EXTENDED TO MAY 15, 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

On the security numbers of this form as it may be made public to instructions and the latest information

1906

	1, 2018) Open to Fublic Inspection
For calendar year 2018 or tax year beginning JUI Name of foundation	1, 2018	, and ending		
Name of foundation			A Employer identification	n number
DETROIT EMPLOYMENT SOLUTIO	NS CORPORATIO)N	38-3353746	5
Number and street (or P O box number if mail is not delivered to street	B Telephone number			
2440 EAST CONGRESS	313-664-55	560		
tly or town, state or province, country, and ZIP or foreign	nostal code		C if exemption application is a	
DETROIT, MI 48226-2917			o il exemption application is p	Seriality, check here
G. Check all that apply. Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organization	s check here
Final return	Amended return		J. Harangin angunization	
Address change	Name change		2 Foreign organizations m check here and attach c	eeting the 85% test,
Check type of organization X Section 501(c)(3)		124	E If private foundation st	
Section 4947(a)(1) nonexempt charitable trust	Other taxable private founda	U \	under section 507(b)(1	
	ing method: Cash	X Accrual	F If the foundation is in a	
from Part II, col (c), line 16)	Other (specify)		under section 507(b)(1	
\$\\$\\$\\$\10,475,790.\((Part I, colu	mn (d) must be on cash basi	s)		
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
necessarily equal the amounts in column (a)	expenses per books	income	income	(cash basis only)
1 Contributions, gifts, grants, etc , received	60,991,039.		N/A	
2 Check I if the foundation is not required to attach Sch. 8				` .
Interest on savings and temporary cash investments	2,457.	2,457.		STATEMENT 1
4 Dividends and interest from securities				
5a Gross rents				3 3
b Net rental income or (loss)				5.
6a Net gain or (loss) from sale of assets not on line 10		REC	FIVED	wayyou jwa s
Gross sales price for all b assets on line 6a	WAY NAVI THE VALUE OF WA JE AV	A COMPANIE AND AND AND A SECOND ASSESSMENT A	NO PERSONAL PROPERTY OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TRANSPORT NAMED I	7 7 7 4 7
7 Capital gain net income (from Part IV, fine 2)		IS MAY.	0 6 2020 S	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
8 Net short-term capital gain			0 2020 0	
9 Income modifications Gross sales less returns		L OGD	١٠٠١	
10a and allowances			IN, UT	+
b Less Cost of goods sold				
c Gross profit or (loss)	909.	0.		STATEMENT 2
11 Other income	60,994,405.	2,457.		STATEMENT 2
12 Total Add lines 1 through 11	707,600.	2,437.		707,600
13 Compensation of officers, directors, trustees, etc14 Other employee salaries and wages	8,864,651.	0.		8,864,651
14 Other employee salaries and wages15 Pension plans, employee benefits	1,344,830.	0.		1,344,830
amarm 3	121,463.	0.		121,463
b Accounting fees STMT 4 c Other professional fees STMT 5	85,275.	0.		85,275
c Other professional fees STMT 5	1,135,281.	0.		1,135,281
	, = , = , = , = ,			
ta 18 Taxes STMT 6	884,913.	0.		884,913
18 Taxes STMT 6	35,079.	0.		- "
17 Interest 18 Taxes STMT 6 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings	1,744,141.	0.		1,744,141
21 Travel, conferences, and meetings	372,757.	0.		372,757
22 Printing and publications	131,518.	0.		131,518
g 23 Other expenses STMT 7	26,550,929.	0.		26,550,929
23 Other expenses STMT / 24 Total operating and administrative expenses. Add lines 13 through 23				
expenses. Add lines 13 through 23	41,978,437.	0.		41,943,358
25 Contributions, gifts, grants paid	19,385,454.			19,385,454
26 Total expenses and disbursements				
Add lines 24 and 25	61,363,891.	0.		61,328,812
27 Subtract line 26 from line 12				
Excess of revenue over expenses and disbursements	-369,486.			
b Net investment income (if negative, enter -0-)	4 4 2	2,457.		
c Adjusted net income (if negative, enter -0-)			N/A	

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions

Form **990-PF**

Department of the Treasury

823511 12-11-18

4 Add lines 1, 2, and 3

4,846,639.

Form 990-PF (2018)

