000.
HEGIRA PROGRAMS, INC. 37450 SCHOOLCRAFT ROAD, SUITE 110 LIVONIA, MI 48150-1000		PC	TO ADDRESS BEHAVIORAL HEALTH NEEDS OF THE FIREFIGHTERS AND POLICE OFFICERS OF SIX WESTERN WAYNE PUBLIC	60,000.
HENRY FORD HEALTH SYSTEM ONE FORD PLACE - 5F DETROIT, MI 48202-3450		PC	TO DEVELOP AND IMPLEMENT A COMPREHENSIVE MODEL OF OPIOID USE DISORDER TREATMENT BY	100,000.
HENRY FORD HEALTH SYSTEM ONE FORD PLACE - 5F DETROIT, MI 48202-3450		PC	TO DEVELOP, IMPLEMENT AND EVALUATE PERINATAL BEHAVIORAL HEALTH INTEGRATION AT HENRY FORD HEALTH SYSTEM.	100,000.
IHA HEALTH SERVICES CORPORATION 24 FRANK LLOYD WRIGHT DR ANN ARBOR, MI 48105-9484		PC	TO INTEGRATE BEHAVIORAL HEALTH COLLABORATIVE CARE PROGRAM IN TWO SOUTHEAST MICHIGAN	70,000.
Total from continuation sheets				2,341,950.

