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Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2009

Open to Public Inspection

A Fo	r the	2009 са	lendar yea	r, or tax year beginning 01-	01-2009 and ending 12-31-200	19		_
B Ch	eck ıf a	pplicable	Please	C Name of organization DETROIT AREA PRE-COLLEGE			D Employer id	dentification number
☐ Add	dress ch	nange	use IRS label or	ENGINEERING PROGRAM INC			38-24518	
∏ Naı	me cha	nge	print or type. See	Doing Business As			E Telephone i	number
┌ Inıt	al retu	rn	Specific	Number and street (or P O bo	x if mail is not delivered to street addre	ess) Room/suite	(313) 831	
Г Тег	mınate	d	Instruc- tions.	100 FARNSWORTH ` ROOM/SUITE 249			G Gross receipt	s \$ 3,120,868
┌ Am	ended	return		City or town, state or country,	and ZIP + 4		-	
Г _{Арі}	olication	n pending		DETROIT, MI 48202				
		, , ,	F Nan	L ne and address of principal	officer	W(=) T - 4	 	6
			ı wan	ne and address of principals	omee.		his a group retu iates?	rn for
						1 ' '	all affiliates inclu	·
 т Та	x-exen	npt status	▼ 501(c)) (3) ◀ (insert no)	n)(1) or	1 _	No," attach a lis oup exemption n	t (see instructions)
			/W DAPCE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	H(c) Gro	oup exemption in	diliber F
						<u> </u>		
				ion Trust Association Ot	her 🕨	L Year of t	formation	M State of legal domicile
Pa	rt I	Sumi		. ,				
	1			e organization's mission or IE NUMBER OF HISTORIC.	most significant activities ALLY UNDERREPRESENTED S	TUDENTS WI	HO ARE MOTIV	ATED AND
e e					AREERS IN ENGINEERING, MA			
Governance								
Ĕ								
₹	١,	Chackt	hic hay b	- if the organization discont	unuad ita anaratiana ar dianasai	l of more that	a 2 E 0/2 of its not	· nacata
্	2		,		inued its operations or disposed			
Activities &	3		_		ody (Part VI, line 1a)			318
ĕ	4				governing body (Part VI, line 1	b)		418
2	5	Total nu	umber of en	nployees (Part V , line 2a)				5
3	6	Total nu	umber of vo	lunteers (estimate if neces	sary)			6
					Part VIII, column (C), line 12			7a
	b	Net unr	elated busi	ness taxable income from F	orm 990-T, line 34		7	7b
						Pri	ior Year	Current Year
а.	8			d grants (Part VIII, line 1h)			4,846,519	3,053,694
Ä	ou l		ım service	revenue (Part VIII, line 2g)				0
9.63	를 9 Prog	Invest	ment incor	ne (Part VIII, column (A), l	nes 3, 4, and 7d)		43,481	15,227
<u> </u>	11	Other	revenue (P	art VIII, column (A), lines	5, 6d, 8c, 9c, 10c, and 11e)		26,069	51,947
	12				equal Part VIII, column (A), lir	ie	4,916,069	3,120,868
	13						4,510,005	3,120,000
	14				umn (A), line 4)			
	15				efits (Part IX, column (A), lines	5_		
\$	15	10)	es, other co	ompensation, employee ben	ents (Fart IX, Column (A), mies	3-	431,783	476,105
Expenses	16a	Profes	sional fund	raising fees (Part IX, colum	n (A), line 11e)			0
훘	ь	Total fu	ndraising exp	enses (Part IX, column (D), line 2	5) 1 4,894			
ш	17			, , , , , , , , , , , , , , , , , , , ,	1a-11d, 11f-24f)		3,521,324	3,005,071
	18				al Part IX, column (A), line 25)		3,953,107	3,481,176
	19				m line 12		962,962	-360,308
<u>~~</u>						Beginni	ng of Current	· · · · · ·
Net Assets or Fund Balances							Year	End of Year
35.4g.	20	Total	assets (Par	t X, line 16)			2,671,064	2,228,877
3.5	21	Totall	ıabılıtıes (F	Part X, line 26)			260,196	176,068
z:	22	Netas	sets or fun	d balances Subtract line 2	L from line 20		2,410,868	2,052,809
Pai	rt II	Sign	ature Blo	ock				
					ned this return, including accompanying of preparer (other than officer) is base			
			er, it is true, t	correct, and complete Deciaration	or preparer (other than officer) is base	su on an inionna	ation of which pieps	alei ilas aliy kilowledge
Sign	1	****	<**			2010	0-11-11	
Here		Signa	ature of office	er		Date		
		JASC	ON LEE EXECU	ITIVE DIRECTOR				
			or print nam					
		Preparer	's k		Date	Check If	Preparer's iden	tıfyıng number
Paid		signature		AKHUJA	2010-11-12	self- empolyed 🕨 🔽	(see instruction	
	arer's	Firm's no	ame (or yours	s L ALAN C YOUNG & ASSOCIATE		amponycu F		
Use (ıf self-er	nployed),	•			EIN Þ	
,	- ··· J	address,	and ZIP + 4	7310 WOODWARD AVE STE 7	40		Phono no	(313) 873-7500
				DETROIT, MI 48202				<u> </u>
May	the IR	S discus	s this retu	rn with the preparer shown a	ibove? (see instructions)			▼ Yes