Decreases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

• (a) List and describe	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 ac	quired hase	(c) Date	acquired	(d) Date sold
	arehouse, or com	non stock, 200 shs	i. MLC Co.)		Ď	- Don	ation	` (mo , d	ay, yr)	(mo , day, yr)
1a `					_					
	ONE				┝					
<u>c</u>					\vdash					
<u>d</u>										
8	(f) Deprecis	ation allowed	(a) Co	st or other basis				(b) G:	ain or (loss	\ \
(e) Gross sales price		owable)		expense of sale					s (f) minus	
a	<u> </u>	·								
b										
C	Ĭ									
d										•
<u> </u>			<u> </u>							
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.							ol. (h) gain			
(i) FMV as of 12/31/69		sted basis		xcess of col. (1)			C		not less thar (from col. (
	as of 1	2/31/69	Over	col. (j), if any					,	·· <i>n</i>
8	 									
<u>b</u>	1				\dashv					
<u>C</u>	 		 -		\dashv				<u>.</u>	
	 				\dashv					
<u> </u>		<u> </u>	<u> </u>		-					
2 Capital gain net income or (net o	(appl letter	If gain, also enter If (loss), enter -0	r in Part I, line	7	\	2				
, ,		-		1 /	7			·		
3 Net short-term capital gain or (lo		ections 1222(5) an	ıd (6)		٦١					
If gain, also enter in Part I, line 8 If (loss), enter -0- in Part I, line 8					}	3				
Part V Qualification U	Jnder Section	n 4940(e) for	Reduced	Tax on Net	inve	stm	ent Inc	ome		
(For optional use by domestic prival	te foundations subi	ect to the section 4	1940(a) tax on	net investment in	come)				
	·					•				
If section 4940(d)(2) applies, leave	tnis part blank.									
Was the foundation liable for the sec	ction 4942 tax on t	he distributable am	ount of any ye	ar in the base per	od?					Yes X No
If "Yes," the foundation doesn't qual										
1 Enter the appropriate amount in	each column for e	ach year, see the in	istructions bei	fore making any er	itries.					/4\
= (a) Base period years	. Adu	(b) isted qualifying dis	tributions	Net value of no	(c)		uca accati			(d) outlon ratio
Calendar year (or tax year beginn	ing in) Auju	isted qualifying dis	li ibulions	Net value of flo	illiai	ilabie-	use asset	(col (b) divided by col (c))		
2017										
2016										
2015 2014			· · · · · · · · · · · · · · · · · · ·							
2014								+		
2013	1			L				- 	-	
2 Total of line 1, column (d)								2		
3 Average distribution ratio for the	5-year base perior	d - divide the total o	on line 2 hv 5 (0. or by the numbe	er of w	ears				
the foundation has been in existe			0, 0.	,,	,	•		3	_	
	2									
4 Enter the net value of noncharita	ble-use assets for	2018 from Part X, I	line 5					4		
		·								
5 Multiply line 4 by line 3								5		
6 Enter 1% of net investment incom	me (1% of Part I, II	ne 27b)						8		
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 that See the Part VI instructions	ın lıne 7, check the	box in Part VI, line	1b, and comp	olete that part usin	g a 19	% tax r	ate.			

_	m 990-PF (2018) DETROIT EMPLOYMENT SOLUTIONS CORPORATION art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or		38-335 48-see		Page 4
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				1.7. 许则
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			·	
b	b Dômestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%	L	1		49.
	of Part I, line 27b			**	.]
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col (b).],		<u> </u>	<u> </u>
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	Ļ	2		0.
3	Add lines 1 and 2	-	3		49.
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		49.
6	1 1				1
8	——————————————————————————————————————	<u>0.</u>			1
		0.			1
	()	0.			
		<u>0.</u>			
7	Total credits and payments. Add lines 6a through 6d	ŀ	7		0.
8	Enter any penalty for underpayment of estimated tax. Check here 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		<u>49.</u>
10		▶	10		
	Enter the amount of line 10 to be Credited to 2019 estimated tax art VII-A Statements Regarding Activities		11		
					es No
18	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interv	vene i	(1		X
	any political campaign?	dafınıt		1a	$\frac{1}{X}$
D	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the of the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	Jennini	1011	1b	- ^-
					1 1
_	distributed by the foundation in connection with the activities.			1c	X
	: Did the foundation file Form 1120-POL for this year? I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			- · ·	
u		0.		6.	
	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	••		_	
•	managers > \$ 0.				- 3.
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	X
-	If "Yes," attach a detailed description of the activities				1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	n. or			
-	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	•		3	X
4a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a	X
	o If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	X
	If "Yes," attach the statement required by General Instruction T				
6	the contract of the contract o				
	By language in the governing instrument, or				1
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state legislation.	state I	aw]
	remain in the governing instrument?			6 7	
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			7 7	ζ
8a	a Enter the states to which the foundation reports or with which it is registered. See instructions			_	
	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			8b X	ζ
9		calen	dar		ر ۸ لیــا ــ
	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV			9	$\frac{x}{x}$
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10	X
				Form 990-F	ィー (2018)

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Pa	rt 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?			
	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	Х	
	Website address ► WWW.DESCMIWORKS.COM			
14	The books are in care of ▶ ALESSIA BAKER-GILES Telephone no. ▶ 313-			
	Located at ► 440 E. SUITE 400 CONGRESS, DETROIT, MI	<u> 48226</u>	<u>-29</u>	<u>17</u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	ـــا
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
	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	ŀ		
Da	foreign country ► Int VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
Pa		\neg	Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	-	163	140
18	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? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No		ا . ا	٠ ـ ـ
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		A _t	
	(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)?			1 5
	(6) Agree to pay money or property to a government official? (Exception Check "No"	ľ		
	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.)			' {
Ь	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	16		X
	Organizations relying on a current notice regarding disaster assistance, check here)		.
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		<u> </u>	الييا
	before the first day of the tax year beginning in 2018?	1c	L	<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	00		p
	defined in section 4942(i)(3) or 4942(j)(5))			.]
a	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2018?			. !
	If "Yes," list the years , , , , , , , , , , , , , , , , , , ,			ı İ
D	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			i
	NT / 7	2b		
	statement - see instructions) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		\vdash	
·			.	. 1
3.	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			. !
υū	during the year?			,
ь	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after			. 1
	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			<u> </u>
	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 2018) N/A	3b		
4a	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	~		
	had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		X
		Form 990)-PF	(2018)

