EXTENDED TO MAY 15, 2019

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.

For	calen	idar year 2017 or tax year	beginning JUL	1, 2017	, and ending	JUN 30, 2018	}
_		foundation				A Employer identification	
			•			' -	
I	ET.	ROIT EMPLOYM	ENT SOLUTION	NS CORPORATIO	N	38-3353746	5
Nu	mber a	nd street (or PO box number if	mail is not delivered to street a	ddress)	Room/suite	B Telephone number	
_4	140	EAST CONGRE	SS			313-664-55	60
Cr	ty or t	own, state or province, coi		ostal code		C If exemption application is p	pending, check here
I	DET:	ROIT, MI 48	226-2917				
G	Check	all that apply:	Initial return	=	ormer public charity	D 1. Foreign organization	is, check here
			Final return	Amended return		2 Foreign organizations m	anting the REG/ tool
			Address change	Name change		Foreign organizations m check here and attach co	omputation
H_			X Section 501(c)(3) ex		2)	E If private foundation st	
<u> </u>		ction 4947(a)(1) nonexem		Other taxable private founda		under section 507(b)(1)(A), check here $ ightharpoonup$
		arket value of all assets at	· · —	-	X Accrual	F If the foundation is in a	
		Part II, col. (c), line 16)		ther (specify)	- \	under section 507(b)(1)(B), check here 🕨 🗶
	<u>>\$</u>			nn (d) must be on cash bası			(4) -
P	art I	(The total of amounts in colu	mns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes
_	Τ.	necessarily equal the amount		56,290,165.			(cash basis only)
	1 1	Contributions, gifts, grant		30,230,103.		N/A	+
	2	Interest on savings and tempo	on is not required to attach Sch. B orery	1,015.	1,015.		STATEMENT 1
, 	3	cash investments Dividends and interest fro	om acquestica	1,015.	1,013.		SIMIMMINI I
_	4 50	Gross rents	om securines			·· · · · · · · · · · · · · · · · · · ·	
	1	Net rental income or (loss)					<u> </u>
9	_	Net gain or (loss) from sale of	aggets not on line 10		***** - 1 · · · · · ·	REC	IVED
2019	[ש	Gross sales price for all assets on line 6a	assets not on tine to			1,720	100
က	b 7	Capital gain net income (from	Part IV. line 2)		`~ 0.	4 1111	10000 18
0	8	Net short-term capital gai) 6-2019 ////
	9	Income modifications					
JUL	10a	Gross sales less returns				OGDE	TU.NE
	Ь	Less Cost of goods sold					
岀	C	Gross profit or (loss)					
Z,	11	Other income		2,057.	0.		STATEMENT 2
8 _	12	Total. Add lines 1 throug	<u>ıh 11 </u>	56,293,237.	1,015.		
SCANNED	13	Compensation of officers, dire	ectors, trustees, etc	841,030.	0.		841,030.
(3)	14	Other employee salaries a	•	7,188,730.	0.		7,188,730.
	15	Pension plans, employee		978,941.	0.		978,941.
_	Ū)	Legal fees	STMT 3 STMT 4	90,025.	0.	<u> </u>	90,025.
	Del D	Accounting fees	D 4 4 4 4	58,126.	0.		58,126.
> 3	ĬĮ.º	Other professional fees	STMT 5	531,146.	0.		531,146.
۳.	21	Interest	STMT 6	679,083.	0.	1	679,083.
ر ن ر	18	Taxes Depreciation and depletio		39,127.	0.		073,003.
<u>်</u>	19	,	0(1	1,652,950.	0.	_	1,652,950.
4	20 21	Occupancy Travel, conferences, and	meetinge	222,785.	0.		222,785.
(r)		Printing and publications		121,068.	0.		121,068.
63	22 5 23	Other expenses	STMT 7	24,576,744.	0.		24,576,744.
ω. ~	24	Total operating and adm		<u> </u>			
~ 1	21	expenses Add lines 13 t		36,979,755.	0.		36,940,628.
ي سي	25	Contributions, gifts, grant	-	16,151,671.			16,151,671.
2	26	Total expenses and disb					
pro	<u>'</u>	Add lines 24 and 25		53,131,426.	0.		53,092,299.
SUN & D ZULE	27	Subtract line 26 from line	: 12:				
	a	Excess of revenue over expens	ses and disbursements	3,161,811.			
\sim $^{\prime}$ $^{\prime}$	ე ხ	Net investment income (if negative, enter -0-)		1,015.		
// N	Л.	Adjusted net income (if n	egative enter -0-)			N/A	

Form **990-PF** (2017)

17520423 147228 111564

LHA For Paperwork Reduction Act Notice, see instructions.

38-3353746

Page 2

Parl	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	'year
Par	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
\top_1	Cash - non-interest-bearing	5,342,236.	7,635,190.	7,635,190.
- 1	Savings and temporary cash investments			
	Accounts receivable ► 2,480.			
	Less; allowance for doubtful accounts	121,008.	2,480.	2,480.
1	Pledges receivable			
'	Less; allowance for doubtful accounts			·
_ ا ـ	Grants receivable	2,987,548.	6,801,139.	6,801,139.
	ŀ	2,301,3101	0,001,135	0,001,133.
l °	Receivables due from officers, directors, trustees, and other	1		
,	disqualified persons			
'	Other notes and loans receivable		<u> </u>	
١.	Less: allowance for doubtful accounts			
\$ \$	Inventories for sale or use	212 205		
Assets		212,285.	0.	0.
١.٠	a Investments - U S and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
11	Investments - land buildings, and equipment basis			
	Less accumulated depreciation			
12	! Investments - mortgage loans			
13				
14	Land, buildings, and equipment basis - 814,836.	,	· · · · · · · · · · · · · · · · · · ·	
	Less accumulated depreciation \(\bigsim \) \(750,944. \)	103,019.	63,892.	63,892.
15	Other assets (describe ► SECURITY DEPOSIT)	29,660.	29,660.	29,660.
16	Total assets (to be completed by all filers - see the			-
	instructions Also, see page 1, item I)	8,795,756.	14,532,361.	14,532,361.
17	Accounts payable and accrued expenses	4,269,849.	7,863,197.	
18	Grants payable			
19 س	· ·	2,471,593.	1,453,039.	
انة	ľ			
Liabiliti				
25 ات	Other liabilities (describe)			
22	Total liabilities (add lines 17 through 22)	6,741,442.	9,316,236.	
7	Foundations that follow SFAS 117, check here	0,,12,1223	3,320,2300	
	and complete lines 24 through 26, and lines 30 and 31.			
S 24		49,455.	<96,474.>	
υl	•	2,004,859.	5,312,599.	
	Temporarily restricted	2,004,033.	3,312,333.	
E 26	. — [
Fund	Foundations that do not follow SFAS 117, check here			
► 1	and complete lines 27 through 31.			
27 چ	· · · · · · · · · · · · · · · · · · ·			
Assets				
	, , , , , , , , , , , , , , , , , , ,		5 015 105	
₹ 30	Total net assets or fund balances	2,054,314.	5,216,125.	
31	Total liabilities and net assets/fund balances	8,795,756.	14,532,361.	
Par	Analysis of Changes in Net Assets or Fund Ba	lances		
			·	
1 Tot	al net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
(m	ust agree with end-of-year figure reported on prior year's return)		_1	2,054,314.
2 Ent	er amount from Part I, line 27a		2	3,161,811.
3 Oth	ner increases not included in line 2 (itemize)		3	0.
	d lines 1, 2, and 3		4	5,216,125.
5 Dec	creases not included in line 2 (itemize)		5	0.
	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	5,216,125.
				Form 990-PF (2017)