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
JUDSON CENTER 30301 NORTHWESTERN HWY FARMINGTON HILLS, MI 48334-3214		PC	TO LAUNCH A HIGH-QUALITY TELE-COUNSELING SERVICE TO INCREASE MENTAL HEALTH ACCESS	75,000.
MENTAL HEALTH ASSOCIATION IN MICHIGAN 27655 MIDDLEBELT RD FARMINGTON HILLS, MI 48334-5029		PC	FOR GENERAL OPERATING SUPPORT. MHAM IS THE STATES OLDEST NONPROFIT ORGANIZATION CONCERNED WITH MENTAL	30,000.
MICHIGAN'S CHILDREN 215 S WASHINGTON SQ STE 110 LANSING, MI 48933-1877		PC	FOR GENERAL OPERATING SUPPORT. MICHIGAN'S CHILDREN WILL BOLSTER THE PUBLIC POLICY RESEARCH ADVOCACY	50,000.
NAMI DETROIT 24717 CUBBERNESS ST ST CLR SHORES, MI 48080-1010		PC	FOR GENERAL OPERATING SUPPORT. TO BUILD THE CAPACITY OF NAMI DETROIT AND ENHANCE COMMUNITY PRESENCE AND	10,000.
NAMI METRO P.O. BOX 852 NORTHVILLE, MI 48167-0852		PC	FOR GENERAL OPERATING SUPPORT. LOCATED IN SOUTHEAST MICHIGAN, NAMI METROS CONSTITUENT MEMBERS	10,000.
NAMI MICHIGAN 401 SOUTH WASHINGTON AVENUE SUITE 1 LANSING, MI 48933-2145		PC	FOR GENERAL OPERATING SUPPORT. NAMI MICHIGAN AND ITS STATEWIDE AFFILIATES ADVOCATE AT THE STATE	30,000.
NAMI WASHTENAW COUNTY 1100 N MAIN ST STE 201A ANN ARBOR, MI 48104-1087		PC	FOR GENERAL OPERATING SUPPORT. LOCATED IN SOUTHEAST MICHIGAN, NAMI WASHTENAW COUNTY CONSTITUENT MEMBERS	10,000.
NORTHEAST GUIDANCE CENTER 2900 CONNER ST DETROIT, MI 48215-2407		PC	TO DEVELOP FATHERHOOD GROUPS TO HELP DADS BUILD SECURE RELATIONSHIPS WITH THEIR CHILDREN TO	50,000.
NORTHEAST GUIDANCE CENTER 2900 CONNER ST DETROIT, MI 48215-2407		PC	TO EXPAND COMMUNITY AND POLICE PARTNERSHIP ADVOCACY (CAPPA) TO BETTER ASSIST 1,500 HOMELESS AND PEOPLE IN	100,000.
OAKLAND FAMILY SERVICES 114 ORCHARD LAKE RD PONTIAC, MI 48341-2244		PC	TO LAUNCH A HIGH-QUALITY TELE-COUNSELING SERVICE TO INCREASE MENTAL HEALTH ACCESS	60,000.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
PEDIATRIC FOUNDATION OF MICHIGAN, INC. 106 W ALLEGAN STE 510 LANSING, MI 48933-1700		PC	TO EXPAND THE ADOLESCENT SCREEN FOR 3 TO TRAIN PRIMARY CARE PROVIDERS TO MORE COMPREHENSIVELY	60,000.
REGENTS OF THE UNIVERSITY OF MICHIGAN 3003 S STATE ST G395 WOLVERINE TOWE ANN ARBOR, MI 48109-0000		PC	TO SUPPORT 9 HEALTH FUNDER COLLABORATIVE PARTNERSHIP TO IMPLEMENT TRAILS TO WELLNESS COMPREHENSIVE	150,000.
SOUTHWEST COUNSELING SOLUTIONS 5716 MICHIGAN AVE B201 DETROIT, MI 48210-3039		PC	CAPACITY BUILDING SUPPORT TO IMPROVE EFFICACY AND OPERATION OF CLINICAL INFORMATION AND	60,000.
SPECTRUM CHILD AND FAMILY SERVICES 28303 JOY RD WESTLAND, MI 48185-5524		PC	TO PILOT EVIDENCE-BASED TRAUMA TREATMENT (TF-CBT) PROGRAM FOR TEENAGE GIRLS IN SHELTER CARE	66,000.
STARFISH FAMILY SERVICES, INC. 30000 HIVELEY ST INKSTER, MI 48141-1089		PC	TO IMPLEMENT ARC, A FRAMEWORK FOR INTERVENTION WITH YOUTH AND FAMILIES AGES 0-21 WHO HAVE HAD	62,000.
STARR COMMONWEALTH 13725 STARR COMMWEALTH ALBION, MI 49224-0000		PC	TO CONDUCT COMPREHENSIVE TRAUMA ASSESSMENTS, INDIVIDUAL AND GROUP THERAPY FOR AT-RISK AND	74,000.
THE BOARD OF GOVERNORS (AKA WSU) 5700 CASS AVE STE 4900 DETROIT, MI 48202-3692		PC	FOR PROJECT MANAGEMENT AND EVALUATION OF THE WAYNE COUNTY MENTAL HEALTH DIVERSION COMMITTEE. THE	175,000.
THE JED FOUNDATION 6 E 39TH ST STE 700 NEW YORK, NY 10016-0186		PC	TO COLLABORATIVELY SUPPORT (IN PARTNERSHIP WITH THE JED FOUNDATION AND BLUE CROSS BLUE SHIELD	25,000.
TRINITY HEALTH-MICHIGAN 44405 WOODWARD AVENUE PONTIAC, MI 48341-5023		PC	TO IMPLEMENT AN EVIDENCE-BASED INTEGRATIVE PHYSICAL HEALTH AND BEHAVIORAL HEALTH CARE APPROACH	75,000.
UMRC FOUNDATION, INC. 805 W MIDDLE STREET CHELSEA, MI 48118-1369		PC	TO INTEGRATE BEHAVIORAL HEALTH WITHIN THE PACE MODEL OF PRIMARY CARE FOR ELDERLY.	100,000.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
VISTA MARIA 20651 W WARREN DEARBORN, MI 48127-0000		PC	TO EXPAND THE RISKING CONNECTIONS MODEL AND TRAUMA RESPONSE IMPLEMENTED PRACTICE MODEL INTO DELIVERY	42,000.
VOLUNTEERS OF AMERICA INC 21415 CIVIC CENTER DR STE 306 SOUTHFIELD, MI 48076-3954		PC	TO PROVIDE MENTAL HEALTH SERVICES FOR HOMELESS OR AT-RISK VETERANS.	100,000.
WASHTENAW COUNTY HEALTH DEPARTMENT 555 TOWNER STREET YPSILANTI, MI 48198-5723		PC	TO SUPPORTING MAPPING PROCESS TO IDENTIFY GAPS IN CARE AND/OR REDUNDANCIES TO IMPROVE CARE AND	50,000.
WAYNE COUNTY THIRD CIRCUIT COURT 1025 FOREST AVE BLDG B, ROOM 105 DETROIT, MI 48207-1024		GOV	TO EXPAND THE SUPERVISING TREATMENT FOR ALCOHOL AND NARCOTICS DEPENDENCY (S.T.A.N.D) PROGRAM IN	75,000.
ARCHDIOCESE OF DETROIT C/O ST. KENNETH CHURCH PLYMOUTH, MI 48170		PC	MATCHING GIFT	1,000.
CHRIST CHURCH GROSSE POINTE 61 GROSSE POINTE BLVD GROSSE PT FRM, MI 48236-3712		PC	MATCHING GIFT	5,000.
CHRIST CHURCH GROSSE POINTE 61 GROSSE POINTE BLVD GROSSE PT FRM, MI 48236-3712		PC	MATCHING GIFT	200.
CHRISTIAN FAMILY SERVICES 22811 GREATER MACK AVE STE 210 ST CLR SHORES, MI 48080-2054		PC	MATCHING GIFT	80.
CHRISTIAN FAMILY SERVICES 22811 GREATER MACK AVE STE 210 ST CLR SHORES, MI 48080-2054		PC	MATCHING GIFT	200.
COMMUNITY FDN FOR SOUTHEASTERN MICHIGAN 333 W FORT STREET, STE 2010 DETROIT, MI 48226-3134		PC	MATCHING GIFT	250.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
DENISON UNIVERSITY ALUMNI FUND GRANVILLE, MI 43023		PC	MATCHING GIFT	100.
DETROIT INSTITUTE FOR CHILDREN (THE) 2075 E W MAPLE RD WALLED LAKE, MI 48390-3816		PC	MATCHING GIFT	200.
DETROIT INSTITUTE OF ARTS 5200 WOODWARD AVE DETROIT, MI 48202-4008		PC	MATCHING GIFT	200.
DETROIT ROTARY FOUNDATION ROTARY FOUNDATION DRIVE C/O E.W. GROBBEL & SON DETROIT, MI 48207		PC	MATCHING GIFT	200.
DETROIT SYMPHONY ORCHESTRA 3711 WOODWARD AVE DETROIT, MI 48201-2005		PC	MATCHING GIFT	200.
DETROIT ZOOLOGICAL SOCIETY 8450 W 10 MILE RD ROYAL OAK, MI 48067-3001		PC	MATCHING GIFT	200.
EDWARD S. THOMAS SECTION OF COMMUNITY AND PUBLIC HEALTH 5700 CASS AVE STE 4900 DETROIT, MI 48202-3692		PC	MATCHING GIFT	450.
GROSSE POINTE ANIMAL ADOPTION SOCIETY 296 CHALFONTE AVE GROSSE POINTE FARMS, MI 48236-3342		PC	MATCHING GIFT	5,000.
GROSSE POINTE PARK FOUNDATION 15115 E JEFFERSON AVE GROSSE POINTE, MI 48230-1312		PC	MATCHING GIFT	200.
IMMACULATE CONCEPTION UKRAINIAN CATHOLIC SCHOOLS 29500 WESTBROOK WARREN, MI 48092		PC	MATCHING GIFT	1,000.
Total from continuation sheets				