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

TO INCREASE THE NUMBER OF HISTORICALLY UNDERREPRESENTED STUDENTS WHO ARE MOTIVATED AND ACADEMICALLY PREPARED TO PURSUE CAREERS IN ENGINEERING, MATHEMATICS AND SCIENCE RELATED

	_		nt program services during the year whi	ch were not listed on	'es ✓ No
I	If "Yes," describe th	ese new services on Scl	nedule O		
	-	cease conducting, or m	ake significant changes in how it condu		ſes 🔽 No
I	If "Yes," describe th	ese changes on Schedu	le O		
9	Section 501(c)(3) a	nd 501(c)(4) organizatio	for each of the organization's three largons and section 4947(a)(1) trusts are r d revenue, if any, for each program serv	equired to report the amount	
4a	(Code) (Expenses \$	2,730,733 including grants of \$) (Revenue \$)
	PRE-COLLEGE EDUCATI	ON PROGRAMS OFFERED AT	EDUCATIONAL INSTITUTIONS WHICH COVER A V	ARIETY OF ENGINEERING AND SCIE	NCE-RELATED SUBJECTS
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
4c	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	Other program con	vices (Describe in Sche	dule O)		
	Other program serv				
	(Expenses \$	•	,) (Revenue \$)

art IV	Checklist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		N o
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νο
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	♦ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional 12A No	Į		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? If "Yes," complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than $$5,000$ of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		N o
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Νo
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		No
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III </i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		Νο
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If</i> "Yes," complete Schedule R, Part I	33		Νο
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		Νο
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38		Νo

Part V	Statements	Regarding	Other	IRS Filings	and Tax	Compliance
--------	------------	-----------	-------	-------------	---------	------------

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		Νο
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b		Νo
Ва	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Νο
ь	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
1a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
ā	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νο
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal			
	benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
}	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

100 FARNSWORTH SUITE 249

DETROIT, MI 48202 (313) 831-3050

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management			
			Yes	No
_				
1a	Enter the number of voting members of the governing body 1a 18			
b	Enter the number of voting members that are independent 18			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		Νο
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νο
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νο
6	Does the organization have members or stockholders?	6		Νο
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the	7a		Νο
L	governing body?	7a 7b		
ь		/B		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νο
	ction B. Policies (This Section B requests information about policies not required by the Internal			
Re	venue Code.)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
		11		No
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
ь	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13		Νo
14	Does the organization have a written document retention and destruction policy?	14		Νo
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
ь	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
h	taxable entity during the year?	16a		Νο
	participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	4.51		
6-		16b		
	ection C. Disclosure List the States with which a copy of this Form 990 is required to be filed►MI			
	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)			
10	(3)s only) available for public inspection Indicate how you make these available Check all that apply Own website Another's website Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	e orga	nızatıor	ı F
	JASON LEE			

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization did i		sate any	/ curi	rent	or fo	rmer o	ffice	r, director, trustee	or key employee	
(A) Name and Title	(B) (C) A verage Position (check all hours that apply)							(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

For	m 990 (2009)			Page 8
1 b	Total			
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization.			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> " <i>Yes,"</i> complete <i>Schedule J for such individual</i>	3		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4		N o
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5		No
s	ection B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization			
	(A) Name and business address (B) Description of services		(C Comper	
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization •			
		F	orm 99 0	(2009)