	ROIT EMPLOYMENT and Losses for Tax on			ORATION		38-335	3746 Page 3
(a) List and describe	e the kind(s) of property sold (for e varehouse; or common stock, 200 s	xample, real esta		(b) How acquir P - Purchase D - Donation	ed (c) Date acquired (mo , day, yr)	(d) Date sold (mo., day, yr.)
1a	<u> </u>			D - Donation	\dashv		
	NE						
C							
d							
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain or (loss) ((e) plus (f) minus (
•	(or allowable)	pius	expense of sale			((e) pius (i) minus (9//
a b				<u> </u>			
C							
d							
Consolute and for secure above			40/04/00				- -
Complete only for assets snowl	ng gain in column (h) and owned b	1		\dashv		Gains (Col. (h) gain 'k), but not less thar	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		col (j), if any			Losses (from col. (I	
<u>a</u> b							
C							
d							
<u>e</u>							
2 Capital gain net income or (net c		nter in Part I, line -0- in Part I, line		} 2			
3 Net short-term capital gain or (lo		and (6):		3			
If (loss), enter -0- in Part I, line 8 [Part Va Qualification U	Indox Section 4040(e) fo	r Doduood	Toy on Not	J 3	Incor		
(For optional use by domestic private					IIICOI		
(For optional use by domestic prival	te toutioations subject to the section	11 4940(a) lax 011	net investment in	come)			
If section 4940(d)(2) applies, leave	this part blank						
Was the foundation liable for the set If "Yes," the foundation doesn't quali			•	nod?			Yes X No
	each column for each year, see the	e instructions bef	fore making any e	ntries		,	
(a) Base period years Calendar year (or tax year beginn	ing in) Adjusted qualifying in	distributions	Net value of no	(c) oncharitable-use	assets		(d) ution ratio ded by col (c))
2016				<u>.</u>			
2015				<u> </u>			
2014 2013		-					
2012					-		·- · · ·
2 Total of line 1, column (d)						2	
-	5-year base period - divide the tot	al on line 2 by 5.0	0, or by the numb	er of years			
the foundation has been in existe	ence it less than 5 years					3	
4 Enter the net value of noncharita	ble-use assets for 2017 from Part 2	X, line 5				4	-
5 Multiply line 4 by line 3						5	·-··
6 Enter 1% of net investment incom	me (1% of Part I, line 27b)					6	
7 Add lines 5 and 6						7	
8 Enter qualifying distributions fro	m Part XII, line 4					8	
If line 8 is equal to or greater tha See the Part VI instructions	in line 7, check the box in Part VI, I	ine 1b, and comp	olete that part usin	g a 1% tax rate.			-
723521 01-03-18						F	orm 990-PF (2017