Part XV Supplementary Information

3 Grants and Contributions Paid During the Year (Continuation)				
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
JUDSON CENTER 30301 NORTHWESTERN HWY FARMINGTON HILLS, MI 48334-3214		PC	MATCHING GIFT	500.
KIEVE-WAVUS EDUCATION, INC. P.O. BOX 169 NOBLEBORO, ME 04555-0169		PC	MATCHING GIFT	200.
MENTAL HEALTH ASSOCIATION IN MICHIGAN 27655 MIDDLEBELT RD FARMINGTON HILLS, MI 48334-5029		PC	MATCHING GIFT	1,000.
MICHIGAN RADIO - WUOM 535 W. WILLIAM STREET ANN ARBOR, MI 48103		PC	MATCHING GIFT	150.
NEIGHBORHOOD CLUB 17150 WATERLOO ST GROSSE POINTE, MI 48230-1201		PC	MATCHING GIFT	500.
ORPHANS AID SOCIETY 136 SECOND AVENUE, SUITE 504 NEW YORK, NY 10003		PC	MATCHING GIFT	300.
PENRICKTON CENTER FOR BLIND CHILDREN 26530 EUREKA RD TAYLOR, MI 48442-9507		PC	MATCHING GIFT	200.
PLANNED PARENTHOOD - MID & SOUTHEAST MICHIGAN 950 VICTORS WAY STE 100 ANN ARBOR, MI 48108-5217		PC	MATCHING GIFT	200.
PLYMOUTH UNITED CHURCH OF CHRIST 600 E. WARREN DETROIT, MI 48201		PC	MATCHING GIFT	3,745.
REGENTS OF THE UNIVERSITY OF MICHIGAN 3003 S STATE ST G395 WOLVERINE TOWER ANN ARBOR, MI 48109-0000		PC	MATCHING GIFT	5,000.
Total from continuation sheets				