823541 12-11-18

(d) Contributions to employee benefit plans and deferred compensation devoted to position allowances JASON LEE 440 EAST CONGRESS EXECUTIVE DIRECTOR GDY1 40.00 150,000. 6,000. 0. 48226-2917 DETROIT. ΜI NICOLE BATES -DEPUTY DIRECTOR MWDB 440 EAST CONGRESS 5,600. 0. 140,000. DETROIT, MI 48226-2917 40.00 DEPUTY DIRECTOR MWDB CHIOKE BOREGELT MOSE 440 EAST 4,800. 0. 120,000. CONGRESS. DETROIT. MI 48226-2917 40.00 FINANCE DIRECTOR ALESSIA BAKER-GILES 440 EAST 112,000. 4,480. 0. CONGRESS, DETROIT, MΙ 48226-2917 40.00 SENIOR ASSOCIATE, EDUCATION & TALEN OMAR HASAN - 440 EAST CONGRESS 4,000. 0. MI 48226-2917 40.00 100,000 DETROIT, 80 Total number of other employees paid over \$50,000

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		33740 Tugo7
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
LAUNCHPAD		
4199 CAMPUS DRIVE, IRVINE, CA 92612	CONSULTANT SERVICE:	<u>S</u> 225,557.
ACCENTURE LLP		
PO BOX 70629, CHICAGO, IL 60601	CONSULTANT SERVICE	S 142,206.
JOHN ALLEN PC		
612 E 4TH ST, ROYAL OAK, MI 48067	LEGAL SERVICES	108,598.
STRATEGIC COMMUNITY PARTNERS - 1420		
WASHINGTON BLVD SUITE 301, DETROIT, MI 48226	CONSULTANT SERVICE:	s 89,257.
GLOBAL DESIGNS		
114 BURWYCK PARK DRIVE, SALINE, MI 48176	GRAPHIC DESIGNS	76,720.
Total number of others receiving over \$50,000 for professional services	<u> </u>	▶ 6
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produc		Expenses
1 N/A		
2		
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 lin	es 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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IP.	art∤X■ Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations	, 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	<u> </u>
b	Average of monthly cash balances	_1b	8,471,364.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	8,471,364.
е	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	8,471,364.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	127,070.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	8,344,294.
6	Minimum investment return Enter 5% of line 5	6	417,215.
IP.	art II Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certain	
_	foreign organizations, check here 🕨 🔃 and do not complete this part)	,,	
1	Minimum investment return from Part X, line 6	1	417,215.
2a	Tax on investment income for 2018 from Part VI, line 5		
b	Income tax for 2018. (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	49.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	417,166.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	417,166.
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	417,166.
Į P	artXIII 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	61,328,812.
Ь	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:		
а	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	61,328,812.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	1	
	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	61,328,812.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation of	malifies fo	or the section

Form **990-PF** (2018)

4940(e) reduction of tax in those years

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DETROIT EMPLOYMENT SOLUTIONS CORPORATION

Part XIII . Undistributed Income	see instructions)			
	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				417,166.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			0.	
b Total for prior years		0.		
Excess distributions carryover, if any, to 2018:		U.		
a From 2013 37,064,018.				
b From 2014 34,550,894.				
c From 2015 34,134,842.]]	
d From 2016 40,435,363.]			
e From 2017 52,893,464.				
f Total of lines 3a through e	199,078,581.			
4 Qualifying distributions for 2018 from]			
Part XII, line 4 \triangleright \$ 61,328,812.				
a Applied to 2017, 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.			
d Applied to 2018 distributable amount	-			417,166.
e Remaining amount distributed out of corpus	60,911,646.			
5 Excess distributions carryover applied to 2018 (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	050 000 005			
8 Corpus Add lines 3f, 4c, and 4e Subtract line 5	259,990,227.			
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 2017 Subtract line				
4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2018 Subtract		_ _		
lines 4d and 5 from line 1. This amount must				
be distributed in 2019				0.
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 2013				<u>-</u>
not applied on line 5 or line 7	37,064,018.	Ì		
9 Excess distributions carryover to 2019	37,001,010.			
Subtract lines 7 and 8 from line 6a	222,926,209.			
	222, 320, 203.			
10 Analysis of line 9 a Excess from 2014 34,550,894.				
	1			
b Excess from 2015 34,134,842.				
c Excess from 2016 40,435,363. d Excess from 2017 52,893,464.				
e Excess from 2018 60,911,646.	1			
0 EXC0000 HORITZOID O O , J I I , O 4 O .				- 000 DE (0010)