m 990-PF (2017) DETROIT EMPLOYMENT SOLUTIO				3353746		Page 4
art VI Excise Tax Based on Investment Income (Section		940(e), or 49	48 - 5	see instru	ction	S)
a Exempt operating foundations described in section 4940(d)(2), check here)				1
Date of ruling or determination letter (attach copy of let						
${f b}$ Domestic foundations that meet the section 4940(e) requirements in Part V, check	here and enter 1%	, }	1			20.
of Part I, line 27b						
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations,		l. (b) ノ				لـــِــا
Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations	s only; others, enter -0-)		2			0.
Add lines 1 and 2			3			20.
Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation	ns only; others, enter -0-)		4			0.
Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter	r -0-		5			20.
Credits/Payments:	1 1	_				
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a	0.				
b Exempt foreign organizations - tax withheld at source	6b	0.				
c Tax paid with application for extension of time to file (Form 8868)	6c	0.				
d Backup withholding erroneously withheld	6d	0.				
Total credits and payments Add lines 6a through 6d			7			0.
Enter any penalty for underpayment of estimated tax. Check here if Form 22.	220 is attached		8			0.
Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		▶	9			20.
Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount over	erpaid	. ▶	10			
Enter the amount of line 10 to be: Credited to 2018 estimated tax		Refunded -	11			
art VII-A Statements Regarding Activities					15.4	
a During the tax year, did the foundation attempt to influence any national, state, or lo	ocal legislation or did it particij	oate or intervene	IN		Yes	
any political campaign?				1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for politic						X
2 3.3 1. Spond more than \$100 during the year (entire directly of members) for points	cal purposes? See the instructi	ons for the defini	tion	<u> 1b</u>		
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	• •		tion	16		
	• •		tion	16		
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	• •		tion	1b 1c		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed di	d copies of any materials public	shed or	tion			
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed d (1) On the foundation. \$	d copies of any materials public luring the year: managers > \$	shed or O .	lion			
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed di (1) On the foundation. \$\int 0.\ (2) On foundation n e Enter the reimbursement (if any) paid by the foundation during the year for political	d copies of any materials public luring the year: managers > \$	shed or O .	tion			
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed di (1) On the foundation. \$\int 0 \cdot (2) \text{ On foundation n}\$ e Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0 \cdot \	d copies of any materials public luring the year: managers > \$ il expenditure tax imposed on f	shed or O .	tion			х
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed di (1) On the foundation. \$\int 0.\ (2) On foundation n e Enter the reimbursement (if any) paid by the foundation during the year for political	d copies of any materials public luring the year: managers > \$ il expenditure tax imposed on f	shed or O .	lion			
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed di (1) On the foundation. \$\int 0.\ (2) On foundation or enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0.\ (2) On foundation or political managers. \$\int 0.\ (2) On foundation or political managers. \$\int 0.\ (3) On foundation or political managers. \$\int 0.\ (4) On foundation or political managers. \$\int 0.\ (1) On foundation or political managers. \$\int 0.\ (2) On foundation or political managers. \$\int 0.\ (3) On foundation or political managers. \$\int 0.\ (1) On foundation or political managers. \$\int	d copies of any materials public luring the year: managers > \$ il expenditure tax imposed on f	O . oundation		1c		х
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed d (1) On the foundation. \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	d copies of any materials public luring the year: managers > \$ il expenditure tax imposed on f id to the IRS?	O . oundation		1c		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed di (1) On the foundation. \$\int 0.\ (2) On foundation or enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0.\ (2) On foundation or political managers. \$\int 0.\ (2) On foundation or political managers. \$\int 0.\ (3) On foundation or political managers. \$\int 0.\ (4) On foundation or political managers. \$\int 0.\ (1) On foundation or political managers. \$\int 0.\ (2) On foundation or political managers. \$\int 0.\ (3) On foundation or political managers. \$\int 0.\ (1) On foundation or political managers. \$\int	d copies of any materials public luring the year: managers > \$ il expenditure tax imposed on f id to the IRS?	O . oundation		1c		х
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed d (1) On the foundation. \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	d copies of any materials public furing the year: managers \$ il expenditure tax imposed on find to the IRS? everning instrument, articles of tages	O . oundation		10	X	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed d (1) On the foundation. \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	d copies of any materials public furing the year: managers \$ il expenditure tax imposed on find to the IRS? everning instrument, articles of tages	O . oundation		1c 2 3	X	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed d (1) On the foundation. \(\bigstyre{\sigma} \) \(\bigstyre{\sigma} \) \((2) \) On foundation of the foundation during the year for political managers. \(\bigstyre{\sigma} \) \(\bigstyre	d copies of any materials public furing the year: managers \$	O . oundation		1c 2 3 4a		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed di (1) On the foundation. \$\int 0. (2) \text{ On foundation n}\$ e Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. \qua	d copies of any materials public furing the year: managers \$	O . oundation		1c 2 3 4a 4b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed di (1) On the foundation. S O (2) On foundation in e Enter the reimbursement (if any) paid by the foundation during the year for political managers. Has the foundation engaged in any activities that have not previously been reported if "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its go bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change in the foundation have unrelated business gross income of \$1,000 or more during the "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the state of the section of the se	d copies of any materials public luring the year: managers > \$	O . oundation		1c 2 3 4a 4b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed di (1) On the foundation. \$\int 0.\ (2) On foundation or e Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0.\ (2) On foundation or e Enter the reimbursement (if any) paid by the foundation during the year for political managers. Has the foundation engaged in any activities that have not previously been reported if "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its go bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change in the foundation have unrelated business gross income of \$1,000 or more during the "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the "Yes," attach the statement required by General Instruction T	d copies of any materials public luring the year: managers > \$	O . oundation		1c 2 3 4a 4b		X X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed did (1). On the foundation. \$\int 0. (2) On foundation in Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation in Enter the reimbursement (if any) paid by the foundation during the year for political managers. Has the foundation engaged in any activities that have not previously been reported if "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its going bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change if "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) sa	d copies of any materials public luring the year: managers \$	O . oundation incorporation, or		1c 2 3 4a 4b	X	x
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed d (1) On the foundation. \$\int 0. (2) On foundation in e Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation in e Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation in e Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation in e Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation in e Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation in e Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation in ### Tyes," attach a detailed description of the activities. Has the foundation engaged in any activities that have not previously been reported to the IRS, in its gore bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change bylaws, or other similar instruments on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the "Yes," attach the statement required by *General Instruction T* Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfies the province in the governing instrument, or By state legislation that effectively amends the governing instrument so that no in remain in the governing instrument?	d copies of any materials public furing the year: managers \$	O . oundation incorporation, or		1c 2 3 4a 4b	X	X X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed d (1) On the foundation. \$\int 0.\ (2) On foundation in e Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0.\ \ Has the foundation engaged in any activities that have not previously been reported if "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its gorbylaws, or other similar instruments? If "Yes," attach a conformed copy of the change in the foundation have unrelated business gross income of \$1,000 or more during if "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) sa By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no near the section of the foundation in t	d copies of any materials public furing the year: managers \$	O . oundation incorporation, or		1c 2 3 4a 4b 5	X	X X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed d (1) On the foundation. \$\int 0. (2) On foundation in e Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation in e Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation in e Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation in e Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation in e Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation in e Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation in ### Tyes," attach a detailed description of the activities. Has the foundation engaged in any activities that have not previously been reported to the IRS, in its gore bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change bylaws, or other similar instruments on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the "Yes," attach the statement required by *General Instruction T* Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfies the province in the governing instrument, or By state legislation that effectively amends the governing instrument so that no in remain in the governing instrument?	d copies of any materials public furing the year: managers \$	O . oundation incorporation, or		1c 2 3 4a 4b 5	X	X X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed did (1) On the foundation. \$\int 0. (2) On foundation or enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation or enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation or enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation or enter the foundation during the year for political managers. \$\int 0. (2) On foundation or enter the year for political managers. \$\int 0. (2) On foundation or enter the year for political managers. \$\int 0. (2) On foundation or enter the year for political managers. \$\int 0. (2) On foundation or enter the year for political managers. \$\int 0. (2) On foundation or enter the year for political managers. \$\int 1" Yes," attach a detailed description of the activities. Has the foundation have unrelated business gross income of \$1,000 or more during the "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the "Yes," attach the statement required by *General Instruction T* Are the requirements of section 508(e) (relating to sections 4941 through 4945) sate legislation that effectively amends the governing instrument so that no in remain in the governing instrument? By state legislation that effectively amends the governing instrument so that no in remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes the foundation have at least \$5,000 in assets at any time during the year? If "Yes the foundation have at least \$5,000 in assets a	d copies of any materials public furing the year: managers \$	O . oundation incorporation, or		1c 2 3 4a 4b 5	X	x
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed did (1) On the foundation. \$\int 0. (2) On foundation in the Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation in the Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation in the Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation in the Enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation in the Enter the requirements of the activities. Has the foundation engaged in any activities that have not previously been reported if "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its gore bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change in the foundation have unrelated business gross income of \$1,000 or more during the "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the "Yes," attach the statement required by *General Instruction T* Are the requirements of section 508(e) (relating to sections 4941 through 4945) sate legislation that effectively amends the governing instrument so that no in remain in the governing instrument? By state legislation that effectively amends the governing instrument so that no in remain in the governing instrument?	d copies of any materials public furing the year: managers \$	O . oundation incorporation, or		1c 2 3 4a 4b 5	X	x
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed did (1) On the foundation. \$\int 0. (2) On foundation or enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation or enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation or enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation or enter the foundation during the year for political managers. \$\int 0. (2) On foundation or enter the year for political managers. \$\int 0. (2) On foundation or enter the year for political managers. \$\int 0. (2) On foundation or enter the year for political managers. \$\int 0. (2) On foundation or enter the year for political managers. \$\int 0. (2) On foundation or enter the year for political managers. \$\int 1" Yes," attach a detailed description of the activities. Has the foundation have unrelated business gross income of \$1,000 or more during the "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the "Yes," attach the statement required by *General Instruction T* Are the requirements of section 508(e) (relating to sections 4941 through 4945) sate legislation that effectively amends the governing instrument so that no in remain in the governing instrument? By state legislation that effectively amends the governing instrument so that no in remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes the foundation have at least \$5,000 in assets at any time during the year? If "Yes the foundation have at least \$5,000 in assets a	d copies of any materials public luring the year: managers \$	O . oundation incorporation, or ict with the state		1c 2 3 4a 4b 5	X	X X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed did (1) On the foundation. S O. (2) On foundation in Enter the reimbursement (if any) paid by the foundation during the year for political managers. Has the foundation engaged in any activities that have not previously been reported if "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its goingly bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change if "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) sate. By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no in remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes as Enter the states to which the foundation reports or with which it is registered. See in MI.	d copies of any materials public luring the year: managers \$	O . oundation incorporation, or ict with the state		1c 2 3 4a 4b 5	X	X X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed did (1) On the foundation. S O. (2) On foundation in Enter the reimbursement (if any) paid by the foundation during the year for political managers. Has the foundation engaged in any activities that have not previously been reported if "Yes," attach a detailed description of the activities. Has the foundation made any changes, not previously reported to the IRS, in its goingle bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change if "Yes," has it filed a tax return on Form 990-T for this year? Was there a liquidation, termination, dissolution, or substantial contraction during the "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) sate By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no in remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes at Enter the states to which the foundation reports or with which it is registered. See in MT. If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF.	d copies of any materials public luring the year: managers > \$ Il expenditure tax imposed on find to the IRS? everning instrument, articles of the year? the year? the year? atisfied either: mandatory directions that conflues," complete Part II, col. (c), a linstructions to the Attorney General (or defended)	O . Oundation Incorporation, or ict with the state and Part XV	law 	1c 2 3 4a 4b 5	X	X X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and distributed by the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed did (1) On the foundation. \$\int 0. (2) On foundation or enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation or enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0. (2) On foundation or enter the reimbursement (if any) paid by the foundation during the year for political managers. \$\int 0.	d copies of any materials public luring the year: managers \$ \$	O . Oundation Incorporation, or ict with the state and Part XV	law 	1c 2 3 4a 4b 5	X	X