Form 9						Page 9
Part \	<u>/1111</u>	Statement of Revenue	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
## st	1a	Federated campaigns 1a				
g g	ь	Membership dues 1b				
કું.	C	Fundraising events 1c				
풀	d	Related organizations 1d	201.780			
ons, sim	e		391,780 			!!!
弄	'	similar amounts not included above				
Contributions, gifts, grants and other similar amounts	g	Noncash contributions included in lines 1a-1f \$				
S E	h	Total. Add lines 1a-1f	3,053,694			
		Business	Code			
enu	2a					
둏	Ь					
Program Serwce Revenue	C					
	d					
	e f	All other program service revenue				
Ş	Ι΄.					
	g 3	Total. Add lines 2a-2f	•			
		Investment income (including dividends, interest and other similar amounts)	▶ 15,227			15,227
	4	Income from investment of tax-exempt bond proceeds .	. ▶			
	5	Royalties	. ▶			
	١.	(I) Real (II) Perso	onal			
	6a b	Gross Rents Less rental				
	, c	expenses Rental income				
	d	or (loss) Net rental income or (loss)	<u> </u>			
	<u> </u>	(i) Securities (ii) Oth				
	7a	Gross amount from sales of assets other than inventory				
	Ь	Less cost or other basis and sales expenses				
	c d	Gain or (loss) Net gain or (loss)	<u></u>			
	8a	Gross income from fundraising	•			
Other Revenue		s of contributions reported on line 1c) See Part IV, line 18				
the	ь	Less direct expenses b				
0	С	Net income or (loss) from fundraising events .	. 🏲			
	9a	Gross income from gaming activities See Part IV, line 19				
	b c	Net income or (loss) from gaming activities	<u>*</u>			
	10a	Gross sales of inventory, less returns and allowances .				
	ь	Less cost of goods sold b				
	С	Net income or (loss) from sales of inventory				
	11a	Miscellaneous Revenue Business	Code 51,947			51,947
	ь	OTHER INCOME	31,347			31,377
	c					
	d	All other revenue				
	e	Total. Add lines 11a-11d	▶ - 51,947			
	12	Total revenue. See Instructions	3,120,868			67,174

Part IX Statement of Functional Expenses

	Section 501(c)(3) and 501(c)(4) organizations m	•			
	Il other organizations must complete column (A) but are not required to		ns (B), (C), and (B)	(D). (C)	(D)
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S $$ See Part IV , line 21 $$				
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	383,866	3,518	380,348	
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits	63,228		63,228	
10	Payroll taxes	29,011	520	28,491	
11	Fees for services (non-employees)				
а	Management				
b	Legal	1,480		1,480	
c	Accounting	19,255		19,255	
d	Lobbying				
e	Professional fundraising See Part IV, line 17				
f	Investment management fees				
g	Other				
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy	69,020	16,584	52,436	
17	Travel	26,619	8,501	18,118	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	10,751		10,751	
23	Insurance	5,843	875	4,968	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а		1,600,415	1,600,415		
Ь	CAMPUS BASED PROGRAMS	757,766	754,918	2,848	
c	CONSULTING SERVICES	289,500	189,255	100,245	
d	CURRICULUM	33,817	33,772	45	
е	MAINTENANCE	33,082	14,391	18,691	
f	All other expenses	157,523	107,984	34,645	14,894
25	Total functional expenses. Add lines 1 through 24f	3,481,176	2,730,733	735,549	14,894
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				·

Part X Balance Sheet (A) (B) Beginning of year End of vear 5.000 1 1 Cash—non-interest-bearing 1.279.505 2 1,417,818 2 960,000 640,000 3 3 4 379.056 4 123.381 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 Notes and loans receivable, net 7 8 Inventories for sale or use 3.086 9 1,763 Prepaid expenses and deferred charges 283.509 10a Land, buildings, and equipment cost or other basis Complete 10a Part VI of Schedule D 10b 256.596 37.664 26.913 b Less accumulated depreciation 10c 11 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 11.753 14.002 15 15 16 2,671,064 16 2,228,877 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 160,196 17 114.733 17 Accounts payable and accrued expenses 18 18 100,000 19 61,335 19 20 20 Liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . 21 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities Complete Part X of Schedule D 25 26 **Total liabilities.** Add lines 17 through 25 260,196 26 176,068 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 835,615 874,307 27 Unrestricted net assets 27 28 1.110.000 28 711.000 Temporarily restricted net assets Fund 465,253 467.502 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ Total net assets or fund balances 33 2,410,868 33 2,052,809 34 Total liabilities and net assets/fund balances 2.671.064 2,228,877 34

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separated basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a	Yes	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b	Yes	

Form **990** (2009)

DLN: 93493316042910

OMB No 1545-0047

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury

Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ. See separate instructions.