Part XV. Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
REGENTS OF THE UNIVERSITY OF MICHIGAN 3003 S STATE ST G395 WOLVERINE TOWER ANN ARBOR, MI 48109-0000		PC	MATCHING GIFT	100.
REGENTS OF THE UNIVERSITY OF MICHIGAN 3003 S STATE ST G395 WOLVERINE TOWER ANN ARBOR, MI 48109-0000		PC	MATCHING GIFT	100.
REGENTS OF THE UNIVERSITY OF MICHIGAN 3003 S STATE ST G395 WOLVERINE TOWER ANN ARBOR, MI 48109-0000		PC	MATCHING GIFT	100.
REGENTS OF THE UNIVERSITY OF MICHIGAN 3003 S STATE ST G395 WOLVERINE TOWER ANN ARBOR, MI 48109-0000		PC	MATCHING GIFT	100.
ROSE HILL FOUNDATION 5130 ROSE HILL BLVD. HOLLY, MI 48442-9507		PC	MATCHING GIFT	500.
ROTARY FOUNDATION OF ROTARY INTERNATIONAL (THE) ROTARY FOUNDATION DRIVE C/O E.W. GROBBEL & SON DETROIT, MI 48207		PC	MATCHING GIFT	200.
SISTERS OF ST. BASIL THE GREAT 710 FOX CHASE RD JENKINTOWN, PA 19046-4118		PC	MATCHING GIFT	500.
ST. KENNETH CATHOLIC CHURCH 14951 N. HAGGERTY ROAD PLYMOUTH, MI 48170		PC	MATCHING GIFT	2,100.
STRATFORD SHAKESPEARE FESTIVAL OF AMERICA P.O. BOX 520 STRATFORD, ONTARIO N5A 6V2		PC	MATCHING GIFT	750.
THE CENTER FOR MICHIGAN 136 E MICHIGAN AVE STE 1201 KALAMAZOO, MI 49007-3936		PC	MATCHING GIFT	100.
Total from continuation sheets				

Part XV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
THE HENRY FORD 20900 OAKWOOD BLVD DEARBORN, MI 48124-5029		PC	MATCHING GIFT	200.
THE TAFT SCHOOL 110 WOODBURY RD WATERTOWN, CT 06795-2130		PC	MATCHING GIFT	200.
TRIUMPH MISSIONARY BAPTIST CHURCH 2760 E GRAND BLVD DETROIT, MI 48211-2072		PC	MATCHING GIFT	1,100.
UKRAINIAN CATHOLIC EDUCATION FOUNDATION 2247 W CHICAGO AVE CHICAGO, IL 60622-8957		PC	MATCHING GIFT	1,000.
UKRAINIAN-AMERICAN ARCHIVES AND MUSEUM 9630 JOSEPH CAMPAU ST HAMTRAMCK, MI 48212-3440		PC	MATCHING GIFT	200.
UNITED UKRAINIAN AMERICAN RELIEF COMMITTEE 1206 COTTMAN AVE PHILADELPHIA, PA 19111-3604		PC	MATCHING GIFT	300.
UNIVERSITY LIGGETT SCHOOL 1045 COOK RD GROSSE PT WDS, MI 48236-2509		PC	MATCHING GIFT	200.
WAYNE CHILDRENS HEALTHCARE ACCESS PROGRAM 3031 WEST GRAND BOULEVARD, SUITE 650 DETROIT, MI 48202		PC	MATCHING GIFT	250.
WDET-FM - WAYNE STATE UNIVERSITY 4600 CASS AVENUE DETROIT, MI 48201		PC	MATCHING GIFT	200.
WEMU-FM - EASTERN MICHIGAN PUBLIC RADIO P.O. BOX 980350 YPSILANTI, MI 48198-0350		PC	MATCHING GIFT	700.
Total from continuation sheets				

38-21431.22

3 Grants and Contributions Paid During the Year (Continuation)

Total from continuation sheets

Part XV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - ASSOCIATION FOR CHILDREN'S MENTAL HEALTH
FOR GENERAL OPERATING SUPPORT. ACMH PROVIDES ADVOCACY SUPPORT FOR
INDIVIDUAL CHILDREN AND THEIR FAMILIES ACROSS MICHIGAN BY FOCUSING ON
ACTIVITIES TO ENHANCE THE SYSTEM OF SERVICES WHICH ADDRESS THE NEEDS OF
CHILDREN WITH SERIOUS EMOTIONAL DISORDERS. ACMH IS A STATEWIDE CHAPTER
OF THE NATIONAL FEDERATION OF FAMILIES FOR CHILDRENS MENTAL HEALTH.

NAME OF RECIPIENT - BEAUMONT HEALTH FOUNDATION
TO IMPLEMENT MENTAL HEALTH SERVICES VIA TELE-COUNSELING MODEL FOR TEENS
ATTENDING ANNAPOLIS HIGH SCHOOL AND ROMULUS MIDDLE SCHOOL.