Pa	ert 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	11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			$\overline{}$
-	If "Yes," attach statement. See instructions	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address WWW.DESCMIWORKS.COM			
14	The books are in care of ► ALESSIA BAKER-GILES Telephone no ► 313-66	4-5	560	
17	Located at \$\rightarrow\$ 440 E. SUITE 400 CONGRESS, DETROIT, MI ZIP+4 \$\rightarrow\$48			17
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	, , ,		亡
13	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16			Yes	No
10	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	10		
Pá	foreign country ► art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	Ь		<u> </u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	1	Yes	No
4.	During the year, did the foundation (either directly or indirectly):			
10	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			{
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			1
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes 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)?			
	(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) Yes X No			
	o 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	1b		X
	Organizations relying on a current notice regarding disaster assistance, check here			-
,	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 2017?	1c		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(i)(3) or 4942(i)(5)).			
	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
٠	before 2017? Yes X No			
	If "Yes," list the years			
	• Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
٠	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			l Í
	statement - see instructions.) N/A	2b		
	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
•				
3.	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
0.	during the year? — Yes X No			
	o If "Yes," did it have excess business holdings in 2017 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 Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2017) N/A	3b		
A	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
٠	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X
		rm 99 0)_PF	

TALEN

0.

0.

0.

0.

40.00

40.00

40.00

40.00

SR ACCOUNTANT

ACCOUNTING MANAGER

108,000.

81,000.

88,000.

71,602.

SENIOR ASSOCIATE, EDUCATION &

12,706.

23,990.

11,534.

23,614

CONGRESS, DETROIT, MI 48226-2917

OMAR HASAN - 440 EAST CONGRESS,

CASSANDRA RICKS - 440 EAST CONGRESS

LYNNETTE ROBINSON - 440 EAST CONGRESS, DETROIT, MI 48226-2917

DETROIT, MI 48226-2917

DETROIT, MI 48226-2917

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

0.