Public Charity Status and Public Support

Inspection

Name of the organization DETROIT AREA PRE-COLLEGE ENGINEERING PROGRAM INC

Employer identification number

38-2451827

Pa	rt I	Reas	on for Pul	olic Charity Stat	us (All orga	anızatıons ı	nust comp	olete this pai	rt.) See ins	tructions	
The	organı	zatıon ıs	not a private	e foundation because	ıtıs (Forlır	nes 1 throug	h 11, check	only one box)		
1	Γ	A churc	h, conventio	on of churches, or as	sociation of d	hurches se	ction 170(b)(1)(A)(i).			
2	\sqcap	A schoo	ol described	ın section 170(b)(1)	(A)(ii). (Atta	ach Schedul	e E)				
3	Γ	A hospi	tal or a coop	erative hospital serv	vice organiza	ition describ	ed ın sectio	n 170(b)(1)(A	(iii).		
4	Γ		cal research l's name, cıt	organization operate y, and state	ed in conjunc	tion with a h	ospital desc	cribed in secti o	on 170(b)(1)(A)(iii). En	ter the
5	г	An orga	inization ope	rated for the benefit	of a college (or university	owned or o	perated by a d	ıovernmenta	l unit descri	 bed in
	•	section	170(b)(1)(A	A)(iv). (Complete Pa	rt II)	ŕ	,	, , ,			
6	Γ			local government or	•	ıl unıt descrı	bed in secti	on 170(b)(1)(A)(v).		
7	▽	An orga describ	inization tha ed in	t normally receives a	a substantial					m the gener	al public
_	_			A)(vi) (Complete Pa							
8	<u> </u>		-	described in section				=			
9	ı			t normally receives							
		•		ties related to its ex	•	-			` '		
				ss investment incom						ix) from bus	inesses
	_	•		anızatıon after June 3	•			•	•		
10	<u> </u>			anized and operated							_
11	ı	one or r	nore publicly	anized and operated supported organization besthe type of support b Type II	tions describ orting organiz	oed in sectio ation and co	n 509(a)(1) mplete line:	or section 50	9(a)(2) See	section 50	
е	Γ	other th		x, I certify that the o on managers and oth							
f				eceived a written de	termination f	rom the IRS	that it is a -	Type I, Type I	I or Type II	I supporting	organizatio <u>n,</u>
_		checkt		006 has the arrange					the		Γ
g			g persons?	006, has the organiz	аноп ассері	ed any gni o	r contributio	on from any of	trie		
				ectly or indirectly co	ntrols, eithei	r alone or tog	gether with p	persons descr	ıbed ın (ıı)		Yes No
		and (111)	below, the g	overning body of the	the support	ed organızat	ion?			11g(i	i)
		(ii) a fa	mıly membe	r of a person describ	ed ın (ı) abov	/e [?]				11g(ii	i)
		(iii) a 3	5% controll	ed entity of a person	described in	ı (ı) or (ıı) ab	ove?			11 g(ii	ii)
h		Provide	the followin	g ınformatıon about t	he supported	d organizatio	n(s)				
	(i) Name suppo rganız	e of rted	e of (ii) (described on rted EIN lines 1-9 above ation or IRC section		(iv) Is the organization in col (i) listed in your governing document?		Did you no organiza col (i) c suppo	otify the ition in of your	(vi) Is th organizat col (i) org in the U	e tion in janized	(vii) A mount of support?
				(see instructions))	Yes	No	Yes	No	Yes	No	
Tota											

Part II Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I.)

- C	(Complete only if you	ou checked the	box on line 5,	, or 8 of Part I	.)			
	ection A. Public Support endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2	009	(f) Total
1	in) Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")				2,691,303	3	3,053,694	10,719,802
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit	2,246,45	1,977,947	2,051,507	21,552,216			27,828,129
4	to the organization without charge Total. Add lines 1 through 3	3,933,03	0 3,934,208	3,383,480	24,243,519		3,053,694	38,547,931
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the			, ,	, ,		, ,	6,887,113
	amount shown on line 11, column (f)							
6	Public Support. Subtract line 5 from line 4							31,660,818
	ection B. Total Support		1	<u></u>				
Cale	endar year (or fiscal year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 20	009	(f) Total
7	beginning in) A mounts from line 4	3,933,030	51,627	3,383,480	24,243,519	3	,053,694	38,547,931
8	Gross income from interest,		·					
	dividends, payments received on securities loans, rents, royalties and income from similar sources	25,031	51,627	63,315	43,481		15,227	198,681
9	Net income from unrelated business activities, whether or not the business is regularly carried on						50,947	50,947
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	72,084	28,673	25,353	26,069			152,179
11	Total support (Add lines 7 through 10)							38,949,738
12	Gross receipts from related activiti	es, etc (See ins	tructions)			12		
13	First Five Years If the Form 990 is check this box and stop here	for the organizat	ıon's fırst, second	, thırd, fourth, or f	ıfth tax year as a	501(c)(i	3) organız	ation, ▶┌
	ection C. Computation of Pub							
14	Public Support Percentage for 2009	•	. ,	11 column (f))		14		81 290 %
15	Public Support Percentage for 2008	•	•			15		99 010 %
	33 1/3% support test—2009. If the and stop here. The organization qua	alıfıes as a public	ly supported orga	nızatıon				►
	33 1/3% support test—2008. If the box and stop here. The organization 10%-facts-and-circumstances test-is 10% or more, and if the organization meeorganization	n qualifies as a p — 2009. If the org tion meets the "	ublicly supported janization did not o facts and circums	organization check a box on lin tances" test, chec	ie 13, 16a, or 16b ck this box and st	and line	e 14 Explain	► □
Ь	10%-facts-and-circumstances test-	—2008. If the org	janization did not (check a box on lin	ie 13, 16a, 16b, o	r 17a ar	nd line	- 1
	15 is 10% or more, and if the organ Explain in Part IV how the organiza supported organization	tion meets the "	facts and circums	tances" test The	organization qual	ıfıes as a	a publicly	► □
18	Private Foundation If the organizat instructions	ion did not checl	k a box on line 13,	16a, 16b, 17a oi	r 17b, check this	box and	see	▶ □