Form **990-PF** (2018)

	T EMPLOYMENT				53746 Page 10
Part∤XIV Private Operating		 	II-A, question 9)	N/A	
1 a If the foundation has received a ruling					
foundation, and the ruling is effective			▶ ∟		
b Check box to indicate whether the fou		g foundation described		4942(j)(3) or 49	942(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	(1) 2015	
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
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			/		<u> </u>
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)					<u> </u>
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					<u> </u>
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	! =-				
Part∤XV■ Supplementary Inf	formation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during	the year-see instr	uctions.)			
Information Regarding Foundat	ion Managers:				
a List any managers of the foundation v	-	than 2% of the total con	tributions received by the	foundation before the clos	se of any tax
year (but only if they have contributed			indutional received by the		, , , , , , , , , , , , , , , , , , , ,
NONE					
b List any managers of the foundation v	who own 10% or more of th	e stock of a cornoration	(or an equally large norty	ion of the ownership of a pa	artnershin or
other entity) of which the foundation			(or an equally large port	ion of the ownership of a pe	a thoromp of
NONE		-			
		0 1 1 1 1 5	 		·
2 Information Regarding Contribu		·			anta for friedo. If
Check here \blacktriangleright X if the foundation the foundation makes gifts, grants, et	•	•	-		esis ioi iulius. Ii
					
a The name, address, and telephone nu	mber or email address of th	e person to whom appli	cations should be addres	SS00 <u>:</u>	
b The form in which applications should	d be submitted and informat	tion and materials they s	should include		
			·		
c Any submission deadlines:					
d Any root votage of the state of		al avana sharitable 6-13-	Lundo of institutions	other feators:	
d Any restrictions or limitations on awa	rus, such as by geographica	ai areas, charitable fields	s, kings of institutions, of	other factors;	

Form 990-PF (2018) DETROIT EMP Part XV Supplementary Informati	LOYMENT SOLUTION (continued)		FION 38-335	
3 Grants and Contributions Paid During th	e Year or Approved for Future	Payment		
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
Paid during the year				
Ç				
ACCESS	SUBRECIPIENT	PC	PAYMENTS FOR	
2651 SAULINO			EMPLOYMENT AND	
DEARBORN, MI 48120		-	TRAINING PROGRAMS	4,375,636.
AVALON INTERNATIONAL	SUBRECIPIENT	₽C	PAYMENTS FOR	
4731 BELLELVUE			EMPLOYMENT AND	10 500
DETROIT, MI 48201		<u> </u>	TRAINING PROGRAMS	10,580.
CONNECT DETROIT	SUBRECIPIENT	PC	PAYMENTS FOR	
613 ABBOTT, 3RD FLOOR DETROIT, MI 48226			EMPLOYMENT AND TRAINING PROGRAMS	1,746,944.
DETROIT, MI 48226			IMINING PROGRAMS	1,730,544.
DETROIT PUBLIC SCHOOLS COMMUNITY	SUBRECIPIENT	gov	PAYMENTS FOR	
DISTRICT			EMPLOYMENT AND	
3011 W. GRAND BLVD			TRAINING PROGRAMS	
DETROIT, MI 48202		_		6,317.
DETROIT TRAINING INSTITUTE	SUBRECIPIENT	PC	PAYMENTS FOR	
5151 LORAINE			EMPLOYMENT AND	
DETROIT, MI 48218 = == ==			TRAINING PROGRAMS	307,225.
Total SEE C	CONTINUATION SHEE	ET(S)	▶ 3a	19,385,454.
b Approved for future payment				
NONE				
110112				
Total			► 3b	0.
			F	orm 990-PF (2018)

Form 990-PF (2018) DETROIT EMPLOY	MENT SOLU	TIONS CORE	PORATIO	<u> </u>	3353746 Page 12
Part XVI-A Analysis of Income-Produ	cing Activities	s			
Enter gross amounts unless otherwise indicated	Unrelated b	usiness income	Excluded b	y section 512, 513, or 514	(e)
1 Program service revenue	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a		_			<u> </u>
b	-		_		
	·				
d	- 		 	-	
e			-		<u> </u>
- Constraint from accomment accommen	-		+		
g Fees and contracts from government agencies	<u> </u>		+ +-		
2 Membership dues and assessments					-
3 Interest on savings and temporary cash			1 1 1	2 457	
investments		Д.	14	2,457.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property			 		
8 Net rental income or (loss) from personal					
property					3.1.
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					50.
b FOIA REQUEST FEES					859.
c					
d	_				
е					
12 Subtotal Add columns (b), (d), and (e)		0		2,457.	909.
13 Total Add line 12, columns (b), (d), and (e)				13	3,366.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accom	plishment of E	xempt Pu	rposes	
Line No Explain below how each activity for which inc	•	` '	-A contributed	I importantly to the accomp	olishment of
11A THE ORGANIZATION PROVI			S FOR	THE CONVENIE	ENCE OF ITS
CLIENTS.					
11B THE ORGANIZATION RESPO	NDED TO F	OIA REQUES	STS AND	CHARGED A S	SMALL FEE
TO COVER THE EXPENSES					

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 the foundation's exempt purposes (other than by providing funds for such purposes)
11A	THE ORGANIZATION PROVIDES VENDING MACHINES FOR THE CONVENIENCE OF ITS
	CLIENTS.
11B	THE ORGANIZATION RESPONDED TO FOIA REQUESTS AND CHARGED A SMALL FEE
	TO COVER THE EXPENSES OF COMPILE THE DOCUMENTS.