NAME OF RECIPIENT - CASS COMMUNITY SOCIAL SERVICES
TO TRAIN ALL STAFF TO IMPLEMENT THE EVIDENCE-BASED SEEKING SAFETY
APPROACH TO TRAUMA-INFORMED CARE FOR ADULTS EXPERIENCING CHRONIC
HOMELESSNESS AND HOUSING.

NAME OF RECIPIENT - COMMON GROUND
TO SUPPORT COUNSELING AND THERAPY PROVIDED BY COUNSELORS WHOSE SALARIES
HAVE BEEN JEOPARDIZED BY RECENTLY REDUCED FUNDING FROM OUTSIDE
ORGANIZATIONS.

NAME OF RECIPIENT - COMMUNITY FDN FOR SOUTHEASTERN MICHIGAN
TO SUPPORT THE SAFETY AND JUSTICE COLLABORATIVE AIMED AT SUPPORTING THE
INVESTMENT OF PUBLIC DOLLARS TO COMMUNITY DRIVEN ALTERNATIVES TO
INCARCERATION.

NAME OF RECIPIENT - DETROIT WAYNE INTEGRATED HEALTH NETWORK
TO SUPPORT A POST-BOOKING DIVERSION PROGRAM FOR PERSONS WITH MENTAL

Part XV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

HEALTH DISORDERS AND MISDEMEANOR OFFENSES.

NAME OF RECIPIENT - FREEDOM HOUSE DETROIT

TO HIRE A LICENSED CARE COUNSELOR TO PROVIDE ON-SITE PSYCHOTHERAPY AND
PSYCHOSOCIAL TREATMENT TO SURVIVORS OF TORTURE/TRAUMA AND/OR ASYLUM
SEEKERS.

NAME OF RECIPIENT - HEGIRA PROGRAMS, INC.

TO ADDRESS BEHAVIORAL HEALTH NEEDS OF THE FIREFIGHTERS AND POLICE
OFFICERS OF SIX WESTERN WAYNE PUBLIC SAFETY DEPARTMENTS.

NAME OF RECIPIENT - HENRY FORD HEALTH SYSTEM

TO DEVELOP AND IMPLEMENT A COMPREHENSIVE MODEL OF OPIOID USE DISORDER
TREATMENT BY INTEGRATING BIWEEKLY TELEPSYCHIATRY/TELE THERAPY AND MOBILE
HEALTH-BASED COGNITIVE-BEHAVIORAL THERAPY WITH EXISTING
MEDICATION-ASSISTED TREATMENT.

NAME OF RECIPIENT - IHA HEALTH SERVICES CORPORATION

TO INTEGRATE BEHAVIORAL HEALTH COLLABORATIVE CARE PROGRAM IN TWO
SOUTHEAST MICHIGAN HOSPITAL SETTINGS.

NAME OF RECIPIENT - JUDSON CENTER

TO LAUNCH A HIGH-QUALITY TELE-COUNSELING SERVICE TO INCREASE MENTAL
HEALTH ACCESS FOR UNDERSERVED POPULATIONS IN SOUTHEAST MICHIGAN.

NAME OF RECIPIENT - MENTAL HEALTH ASSOCIATION IN MICHIGAN

FOR GENERAL OPERATING SUPPORT. MHAM IS THE STATES OLDEST NONPROFIT
ORGANIZATION CONCERNED WITH MENTAL ILLNESS AND IS THE LEADING POLICY

Part XV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

AND RESEARCH ADVOCATE. MHAM SEEKS REGULATORY ACTION FROM THE STATE GOVERNMENT THAT IT DEEMS IS IN THE BEST INTEREST OF ADULTS AND YOUTH EXPERIENCING OR AT RISK OF MENTAL ILLNESS.

NAME OF RECIPIENT - MICHIGAN'S CHILDREN
FOR GENERAL OPERATING SUPPORT. MICHIGAN'S CHILDREN WILL BOLSTER THE PUBLIC POLICY RESEARCH ADVOCACY CAPACITY OF MENTAL HEALTH SERVICES PROVIDERS, AND YOUTH AND FAMILIES WHO RECEIVE MENTAL HEALTH SERVICES. IT WILL ALSO LEAD EFFORTS TO SEEK REGULATORY ACTION FROM THE STATE GOVERNMENT THAT IT DEEMS IS IN THE BEST INTEREST OF CHILDREN EXPERIENCING OR AT RISK OF MENTAL ILLNESS.

NAME OF RECIPIENT - NAMI DETROIT
FOR GENERAL OPERATING SUPPORT. TO BUILD THE CAPACITY OF NAMI DETROIT AND ENHANCE COMMUNITY PRESENCE AND ACCESS TO MENTAL HEALTH RESOURCES.