Total. Add lines 1 through 3

All other program-related investments. See instructions

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dations	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	4,210,220.
c	Fair market value of all other assets	1c	······································
d	Total (add lines 1a, b, and c)	1d	4,210,220.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	<u> </u>	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	4,210,220.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	63,153.
5	Net value of noncharitable-use assets Subtract line 4 from line 3 Enter here and on Part V, line 4	5	4,147,067.
6	Minimum investment return. Enter 5% of line 5	6	207,353.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations, check here ▶ ☐ and do not complete this part.)	d certair	1
1	Minimum investment return from Part X, line 6	1	207,353.
2a			
b	Income tax for 2017 (This does not include the tax from Part VI) 2b 8,498.		
C	Add lines 2a and 2b	2c	8,518.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	198,835.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	198,835.
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	198,835.
P	art XII Qualifying Distributions (see instructions)	T	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		F2 000 000
a		1a	53,092,299.
	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	,	3b	F2 002 200
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	53,092,299.
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 6	0. 53,092,299.
6	Adjusted qualifying distributions Subtract line 5 from line 4		
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years	uaiiiies i	ior the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI,	COIPES	10010 prior to 2010	2010	2017
line 7				198,835.
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2017:				-
a From 2012 40,155,183.				
b From 2013 37,064,018.				
c From 2014 34,550,894.	1			
d From 2015 34,134,842.	1			
e From 2016 40,435,363.				
f Total of lines 3a through e	186,340,300.			
4 Qualifying distributions for 2017 from				
Part XII, line 4: ► \$ 53,092,299.	↓			
a Applied to 2016, but not more than line 2a			0.	
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.			100 005
d Applied to 2017 distributable amount	E2 002 464			198,835.
e Remaining amount distributed out of corpus	52,893,464.			0.
5 Excess distributions carryover applied to 2017 (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;				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	239,233,764.			
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.		İ
e Undistributed income for 2016 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2017 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0.			
may be required - see instructions)	0.1			
8 Excess distributions carryover from 2012 not applied on line 5 or line 7	40,155,183.			
9 Excess distributions carryover to 2018.	40,133,103.			
Subtract lines 7 and 8 from line 6a	199,078,581.			
10 Analysis of line 9.				
a Excess from 2013 37,064,018.				
b Excess from 2014 34,550,894.]			
c Excess from 2015 34,134,842.]			
d Excess from 2016 40,435,363.]			
e Excess from 2017 52,893,464.				200 55

723581 01-03-18

Form 990-PF (2017) DETROIT Part XIV Private Operating Form		SOLUTIONS (N/A	353746 Page 10
	•		-A, question 9)	N/A	
1 a If the foundation has received a ruling or foundation, and the ruling is effective for					
b Check box to indicate whether the found	·	-	n contion	4942(j)(3) or 4	942(j)(5)/
	Tax year	ly loulination described i	Prior 3 years	1 4942(])(3) 01 1 4	1942(])(3)/
2 a Enter the lesser of the adjusted net	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
income from Part I or the minimum	(2)2017	(6) 2010	(6) 2013	(4) 2014	(6) 10(2)
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			/		
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			1		
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	·				
Part XV Supplementary Info			f the foundation	had \$5,000 or mo	re in assets
at any time during the	ne year-see instr	uctions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who	have contributed more	than 2% of the total contr	butions received by the	foundation before the clos	se of any tax
year (but only if they have contributed m	ore than \$5,000) (See s	ection 507(d)(2).)			
NONE					
b List any managers of the foundation who			or an equally large porti	on of the ownership of a p	artnership or
other entity) of which the foundation has	s a 10% or greater intere	st			
NONE					
2 Information Regarding Contribution	on, Grant, Gift, Loan,	Scholarship, etc., Pre	ograms:		
Check here X If the foundation o the foundation makes gifts, grants, etc.,					iests for funds If
a The name, address, and telephone numb					
a The hame, address, and telephone hame	oci or ornan address or tr	io person to whom applie	anons should be address	30 u ,	
b The form in which applications should b	e submitted and informa	tion and materials they sh	ould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors:	

Total

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager	Touridation		
	or substantial contributor	status of recipient	contribution	Amount
OOWNRIVER COMMUNITY CONFERENCE	SUBRECIPIENT	PC	PAYMENTS FOR	
.5100 NORTHLINE ROAD STE 179			EMPLOYMENT AND	
SOUTHGATE, MI 48195			TRAINING PROGRAMS	2,096,19
POCUS HOPE	SUBRECIPIENT	PC	PAYMENTS FOR	
200 OAKMAN BLVD.			EMPLOYMENT AND	
DETROIT, MI 48238			TRAINING PROGRAMS	627,19
JACKETS FOR JOBS	SUBRECIPIENT	PC	PAYMENTS FOR	
S555 CONNER AVENUE STE 2097			EMPLOYMENT AND	422.25
DETROIT, MI 48213			TRAINING PROGRAMS	433,362
JEWISH VOCATIONAL SERVICE	SUBRECIPIENT	PC	PAYMENTS FOR	
9699 SOUTHFIELD ROAD			EMPLOYMENT AND	
SOUTHFIELD, MI 48076			TRAINING PROGRAMS	50,687
MATRIX HUMAN SERVICES	SUBRECIPIENT	₽C	PAYMENTS FOR	
1400 PARSON	BOBRECIFIEMI		EMPLOYMENT AND	
DETROIT, MI 48201			TRAINING PROGRAMS	39,061
NEIGHBORHOOD SERVICES ORGANIZATION	SUBRECIPIENT	₽C	PAYMENTS FOR	
882 OAKMAN BLVD. SUITE C DETROIT, MI 48238			EMPLOYMENT AND TRAINING PROGRAMS	993,173
EIROII, MI 40230			TRAINING TROOLERS	333,17
PAYNE PULLIAM	SUBRECIPIENT	₽C	PAYMENTS FOR	
2345 CASS AVENUE			employment and	
DETROIT, MI 48201			TRAINING PROGRAMS	1,902,758
READING WORKS	SUBRECIPIENT	PC	PAYMENTS FOR	
545 GRISWALD, SUITE 2600			EMPLOYMENT AND	
DETROIT, MI 48226			TRAINING PROGRAMS	96,276
TED MORDO	CURRECT D.I. FF.Y	nc.	DAVMENING BOD	
SER METRO 9301 MICHIGAN AVE	SUBRECIPIENT	PC	PAYMENTS FOR EMPLOYMENT AND	
DETROIT, MI 48210			TRAINING PROGRAMS	1,207,036
SOUTHEAST MICHIGAN COMMUNITY ALLIANCE	SUBRECIPIENT	₽C	PAYMENTS FOR	
25363 TELEGRAPH			EMPLOYMENT AND	
TAYLOR, MI 48180 Total from continuation sheets		I	TRAINING PROGRAMS	15,862 9,232,880

