

Form 990-T

AMENDED RETURN - SECTION 512(A)(7) REPEAL
Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No 1545-0047

2018

For calendar year 2018 or other tax year beginning 1/1/12, and ending 12/31/12

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury Internal Revenue Service

- A Check box if address changed
B Exempt under section
[X] 501(c)(3)
408(e) 220(e)
408A 530(a)
529(a)

Name of organization ([X] Check box if name changed and see instructions.)
DETROIT FUTURE CITY
Number, street, and room or suite no. If a P.O. box, see instructions.
2990 WEST GRAND BOULEVARD, NO. 2
City or town, state or province, country, and ZIP or foreign postal code
DETROIT, MI 48202-3041

D Employer identification number (Employees' trust, see instructions)
47-5050055
E Unrelated business activity code (See instructions.)

C Book value of all assets at end of year
F Group exemption number (See instructions.)
G Check organization type [X] 501(c) corporation [] 501(c) trust [] 401(a) trust [] Other trust

H Enter the number of the organization's unrelated trades or businesses. Describe the only (or first) unrelated trade or business here. If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

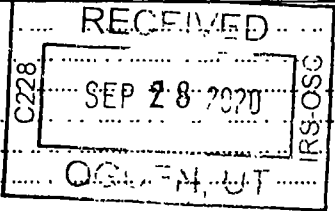
I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? [] Yes [] No
If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of ANIKA GOSS-FOSTER Telephone number (313) 259-4407

Table with 4 columns: Part I Unrelated Trade or Business Income, (A) Income, (B) Expenses, (C) Net. Rows include Gross receipts or sales, Less returns and allowances, Cost of goods sold, etc.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions)
(Except for contributions, deductions must be directly connected with the unrelated business income.)

Table with 4 columns: Line number, Description, (A) Income, (B) Expenses, (C) Net. Rows include Compensation of officers, directors, and trustees, Salaries and wages, Repairs and maintenance, etc.



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12

Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, and Amount. Includes lines 33-38 for unrelated business taxable income.

Part IV Tax Computation

Table with 3 columns: Line number, Description, and Amount. Includes lines 39-44 for tax computation.

Part V Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Includes lines 45a-55 for tax and payments.

Part VI Statements Regarding Certain Activities and Other Information (see instructions)

Table with 3 columns: Question number, Question text, and Yes/No response. Includes questions 56-58 regarding foreign interests and tax-exempt interest.

Sign Here

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

Signature of officer: [Signature], Date: 9/18/2020, Title: EXECUTIVE DIRECTOR

May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes [] No

Paid Preparer Use Only

Print/Type preparer's name: MICHAEL R. NICHOLAS, Preparer's signature: [Signature], Date: 7-23-20, Firm's name: GEORGE JOHNSON & COMPANY, Firm's EIN: 38-2029668, Firm's address: 1200 BUHL BUILDING, 535 GRISWOLD, DETROIT, MI 48226-3689, Phone no.: (313) 965-2655

FOOTNOTES

STATEMENT 1

AMENDED RETURN

FORM 990-T IS BEING AMEDED AS A RESULT OF THE REPEAL OF SECTION 512(A)(7). THE ITEMS THAT ARE BEING REVISED ARE AS FOLLOWS:

- PART III, LINES 34, 36, AND 38
- PART IV, LINES 39 AND 44
- PART V, LINES 46, 48, 50G, 51, 54, AND 55

DETROIT FUTURE CITY

47-5050055

FORM 990-T

OTHER CREDITS AND PAYMENTS

STATEMENT 2

DESCRIPTION

AMOUNT

PAYMENT DUE TO IRS NOTICE

124.

TOTAL INCLUDED ON FORM 990-T, PAGE 2, PART V, LINE 50G

124.