NAME OF RECIPIENT - NAMI METRO
FOR GENERAL OPERATING SUPPORT. LOCATED IN SOUTHEAST MICHIGAN, NAMI METROS CONSTITUENT MEMBERS COVER THE FOUNDATIONS GEOGRAPHIC FOCUS OF WAYNE, OAKLAND AND MACOMB COUNTY.

NAME OF RECIPIENT - NAMI MICHIGAN
FOR GENERAL OPERATING SUPPORT. NAMI MICHIGAN AND ITS STATEWIDE AFFILIATES ADVOCATE AT THE STATE LEVEL FOR PERSONS AFFECTED BY MENTAL ILLNESS AND SERVES AS A LEADING PROPONENT ON CONSUMER AND FAMILY INVOLVEMENT IN CARE, TREATMENT AND RECOVERY. NAMI MICHIGAN HELPS TO STRENGTHEN LOCAL AFFILIATES TO PROVIDE SUPPORT WITHIN THEIR COMMUNITIES.

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Part XV. Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - NAMI WASHTENAW COUNTY

FOR GENERAL OPERATING SUPPORT. LOCATED IN SOUTHEAST MICHIGAN, NAMI WASHTENAW COUNTY CONSTITUENT MEMBERS COVER THE FOUNDATIONS GEOGRAPHIC FOCUS OF WASHTENAW COUNTY.

NAME OF RECIPIENT - NORTHEAST GUIDANCE CENTER

TO DEVELOP FATHERHOOD GROUPS TO HELP DADS BUILD SECURE RELATIONSHIPS WITH THEIR CHILDREN TO IMPROVE MATERNAL AND CHILD HEALTH OUTCOMES, SUPPORT CHILDREN'S EARLY LEARNING AND REDUCE FAMILY AND COMMUNITY VIOLENCE.

NAME OF RECIPIENT - NORTHEAST GUIDANCE CENTER

TO EXPAND COMMUNITY AND POLICE PARTNERSHIP ADVOCACY (CAPPA) TO BETTER ASSIST 1,500 HOMELESS AND PEOPLE IN PSYCHOTIC CRISES.

NAME OF RECIPIENT - OAKLAND FAMILY SERVICES

TO LAUNCH A HIGH-QUALITY TELE-COUNSELING SERVICE TO INCREASE MENTAL HEALTH ACCESS FOR UNDERSERVED POPULATIONS IN SOUTHEAST MICHIGAN.

NAME OF RECIPIENT - PEDIATRIC FOUNDATION OF MICHIGAN, INC.

TO EXPAND THE ADOLESCENT SCREEN FOR 3 TO TRAIN PRIMARY CARE PROVIDERS TO MORE COMPREHENSIVELY ASSESS, TREAT AND FOLLOW-UP WITH YOUTH, 11-18 YEARS OLD, AS IT RELATES TO MENTAL HEALTH.

NAME OF RECIPIENT - REGENTS OF THE UNIVERSITY OF MICHIGAN

TO SUPPORT 9 HEALTH FUNDER COLLABORATIVE PARTNERSHIP TO IMPLEMENT TRAILS TO WELLNESS COMPREHENSIVE MENTAL HEALTH PROGRAMMING THROUGHOUT

Part XV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

THE ENTIRE DETROIT PUBLIC SCHOOL COMMUNITY DISTRICT (K-12).

NAME OF RECIPIENT - SOUTHWEST COUNSELING SOLUTIONS

CAPACITY BUILDING SUPPORT TO IMPROVE EFFICACY AND OPERATION OF CLINICAL INFORMATION AND ACCOUNTING SYSTEMS.

NAME OF RECIPIENT - SPECTRUM CHILD AND FAMILY SERVICES

TO PILOT EVIDENCE-BASED TRAUMA TREATMENT (TF-CBT) PROGRAM FOR TEENAGE GIRLS IN SHELTER CARE IN WAYNE COUNTY.

NAME OF RECIPIENT - STARFISH FAMILY SERVICES, INC.

TO IMPLEMENT ARC, A FRAMEWORK FOR INTERVENTION WITH YOUTH AND FAMILIES AGES 0-21 WHO HAVE HAD ADVERSE EXPERIENCES.

NAME OF RECIPIENT - STARR COMMONWEALTH

TO CONDUCT COMPREHENSIVE TRAUMA ASSESSMENTS, INDIVIDUAL AND GROUP THERAPY FOR AT-RISK AND TRAUMATIZED PRESCHOOL AND SCHOOL-AGED CHILDREN AND ADOLESCENTS.