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
SOUTHWEST EONCOMIC SOLUTIONS	SUBRECIPIENT	PC	PAYMENTS FOR	
2835 BAGLEY, SUITE 800		.l	EMPLOYMENT AND	
DETROIT, MI 48216			TRAINING PROGRAMS	754,477.
ST. VINCENT & SARAH FISHER CENTER	SUBRECIPIENT	PC	PAYMENTS FOR	
18600 TRINITY DETROIT, MI 48219			EMPLOYMENT AND TRAINING PROGRAMS	24,333.
WAYNE COUNTY COMMUNITY COLLEGE	SUBRECIPIENT	gov	PAYMENTS FOR	
801 FORT ST.			EMPLOYMENT AND	200 545
DETROIT, MI 48226			TRAINING PROGRAMS	388,545.
YMCA OF METROPOLITAN DETROIT	SUBRECIPIENT	₽C	PAYMENTS FOR	
1401 BROADWAY, SUITE A			EMPLOYMENT AND	
DETROIT, MI 48206	-		TRAINING PROGRAMS	336,000.
DETROIT SCHOOL OF DIGITAL TECHNOLOGY	SUBRECIPIENT	PC	PAYMENTS FOR	
1759 W. 21ST STREET DETROIT, MI 48216			EMPLOYMENT AND TRAINING PROGRAMS	20,040.
bulkeri, in 40210				20,000
EMERGING INDUSTRIES TRAINING CENTER	SUBRECIPIENT	₽C	PAYMENTS FOR	
5555 CONNOR SUITE 1646			employment and	
DETROIT, MI 48213			TRAINING PROGRAMS	32,589.
	GUDDIGI DI WA	20	DAMENTO FOR	
GOODWILL 3111 GRAND RIVER	SUBRECIPIENT	PC	PAYMENTS FOR EMPLOYMENT AND	
DETROIT, MI 48205			TRAINING PROGRAMS	8,712.
GREENING OF DETROIT	SUBRECIPIENT	PC PC	PAYMENTS FOR	
13000 w MCNICHOLS			EMPLOYMENT AND	
DETROIT, MI 48235			TRAINING PROGRAMS	6,400.
HRDI	SUBRECIPIENT	₽C	PAYMENTS FOR	
419 S WASHINGTON BLVD			EMPLOYMENT AND	
LANSING, MI 49833			TRAINING PROGRAMS	187,776.
LISC	SUBRECIPIENT	PC	PAYMENTS FOR	
3031 W. GRAND BLVD SUITE 560			EMPLOYMENT AND TRAINING PROGRAMS	12 400
Total from continuation sheets		1	ANTIHING FROGRAMS	12,400.

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income			ded by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue	code	Amount	code	Amount	Tunction income
a					
b	-				
~ C	-	-		•	<u> </u>
d					
e					· .
f			<u> </u>		
g Fees and contracts from government agencies			_		
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments		_	14	1,015.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal		-			
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a VENDING PROCEEDS		•			132.
b FOIA REQUEST FEES					1,925.
c					-
d					-
e					<u>. </u>
12 Subtotal. Add columns (b), (d), and (e)		0	•	1,015.	2,057.
13 Total. Add line 12, columns (b), (d), and (e)				13	3,072.
(See worksheet in line 13 instructions to verify calculations)					

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No.	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of							
lacktriangle	the foundation's exempt purposes (other than by providing funds for such purposes).							
11A	THE ORGANIZATION PROVIDES VENDING MACHINES FOR THE CONVENIENCE OF ITS	S						
	CLIENTS.							
11B	THE ORGANIZATION RESPONDED TO FOIA REQUESTS AND CHARGED A SMALL FEE							
	TO COVER THE EXPENSES OF COMPILE THE DOCUMENTS.							

[Part:XVII] Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations**

1	Did the o	roanization directly or indu	rectly engage in any	of the followin	a with any other organization	on described in sect	tion 501(c)		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization desci (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?						Jii described iii seei	1011 30 1(0)			
•	•	s from the reporting founda	•	-	•					
a	(1) Cash	. •	ation to a noncharitat	ne exempt org	jamzation of.			1a(1)		X
	(1) Oasi							-		X
		nsactions:						1a(2)		
U			ble avamet argenizet					15/1)		X
	• •	s of assets to a noncharital	. •					1b(1)		$\frac{\Lambda}{X}$
	• •	chases of assets from a not	,	ryamzanon				1b(2)		X
		tal of facilities, equipment,	or other assets					1b(3)		$\frac{\Lambda}{X}$
		nbursement arrangements						1b(4)		X
	• •	ns or loan guarantees	mah ayahın ay fiyadyaya	una naliaitatia				1b(5)		X
	(6) Performance of services or membership or fundraising solicitationsc Sharing of facilities, equipment, mailing lists, other assets, or paid employees						1b(6)		X	
	-		· ·		• •			1c		
a							market value of the goods, o		ets,	
					o iess than fair market valu	ie in any transaction	n or sharing arrangement, sh	iow in		
/a \ ı		(b) Amount involved			exempt organization	(d) December		.		
14)	ine no	(b) Amount involved	(c) Name of	N/A	exempt or gamzation	(u) Descriptio	on of transfers, transactions, and s	naring arra	ngemen	
				N/A						
						<u> </u>				
_										
							 		-	
										
					· · · · · · · · · · · · · · · · · · ·			-		
						· 				
—										
•	la tha fai		l	alatad ta ana						
28		n 501(c) (other than section	•		or more tax-exempt organi	zations described		Yes	v	No
		complete the following sch	, , , , , ,	JUI 321 *			_	162	A] NU
	11 165, 0	a) Name of org			(b) Type of organization		(c) Description of relations	nn n		
		N/A	James		(b) Type or organization	·-	(v) Duddingtion of Foldations			
		41,12				-				
	_					† 				
						 				