Form **990-PF** (2018)

Form **990-PF** (2018)

P00053811

(248) 352-2500

Firm's EIN ► 38-1357951

Paid

Preparer

Use Only

HUISMANN

LYNNE M.

self- employed

04/21/20

LYNNE M. HUISMANN

Firm's name ► PLANTE & MORAN, PLLC

Firm's address ► 27400 NORTHWESTERN HIGHWAY

SOUTHFIELD, MI 48034

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

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

2018

DETROIT EMPLOYMENT SOLUTIONS CORPORATION

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF

Employer identification number

38-3353746

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Organiza	ation type (check on	ө)
Filers of:		Section:
Form 990	or 990-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
Note: Or	nly a section 501(c)(7	covered by the General Rule or a Special Rule . (), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions
General	Rule	
	· ·	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor Complete Parts I and II See instructions for determining a contributor's total contributions
Special l	Rules	
	sections 509(a)(1) a any one contributoi	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, line 1 Complete Parts I and II
	year, total contribut	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the ions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the y to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address),
	year, contributions is checked, enter he purpose Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box are the total contributions that were received during the year for an exclusively religious, charitable, etc., plete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year.
but it mu	ıst answer "No" on l	It isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990·EZ, or 990·PF), Part IV, line 2, of its Form 990, or check the box on line H of its Form 990·EZ or on its Form 990 PF, Part I, line 2, to e filing requirements of Schedule B (Form 990, 990·EZ, or 990·PF)

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
1	AT&T 444 MICHIGAN AVENUE DETROIT, MI 48226	\$17,200.	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
2	BALLMER FOUNDATION PO BOX 1559 BELLEVUE, WA 98009	\$ <u>1,500,000</u> .	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	BARTON MALOW 26500 AMERICAN DRIVD SOUTHFIELD, MI 48034	\$18,000.	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
- <u>4</u>	BETTER MADE SNACKS 10418 GRATIOT DETROIT, MI 48213	\$ 7,200.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	BLOOMBERG FOUNDATION 25 E, 78TH STREET NEW YORK, NY 10075	\$ <u>100,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	CENTER FOR FINANCIAL EDUCATIONS 313 MAIN STREET SIOUX CENTER , IA 51250	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)

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	CHASE 611 WOODWARD DETROIT, MI 48226	\$500,000.	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
8	CITIZENS BANK P.O. BOX 42078 PROVIDENCE, RI	\$10,000.	Person X Payroll
(a) N o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	CITY OF DETROIT 2 WOODWARD AVENUE DETROIT, MI 48226	\$ <u>4,566,690</u> .	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
10	COMERICA CHARITABLE FOUNDATION P.O. BOX 75000 DETROIT, MI 48275	\$	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
11_	COMMUNITY FOUNDATION SOUTHEAST MICHIGAN 333 W FORT STREET SUITE 2010 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
12	CVS 939 ROUTE 146 CLIFTON PARK, NY 12065	\$7,200.	Person X Payroll Noncash (Complete Part II for noncash contributions)

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
13	DETROIT ECONOMIC GROWTH 500 GRISWOLD #2200 DETROIT, MI 48226	\$31,500.	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	DETROIT PISTONS 6 CHAMPIONSHIP DRIVE AUBURN HILLS, MI 48326	\$100,000.	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	DRESNER FOUNDATION 6960 ORCHARD LAKE RD STE 149 WEST BLOOMFIELD, MI 48322	\$ <u>498,865.</u>	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
16	DTE ENERGY FOUNDATION 1 ENERGY PLAZA DETROIT, MI 48226	\$ 1,377,500.	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
17	EDIBLES REX 5555 CONNOR SUITE 1058 DETROIT, MI 48213	\$ 5,400.	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
18	FORD FOUNDATION		Person X Payroll
	NEW YORK, NY 10017	\$200,000.	Noncash (Complete Part II for noncash contributions)

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	HENRY FORD HEALTH SYSTEM 2799 W. GRAND BLVD DETROIT, MI 48202	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) N o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20	INTRASTATE DISTRIBUTORS INC. (TOWNE CLUB) 6400 E. EIGHT MILE ROAD DETROIT, MI 48234	\$9,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
21	KELLOGG FOUNDATION 28 W. ADAMS DETROIT, MI 48226	\$	Person X Payroll
(a) N o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
22	KINEXUS 499 W. MAIN STREET BENTON HARBOR, MI 49022	\$\$\$\$	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
23	LEAR CORPORATION 21557 TELEGRAPH SOUTHFIELD, MI 48197	\$25,200.	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
24	MAGNA INTERNATIONAL 750 TOWER DRIVE TROY, MI 48098	\$86,400.	Person X Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