NAME OF RECIPIENT - THE BOARD OF GOVERNORS (AKA WSU)

FOR PROJECT MANAGEMENT AND EVALUATION OF THE WAYNE COUNTY MENTAL HEALTH DIVERSION COMMITTEE. THE COMMITTEE (LED BY JUDGE FREDDIE BURTON, JR. AND JUDGE TIMOTHY KENNY) IS IMPLEMENTING PROVISIONS OF THE SEQUENTIAL INTERCEPT MODEL AIMED AT DIVERTING PEOPLE WITH MENTAL ILLNESS OR SUBSTANCE USE DISORDERS OUT OF THE CRIMINAL JUSTICE SYSTEM INTO COMMUNITY TREATMENT AND SUPPORTS.

NAME OF RECIPIENT - THE JED FOUNDATION

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Part XV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

TO COLLABORATIVELY SUPPORT (IN PARTNERSHIP WITH THE JED FOUNDATION AND BLUE CROSS BLUE SHIELD OF MICHIGAN FOUNDATION) THE DEVELOPMENT OF THE UNIVERSITY OF MICHIGAN HEALTHY MINDS COLLEGE STUDENT SURVEY AND MENTAL HEALTH ASSESSMENT TOOL FOR HIGH SCHOOL STUDENTS.

NAME OF RECIPIENT - TRINITY HEALTH-MICHIGAN

TO IMPLEMENT AN EVIDENCE-BASED INTEGRATIVE PHYSICAL HEALTH AND BEHAVIORAL HEALTH CARE APPROACH AT A NEW UNIVERSITY-BASED CLINIC IN YPSILANTI SERVING EASTERN MICHIGAN UNIVERSITY (EMU).

NAME OF RECIPIENT - VISTA MARIA

TO EXPAND THE RISKING CONNECTIONS MODEL AND TRAUMA RESPONSE IMPLEMENTED PRACTICE MODEL INTO DELIVERY SYSTEM.

NAME OF RECIPIENT - WASHTENAW COUNTY HEALTH DEPARTMENT

TO SUPPORTING MAPPING PROCESS TO IDENTIFY GAPS IN CARE AND/OR REDUNDANCIES TO IMPROVE CARE AND QUALITY OF SERVICES.

NAME OF RECIPIENT - WAYNE COUNTY THIRD CIRCUIT COURT

TO EXPAND THE SUPERVISING TREATMENT FOR ALCOHOL AND NARCOTICS DEPENDENCY (S.T.A.N.D) PROGRAM IN THIRD JUDICIAL CIRCUIT OF MICHIGAN'S JUVENILE DRUG TREATMENT COURT TO NON-MEDICAID ELIGIBLE YOUTH.

FORM 990-PF GAIN OR (LOSS) FROM SALE OF ASSETS STATEMENT 1

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) MANNER ACQUIRED PURCHASED	(F) DATE ACQUIRED DATE SOLD
K-1 PARTNERSHIP INCOME	974,595.	974,595.	0.	0.	0.

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) MANNER ACQUIRED PURCHASED	(F) DATE ACQUIRED DATE SOLD
SCHWAB REDEMPTIONS	14,714,350.	12,607,453.	0.	0.	2,106,897.

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) MANNER ACQUIRED PURCHASED	(F) DATE ACQUIRED DATE SOLD
CAPITAL GAIN DISTRIBUTIONS	574,139.	0.	0.	0.	574,139.

CAPITAL GAINS DIVIDENDS FROM PART IV 0.

TOTAL TO FORM 990-PF, PART I, LINE 6A 2,681,036.

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 2

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
MONEY MARKET	3,600.	3,600.	0.
TOTAL TO PART I, LINE 3	3,600.	3,600.	0.

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 3

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
DIVIDENDS & BOND FUNDS	1,494,848.	0.	1,494,848.	1,494,848.	0.
TO PART I, LINE 4	1,494,848.	0.	1,494,848.	1,494,848.	0.

FORM 990-PF OTHER INCOME STATEMENT 4

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
MINING INTERESTS	162,938.	162,938.	0.
MISCELLANEOUS INCOME	206.	206.	0.
K-1 PARTNERSHIP INCOME	0.	-247,836.	0.
TOTAL TO FORM 990-PF, PART I, LINE 11	163,144.	-84,692.	0.

FORM 990-PF LEGAL FEES STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	14,759.	4,526.	0.	10,233.
TO FM 990-PF, PG 1, LN 16A	14,759.	4,526.	0.	10,233.

FORM 990-PF ACCOUNTING FEES STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
AUDIT FEES	24,700.	7,481.	0.	17,219.
TO FORM 990-PF, PG 1, LN 16B	24,700.	7,481.	0.	17,219.