)		† · · · · · ·				
	Unde	r penalties of Serjury, I declare t	hat I halve examined this	return, including	accompanying schedules and st taxpayer) is based on all informa	atements, and to the be	est of my knowledge	the IDE I		Ja .
Si	gn and b	pelief, it is true, correct, and com	plete Declaration of pre	oarer (other than	taxpayer) is based on all informa	tion of which preparer h		the IRS di	prepare	r
Here		MINICALLY	Z., [][][X]	11 all	. 1	PRESI		wn below? Yes	See ins	No
	Sig	mature of officer or trustee	Mys		Date	Title		103		, 110
		Print/Type preparer's na		Preparer's si		Date	Check If PTIN			
		The state of the state of the	•		• -·-		self- employed			
Paid		LYNNE M. H	IITSMANN	I.YNNR 1	M. HUISMANN	04/23/19	, ,	0538	211	
	eparer	Firm's name ▶ PLA			_ 	<u> 25 15 </u>	Firm's EIN ► 38-13			
	e Only		u 11010				THIN SERVE JO II.			
	•	Firm's address ▶ 27	400 NORTH	WESTER	V HIGHWAY					
			UTHFIELD,	-			Phone no (248)	352-	- 251	0.0
		1 50	<u> </u>	111 -10				rm 990		
							FL	556	•• ((2017)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2017

Name of the organization

Employer identification number

	DETROIT EMPLOYMENT SOLUTIONS CORPORATION	38-3353746
Organization type	e (check one)	
Filers of:	Section:	-
Form 990 or 990-l	EZ 501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	anization is covered by the General Rule or a Special Rule . ion 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special	Rule See instructions
General Rule		
	rganization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions total) from any one contributor Complete Parts I and II See instructions for determining a contribut	• •
Special Rules		
sections any one	rganization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supporting to 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16 contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the arm 990-EZ, line 1 Complete Parts I and II	Sa, or 16b, and that received from
year, tota	rganization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received fro all contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or exemple of cruelty to children or animals. Complete Parts I, II, and III	
year, cor is check purpose	rganization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received frontributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled ed, enter here the total contributions that were received during the year for an exclusively religion Don't complete any of the parts unless the General Rule applies to this organization because , charitable, etc., contributions totaling \$5,000 or more during the year	more than \$1,000 If this box ious, charitable, etc
but it must answe	nization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B er "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its sn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Employer identification number

DETROIT EMPLOYMENT SOLUTIONS CORPORATION

38-3353746

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BANK OF AMERICA THE GUARDIAN BLDG 500 GRISWOLD DETROIT, MI 48226	\$ <u>25,000</u> .	Person X Payroll
(a) N o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	CHASE 611 WOODWARD DETROIT, MI 48226	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	CITIZENS BANK P.O. BOX 42078 PROVIDENCE, RI	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	CITY OF DETROIT 2 WOODWARD AVENUE DETROIT, MI 48226	\$1,747,291.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	COMERICA CHARITABLE FOUNDATION P.O. BOX 75000 DETROIT, MI 48275	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	CVS 939 ROUTE 146 CLIFTON PARK, NY 12065	s18,000.	Person X Payroll

723452 11-01-17

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Employer identification number

DETROIT EMPLOYMENT SOLUTIONS CORPORATION

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	DETROIT ECONOMIC GROWTH 500 GRISWOLD #2200 DETROIT, MI 48226	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	DETROIT PISTONS 6 CHAMPIONSHIP DRIVE AUBURN HILLS, MI 48326	\$ <u>200,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	DRESNER FOUNDATION 6960 ORCHARD LAKE RD STE 149 WEST BLOOMFIELD, MI 48322	\$ 500,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	DTE ENERGY FOUNDATION 1 ENERGY PLAZA DETROIT, MI 48226	\$ <u>21,516.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11_	FORD FOUNDATION 320 EAST 43RD STREET NEW YORK, NY 10017	\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	FORD MOTOR COMPANY FUND ONE AMERICAN ROAD RM 215-E1 DEARBORN, MI 48126	\$50,000.	Person X Payroll

Employer identification number

DETROIT EMPLOYMENT SOLUTIONS CORPORATION

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	FORD STEAM ONE AMERICAN ROAD RM 215-E1 DEARBORN, MI 48126	\$ 150,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14	KELLOGG FOUNDATION 28 W. ADAMS DETROIT, MI 48226	\$ 300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15	KINEXUS 499 W. MAIN STREET BENTON HARBOR, MI 49022	\$\$. 46,510.	Person X Payroll
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16_	MICHIGAN STRATEGIC FUND 300 N. WASHINGTON SQUARE LANSING, MI 48933	\$ 40,846,368.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>17</u>	MICROSOFT CORPORATION ONE MICROSOFT WAY REDMOND, WA 98052	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18	MILWAUKEE AREA WORKFORCE INVESTMENT BOARD 2338 N. 27TH STREET MILWAUKEE, MI 53210	\$ <u>122,691.</u>	Person X Payroll

Employer identification number

DETROIT EMPLOYMENT SOLUTIONS CORPORATION

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
· 19	RALPH C WILSON JR FOUNDATION 3101 E. GRAND BLVD. STE 200 DETROIT, MI 48202	\$ 2,000,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20	SATTER FOUNDATION 500 N. MICHIGAN AVE SUITE 1700 CHICAGO, IL 60611	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
21	UAW FORD 151 W. JEFFERSON AVE DETROIT, MI 48226	\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
22	UNITED WAY FOR SOUTHEASTERN MICHIGAN 660 WOODWARD STE 300 DETROIT, MI 48226	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
23	USDOL ETA 230 W. DEARBORN CHICAGO, MI 60604	\$ <u>1,240,601.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
24	VITEC 2801 CLARK STREET DETROIT, MI 48210	\$	Person X Payroll

Employer identification number

DETROIT EMPLOYMENT SOLUTIONS CORPORATION

Part I	Contributors (see instructions) Use duplicate copies of Part I if add	itional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>- ·25</u>	WALBRIDGE 777 WOODWARD AVE #300 DETROIT, MI 48226	\$ 50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)