DETROIT EMPLOYMENT SOLUTIONS CORPORATION

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	MCGREGOR FOUNDATION 333 W. FORT STREET 2090 DETROIT, MI 48226	\$ 295,000.	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
26	MICHIGAN FIRST ENERGY 2154 COMMONS PARK OKEMOS, MI 48864	\$170,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) N o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
27	MICHIGAN STRATEGIC FUND 300 N. WASHINGTON SQUARE LANSING, MI 48933	\$ 42,673,958.	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
= = 28	MICROSOFT CORPORATION ONE MICROSOFT WAY REDMOND, WA 98052	\$ 120,000.	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
29	MILWAUKEE AREA WORKFORCE INVESTMENT BOARD 2338 N. 27TH STREET MILWAUKEE, MI 53210	\$ 55,728.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
30	PLANTE MORAN 27400 NORTHWESTERN HWY SOUTHFIELD, MI 48034	\$18,000.	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
31	RALPH C WILSON JR FOUNDATION 63 KERCHEVAL AVE SUITE 200 GROSSE POINTE FARMS, MI 48236	\$2,377,000.	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
32	SATTER FOUNDATION 500 N. MICHIGAN AVE SUITE 1700 CHICAGO, IL 60611	\$10,000.	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
33	SKILLMAN FOUNDATION 100 TALON CENTRE SUITE 100 DETROIT, MI 48207	\$ 588,954.	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
34	SOUTHEAST MICHIGAN COMMUNITY ALLIANCE 25363 EUREAK ROAD TAYLOR, MI 48181	\$ 76,500.	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
35	STRATEGIC STAFFING SOLUTIONS 645 GRISWOLD STREET 2900 DETROIT, MI 48226	\$12,000.	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
36	TRINITY HEALTH 20555 VICTOR PARKWAY LIVONIA, MI 48152	\$ 50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	I space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37	UNITED WAY FOR SOUTHEASTERN MICHIGAN 660 WOODWARD STE 300 DETROIT, MI 48226	\$ 420,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
38	USDOL ETA 230 W. DEARBORN CHICAGO, MI 60604	\$826,594.	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
39	VITEC 28001 CLARK STREET DETROIT, MI 48210	\$7,200.	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
40	WALDBRIDGE 777 WOODWARD AVE #300 DETROIT, MI 48226	\$54,300.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
41	WAYNE COUNTY MICHIGAN 500 GRISWOLD #1050 DETROIT, MI 48226	\$2,300,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) N o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
42	WAYNE STATE UNIVERSITY 656 W. KIRBY DETROIT, MI 48202	\$9,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

DETROIT EMPLOYMENT SOLUTIONS CORPORATION

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if a	dditional space is needed	
(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 ⋿ Parτ 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
		\$	

Name of or	rganization			E	Employer identification number
DETRO	IT EMPLOYMENT SOLUTIONS	CORPORATION			38-3353746
Part III	Exclusively religious, charitable, etc., contributing from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, of Use duplicate copies of Part III if additionals.	ons to organizations described in through (e) and the following line charitable, etc., contributions of \$1,000	entry For ora:	anizations	t total more than \$1,000 for the year
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Descri	ption of how gift is held
					
		(e) Transfer of	gıft		
-	Transferee's name, address, ar	nd ZIP + 4	Rela	ationship of trans	feror to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Descri	ption of how gift is held
		(e) Transfer of	gıft		
	Transferee's name, address, ar	nd ZIP + 4	Rela	ationship of trans	feror to transferee
				<u></u>	
(a) No from Part I	(b) Purpose of gift	(c) Use of gift		(d) Descrip	otion of how gift is held
<u></u>	· 			- · · · · · · · · · · · · · · · · · · ·	
-		(e) Transfer of	gift		
-	Transferee's name, address, ar	nd ZIP + 4	Rela	ationship of trans	feror to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Descrip	otion of how gift is held
		(e) Transfer of	gıft		
	Transferee's name, address, ar	nd ZIP + 4	Rela	ationship of trans	feror to transferee