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER FEES	30,414.	9,303.	0.	21,111.
INVESTMENT EXPENSES	51,854.	51,854.	0.	0.
MEDIA RELATIONS	185,238.	0.	0.	185,238.
TO FORM 990-PF, PG 1, LN 16C	267,506.	61,157.	0.	206,349.

FORM 990-PF	TAXES			STATEMENT 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAXES	39,560.	0.	0.	0.
TO FORM 990-PF, PG 1, LN 18	39,560.	0.	0.	0.

FORM 990-PF	OTHER EXPENSES			STATEMENT 9
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INSURANCE	5,461.	1,675.	0.	3,786.
TELEPHONE/INTERNET	9,400.	2,883.	0.	6,517.
SUPPLIES	4,091.	1,255.	0.	2,836.
EQUIPMENT	30,778.	9,439.	0.	21,339.
MISCELLANEOUS	3,912.	1,200.	0.	2,712.
TO FORM 990-PF, PG 1, LN 23	53,642.	16,452.	0.	37,190.

FORM 990-PF	CORPORATE STOCK	STATEMENT 10
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
COMMON STOCK MUTUAL FUNDS	21,142,377.	24,660,623.
TOTAL TO FORM 990-PF, PART II, LINE 10B	21,142,377.	24,660,623.

FORM 990-PF	CORPORATE BONDS	STATEMENT 11
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
FIXED INCOME MUTUAL FUNDS	13,997,907.	13,743,701.
TOTAL TO FORM 990-PF, PART II, LINE 10C	13,997,907.	13,743,701.

FORM 990-PF	OTHER INVESTMENTS	STATEMENT 12	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
MULTI-ASSET MUTUAL FUNDS	COST	5,821,597.	6,803,033.
MARKETABLE HEDGE FUNDS	COST	8,703,001.	9,068,407.
REAL ESTATE/HARD ASSETS	COST	3,999,278.	4,258,429.
PRIVATE EQUITY FUNDS	COST	1,787,492.	6,035,714.
TOTAL TO FORM 990-PF, PART II, LINE 13		20,311,368.	26,165,583.

FORM 990-PF	OTHER ASSETS		STATEMENT 13
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
MINING AND GAS INTERESTS	939,057.	939,057.	798,589.
TO FORM 990-PF, PART II, LINE 15	939,057.	939,057.	798,589.

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 14

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
ANDREA M. COLE 333 W. FORT STREET, SUITE 1950 DETROIT, MI 48226	CHIEF EXECUTIVE OFFICER 40.00	232,000.	28,208.	0.
LEONARD W. SMITH 333 W. FORT STREET, SUITE 1950 DETROIT, MI 48226	CHIEF INVESTMENT OFFICER 40.00	141,000.	15,344.	0.
CHERYL COLEMAN 333 W. FORT STREET, SUITE 1950 DETROIT, MI 48226	TRUSTEE 1.00	0.	0.	0.
LYNN SCHNEIDER 333 W. FORT STREET, SUITE 1950 DETROIT, MI 48226	TRUSTEE 1.00	0.	0.	0.
DR. THOMAS ZELNIK 333 W. FORT STREET, SUITE 1950 DETROIT, MI 48226	TRUSTEE 1.00	0.	0.	0.
FREDDIE G. BURTON, JR. 333 W. FORT STREET, SUITE 1950 DETROIT, MI 48226	TRUSTEE 1.00	0.	0.	0.
JACK KRESNAK 333 W. FORT STREET, SUITE 1950 DETROIT, MI 48226	TRUSTEE 1.00	0.	0.	0.
DUANE TARNACKI 333 W. FORT STREET, SUITE 1950 DETROIT, MI 48226	TRUSTEE 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII		373,000.	43,552.	0.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION
PART XV, LINES 2A THROUGH 2D

STATEMENT 15

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

ANDREA M. COLE, EXECUTIVE DIRECTOR AND CEO
333 W. FORD STREET, SUITE 1950
DETROIT, MI 48266

TELEPHONE NUMBER

(313) 309-3436

EMAIL ADDRESS

ACOLE@FLINNFOUNDATION.ORG

FORM AND CONTENT OF APPLICATIONS

THE FOUNDATION ACCEPTS COMPETITIVE PROPOSALS ONCE A YEAR THROUGH ITS ON-LINE
GRANT APPLICATION SYSTEM.

ANY SUBMISSION DEADLINES

THE FDN ANNOUNCES RFPS ANNUALLY IN MAY, APPS ARE ACCEPTED THROUGH JULY AND
ANNOUNCED IN SEPTEMBER.

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE FOUNDATION AWARDS GRANTS TO NON-PROFITS THAT DELIVER MENTAL HEALTH CARE
AND SERVICES IN MICHIGAN.