Employer identification number

DETROIT EMPLOYMENT SOLUTIONS CORPORATION

	Eli Bollibili Bobollollo Colli oldili loli		
Radill	Noncash Property (see instructions) Use duplicate copies of Part II if a	additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d)
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
		Cahadula D /Fares /	000 000 E7 a- 000 DE\ (0047\

ne oi oiyamzau	MPLOYMENT SOLUTIONS	CODDODAMION	38-3353746			
art III E		ibutions to organizations described columns (a) through (e) and the follo , charitable, etc., contributions of \$1,000 o	d in section 501(c)(7), (8), or (10) that total more than \$1,000 fo			
) No.	se duplicate copies of Part III II additiona	ar space is needed	-			
rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
		(e) Transfer of gi	ift			
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee			
) No. rom	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee					
) No.						
rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
	(e) Transfer of gift					
_	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			
) No. rom Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
_ =						
	(e) Transfer of gift					
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee			

FORM 990-PF INTEREST ON SAVI	NGS AND TE	MPORARY CASH	INVESTMENTS	STATEMENT 1
SOURCE	REV	A) ENUE NET BOOKS	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
COMERICA		_1,015.	1,015	
TOTAL TO PART I, LINE 3		1,015.	1,015.	
FORM 990-PF	OTHER	INCOME		STATEMENT 2
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
VENDING PROCEEDS FOIA REQUEST FEES		132. 1,925.		
TOTAL TO FORM 990-PF, PART I	LINE 11 =	2,057.	0.	•
FORM 990-PF	LEGA	L FEES		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
LEGAL	90,025	· ().	90,025.
		-		
TO FM 990-PF, PG 1, LN 16A =	90,025). 	90,025.
FORM 990-PF PG 1, LN 16A =		'ING FEES		STATEMENT 4
=		'ING FEES (B) NET INVEST-	(C) ADJUSTED	STATEMENT 4 (D) CHARITABLE
FORM 990-PF	ACCOUNT (A) EXPENSES	(B) NET INVEST- MENT INCOME	(C) ADJUSTED	STATEMENT 4 (D) CHARITABLE

FORM 990-PF	OTHER PROFES	SIONAL FEES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER PROFESSIONAL FEES	531,146.			531,146.
TO FORM 990-PF, PG 1, LN 160	531,146.	0.		531,146.
FORM 990-PF	TAX	ES	5	STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
PAYROLL TAXES	679,083.	0.		679,083.
TO FORM 990-PF, PG 1, LN 18	679,083.	0.		679,083.
FORM 990-PF	OTHER E	XPENSES	2	STATEMENT 7
DESCRIPTION INSURANCE INFORMATION TECHNOLOGY DUES & SUBSCRIPTIONS SUPPORTIVE SERVICES OFFICE EXPENSE ADVERTISING TRAINING	(A) EXPENSES PER BOOKS 161,799. 372,238. 62,422. 1,093,220. 241,575. 379,192. 10,117,306.		(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES 161,799. 372,238. 62,422. 1,093,220. 241,575. 379,192. 10,117,306.
OTHER SUBCONTRACTOR FEES REPAIRS AND MAINTENANCE	24,507. 10,357,198. 1,767,287.	0.		24,507. 10,357,198. 1,767,287.
TO FORM 990-PF, PG 1, LN 23	24,576,744.	0.		24,576,744.

	LIST OF OFFICERS, DIRECTORS STATES AND FOUNDATION MANAGERS	MENT 8
NAME AND ADDRESS	EMPLOYEE TITLE AND COMPEN- BEN PLAN I AVRG HRS/WK SATION CONTRIB A	EXPENSE ACCOUNT
NICOLE SHERARD-FREEMAN 440 EAST CONGRESS DETROIT, MI 48226-2917	PRESIDENT/CEO 50.00 181,231. 0.	0.
JEFFREY DONOFRIO 440 EAST CONGRESS DETROIT, MI 48226-2917	BOARD MEMBER/EXEC DIRECTOR MAYORS WO 50.00 120,000. 4,800.	ORK 0.
TERRI WEEMS 440 EAST CONGRESS DETROIT, MI 48226-2917	CHIEF FINANCIAL OFFICER 50.00 119,423. 12,706.	0.
ALESSIA BAKER-GILES 440 EAST CONGRESS DETROIT, MI 48226-2917	DIRECTOR FINANCE 50.00 104,300. 4,172.	0.
STEPHANIE NIXON 440 EAST CONGRESS DETROIT, MI 48226-2917	CHIEF PROGRAM OFFICER 50.00 102,000. 4,080.	0.
MICHELLE RAFFERTY 440 EAST CONGRESS DETROIT, MI 48226-2917	CHIEF OPERATING OFFICER 50.00 99,919. 0.	0.
ROBERT SHIMKOSKI 440 EAST CONGRESS DETROIT, MI 48226-2917	DIRECTOR PLANNING 50.00 85,000. 3,400.	0.
LAURA HUGHES 440 EAST CONGRESS DETROIT, MI 48226-2917	CORPORATION BOARD CHAIR 0.50 0. 0.	0.
CALVIN C SHARP 440 EAST CONGRESS DETROIT, MI 48226-2917	CORPORATION BOARD VICE CHAIR 0.50 0. 0.	0.
TONEY STEWART 440 EAST CONGRESS DETROIT, MI 48226-2917	BOARD MEMBER 0.50 0. 0.	0.

DETROIT EMPLOYMENT SOLUTIONS CO	RPORATION	-		38	3-3353746
CHRIS UHL 440 EAST CONGRESS DETROIT, MI 48226-2917	BOARD 0	TREASURER .50	0.	0.	0.
MICHAEL AARON 440 EAST CONGRESS DETROIT, MI 48226-2917		MEMBER .50	0.	0.	0.
LENA BARKLEY 440 EAST CONGRESS DETROIT, MI 48226-2917		MEMBER .50	0.	0.	0.
ALICE THOMAS 440 EAST CONGRESS DETROIT, MI 48226-2917		SECRETARY .50	0.	0.	0.
DON O'CONNELL 440 EAST CONGRESS DETROIT, MI 48226-2917		MEMBER .50	0.	0.	0.
RIC PREUSS 440 EAST CONGRESS DETROIT, MI 48226-2917		MEMBER .50	0.	0.	0.
MARIA WOODRUFF-WRIGHT 440 EAST CONGRESS DETROIT, MI 48226-2917		MEMBER .50	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	6, PART	VIII	811,873.	29,158.	0.