Part XV Supplementary Informati 3 Grants and Contributions Paid During th				1
3 Grants and Contributions Paid During th	If recipient is an individual,	1	<u> </u>	
<u> </u>	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	CONTINUENT	
DEVELOPMENT CENTER	SUBRECIPIENT	PC	PAYMENTS FOR	
24424 W. MCNICHOLS			EMPLOYMENT AND	-
DETROIT, MI 48219			TRAINING PROGRAMS	2,007,185
•				
OOMINICAN LITERACY	SUBRECIPIENT	PC	PAYMENTS FOR	
5555 CONNOR 1414			EMPLOYMENT AND	
DETROIT, MI 48216			TRAINING PROGRAMS	1,895
DOWNRIVER COMMUNITY CONFERENCE	SUBRECIPIENT	PC	PAYMENTS FOR	
15100 NORTHLINE ROAD STUE 179			EMPLOYMENT AND	4 222 412
SOUTHGATE, MI 48195			TRAINING PROGRAMS	1,839,448.
DSDT	SUBRECIPIENT	PC	PAYMENTS FOR	
1759 W. 21ST STREET	BUBRECIFIENT		EMPLOYMENT AND	
DETROIT MI 48216			TRAINING PROGRAMS	3,000
551R011, N1 40210				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
FOCUS HOPE	SUBRECIPIENT	PC	PAYMENTS FOR	
1200 OAKMAN BLVD.			EMPLOYMENT AND	
DETROIT, MI 48238			TRAINING PROGRAMS	122,916.
GOODWILL	SUBRECIPIENT	PC	PAYMENTS FOR	
3111 GRAND RIVER			EMPLOYMENT AND TRAINING PROGRAMS	206,448,
DETROIT, MI 48205			TRAINING PROGRAMS	200,440.
GREENING OF DETROIT	SUBRECIPIENT	PC	PAYMENTS FOR	
13000 W MCNICHOLS			EMPLOYMENT AND	
DETROIT , MI 48235			TRAINING PROGRAMS	237,229
HRDI	SUBRECIPIENT	₽C	PAYMENTS FOR	
419 S WASHINGTON BLVD			EMPLOYMENT AND	
LANSING, MI 49833			TRAINING PROGRAMS	395,341
INTERNATIONAL INSTITUTE OF METRO	SUBRECIPIENT	PC	PAYMENTS FOR	
DETROIT			EMPLOYMENT AND	
111 EAST KIRBY			TRAINING PROGRAMS	
DETROIT, MI 48202				79,262
JACKETS FOR JOBS	SUBRECIPIENT	₽C	PAYMENTS FOR	
5555 CONNER AVENUE STE 2097			EMPLOYMENT AND	
DETROIT, MI 48213			TRAINING PROGRAMS	460,352.
Total from continuation sheets				12,938,752.

3 Grants and Contributions Paid During the Y				<u> </u>
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
	S. Sassianna Contributor			
JEWISH VOCATIONAL SERVICE	SUBRECIPIENT	PC	PAYMENTS FOR	
29699 SOUTHFIELD ROAD			EMPLOYMENT AND	
SOUTHFIELD, MI 48076			TRAINING PROGRAMS	130,061
LISC	SUBRECIPIENT	₽C	PAYMENTS FOR	
3031 W. GRAND BLVD SUITE 560		1	employment and	ĺ
DETROIT, MI 48202		<u> </u>	TRAINING PROGRAMS	111,999
MAXIMUS	SUBRECIPIENT	₽C	PAYMENTS FOR	
1891 METRO CENTER DRIVE	1	1	EMPLOYMENT AND	
RESTON, VA 20190	-		TRAINING PROGRAMS	421,415
NEIGHBORHOOD SERVICES ORGANIZATION	SUBRECIPIENT	₽C	PAYMENTS FOR	
882 OAKMAN BLVD. SUITE C]	EMPLOYMENT AND]
DETROIT, MI 48238			TRAINING PROGRAMS	379,160
PAYNE PULLIAM	SUBRECIPIENT	PC	PAYMENTS FOR	
2345 CASS AVENUE DETROIT, MI 48201			EMPLOYMENT AND TRAINING PROGRAMS	2,127,119
,		· · · · · · · · · · · · · · · · · · ·		, , , , ,
READING WORKS	SUBRECIPIENT	PC	PAYMENTS FOR	
645 GRISWALD, SUITE 2600			EMPLOYMENT AND	
DETROIT, MI 48226	-		TRAINING PROGRAMS	65,120
				
SER METRO	SUBRECIPIENT	₽C	PAYMENTS FOR	
9301 MICHIGAN AVE			EMPLOYMENT AND	
DETROIT, MI 48210		<u> </u>	TRAINING PROGRAMS	1,800,301
SOUTHEAST MICHIGAN COMMUNITY ALLIANCE	SUBRECIPIENT	PC	PAYMENTS FOR	
25363 TELEGRAPH			EMPLOYMENT AND	6 271
TAYLOR, MI 48180	 		TRAINING PROGRAMS	6,371
SOUTHWEST FONCOMIC SOLUTIONS	SIRDECIDIENT	PC	PAYMENTS FOR	
SOUTHWEST EONCOMIC SOLUTIONS 2835 BAGLEY, SUITE 800	SUBRECIPIENT		EMPLOYMENT AND	
DETROIT, MI 48216			TRAINING PROGRAMS	1,594,902
				-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
ST. VINCENT & SARAH FISHER CENTER	SUBRECIPIENT	PC	PAYMENTS FOR	
18600 TRINITY	O O D VIOLE I EM I		EMPLOYMENT AND	
DETROIT, MI 48219			TRAINING PROGRAMS	155,239
Total from continuation sheets				

3 Grants and Contributions Paid During the	Year (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	
SEATTLE JOBS INITIATIVE	SUBRECIPIENT	₽C	PAYMENTS FOR		
200 12TH STREET SUIUTE 160			EMPLOYMENT AND		
SEATTLE, WA 98144			TRAINING PROGRAMS	40,797	
NITED WAY OF SOUTHEAST MICHIGAN	SUBRECIPIENT	₽C	PAYMENTS FOR		
660 WOODWARD AVE SUTIE 300			EMPLOYMENT AND		
DETROIT, MI 48226			TRAINING PROGRAMS	281,402	
VAMASKI	SUBRECIPIENT	PC	PAYMENTS FOR		
8011 WEST GRAND BLVD			EMPLOYMENT AND		
DETROIT, MI 48202			TRAINING PROGRAMS	2,790	
MCA OF METROPOLITAN DETROIT	SUBRECIPIENT	PC	PAYMENTS FOR		
401 BROADWAY, SUITE A			EMPLOYMENT AND		
DETROIT, MI 48206			TRAINING PROGRAMS	469,000	
<u> </u>		_			

FORM 990-PF INTEREST ON SAV	INGS AND TE	1PORARY	CASH	INVESTMENTS	STATEMENT 1
SOURCE	REV!	A) ENUE BOOKS		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
COMERICA		2,457.		2,457.	-
TOTAL TO PART I, LINE 3		2,457.		2,457.	
FORM 990-PF	OTHER	INCOME		<u></u>	STATEMENT 2
DESCRIPTION		(A) REVENU PER BOO		(B) NET INVEST- MENT INCOME	
VENDING PROCEEDS FOIA REQUEST FEES	_		50. 859.	0.0	
TOTAL TO FORM 990-PF, PART I	, LINE 11 =		909.	0.	-
FORM 990-PF	LEGA	L FEES			STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	e) NET IN MENT I	WEST-		
LEGAL	121,463	<u> </u>	0		121,463.
TO FM 990-PF, PG 1, LN 16A	121,463	•		•	121,463.
FORM 990-PF	ACCOUNTING FEES				STATEMENT 4
,	(A) EXPENSES	(I NET IN	WEST-		(D) CHARITABLE PURPOSES
DESCRIPTION	PER BOOKS	MENT]	LNCOME	NEI INCOM	2 20112 0 2 - 2
DESCRIPTION ACCOUNTING FEES		- 	LNCOME 0	_	85,275.

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	1,135,281.	0.		1,135,281.	
TO FORM 990-PF, PG 1, LN 160	1,135,281.	0.		1,135,281.	
FORM 990-PF	TAX	ES	STATEMENT 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
PAYROLL TAXES	884,913.	0.		884,913.	
TO FORM 990-PF, PG 1, LN 18	884,913.	0.		884,913.	
FORM 990-PF	OTHER E	XPENSES	STATEMENT 7		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INSURANCE INFORMATION TECHNOLOGY	89,967. 452,149.			89,967. 452,149.	
DUES & SUBSCRIPTIONS SUPPORTIVE SERVICES OFFICE EXPENSE ADVERTISING TRAINING OTHER SUBCONTRACTOR FEES REPAIRS AND MAINTENANCE	87,772. 2,509,227. 757,974. 277,630. 8,074,418. 38,455. 11,270,125. 2,993,212.	0. 0. 0. 0. 0.		87,772. 2,509,227. 757,974. 277,630. 8,074,418. 38,455. 11,270,125. 2,993,212.	
TO FORM 990-PF, PG 1, LN 23	26,550,929.	0.		26,550,929	

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS				STATEMENT 8		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB			
NICOLE SHERARD-FREEMAN 440 EAST CONGRESS DETROIT, MI 48226-2917	PRESIDENT/CEO 40.00	172,000.	0.	0.		
JEFFREY DONOFRIO 440 EAST CONGRESS DETROIT, MI 48226-2917	BOARD MEMBER/EX			WORK 0.		
TERRI WEEMS 440 EAST CONGRESS DETROIT, MI 48226-2917	INTERIM PRESIDE	ENT/ CEO 153,000.	6,120.	0.		
STEPHANIE NIXON 440 EAST CONGRESS DETROIT, MI 48226-2917	CHIEF PROGRAM C		4,080.	0.		
MICHELLE RAFFERTY 440 EAST CONGRESS DETROIT, MI 48226-2917	CHIEF OPERATING		5,600.	0.		
CALVIN C SHARP 440 EAST CONGRESS DETROIT, MI 48226-2917	INTERIM CORPORA 0.50	TION BOARD 0.	CHAIR 0.	0.		
TONEY STEWART 440 EAST CONGRESS DETROIT, MI 48226-2917	BOARD MEMBER 0.50	0.	0.	0.		
CHRIS UHL 440 EAST CONGRESS DETROIT, MI 48226-2917	BOARD TREASURER 0.50	0.	0.	0.		
MICHAEL AARON 440 EAST CONGRESS DETROIT, MI 48226-2917	BOARD MEMBER 0.50	0.	0.	0.		
LENA BARKLEY 440 EAST CONGRESS DETROIT, MI 48226-2917	BOARD MEMBER 0.50	0.	0.	0.		

DETROIT EMPLOYMENT SOLUTIONS	CORPORATION			31	8-3353746
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.
DANNIS MITCHELL 440 EAST CONGRESS DETROIT, MI 48226-2917		MEMBER .50	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAG	GE 6, PART V	/III <u> </u>	687,000.	20,600.	0.