Part III Support Schedule for Organizations Described in IRC 509(a)(2)

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support			<u> </u>	1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
_	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
3	purpose Gross receipts from activities that				+		
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
_	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5				-		
7a	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed						
	the greater of \$5,000 or 1% of the amount on line 13 for the year						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6)						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
11	business activities not included						
	ın lıne 10b, whether or not the						
	business is regularly carried on						
12	Other income Do not include gain or loss from the sale of						
	capital assets (Explain in Part						
	IV)						
13	Total support (Add lines 9, 10c,						
14	11 and 12) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes been	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(us more man 33	1/370 and ine

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV

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

Schedule A (Form 990 or 990-EZ) 2009

DLN: 93493316042910

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities),

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- ◆ Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- ◆ Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regarding proxy tax), then

• Se	ction 501(c)(4), (5), or (6) organizations. Complete Part III				
DET	ROIT AREA PRÉ-COLLEGE	' '		ition numbe	er
Name of the organization DETROIT AREA PRE-COLLEGE ENGINEERING PROGRAM INC Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 Provide a description of the organization's direct and indirect political campaign activities in Part IV Political expenditures Volunteer hours Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955			7 org	janizatio	n.
1	Provide a description of the organization's direct and indirect political campaign activities in Pa	rt IV			
2	Political expenditures	F	\$		
3	Volunteer hours		_		
Par	t I-B Complete if the organization is exempt under section 501(c)(3).				
1	Enter the amount of any excise tax incurred by the organization under section 4955	F	\$		
2	Enter the amount of any excise tax incurred by organization managers under section 4955	•	\$		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			☐ Yes	▽ N
4a	Was a correction made?			☐ Yes	V N

If "Yes," describe in Part IV Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- Enter the amount directly expended by the filing organization for section 527 exempt function activities 1 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- Did the filing organization file Form 1120-POL for this year?

State the names, addresses and employer identification number (EIN) of all section 527 political organizations to which payments were made. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) A ddress	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). Check if the filing organization belongs to an affiliated group if the filing organization checked box A and "limited control" provisions apply B Check (a) Filing (b) Affiliated Limits on Lobbying Expenditures Organization's Group (The term "expenditures" means amounts paid or incurred.) Totals Totals 1a Total lobbying expenditures to influence public opinion (grass roots lobbying) 2.200 **b** Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) 2,200 d Other exempt purpose expenditures 3,478,976 e Total exempt purpose expenditures (add lines 1c and 1d) 3,481,176 f Lobbying nontaxable amount Enter the amount from the following table in both 324,059 columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 20% of the amount on line 1e Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000

\$175,000 plus 10% of the excess over \$1,000,000

\$225,000 plus 5% of the excess over \$1,500,000

~	Grassroots	nontavable	amount	(enter	25%	ofline	1 f)
ч	GIASSIUULS	HUHLAXADIE	ailloull	lenter.	Z D 7/0	or mile	T 17

Over \$1,000,000 but not over \$1,500,000

Over \$1,500,000 but not over \$17,000,000

Over \$17,000,000

h Subtract line 1g from line 1a If zero or less, enter -0-

i Subtract line 1f from line 1c If zero or less, enter - 0-

j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reportin
	section 4911 tax for this year?

\$1,000,000

┌ Yes ┌ No

81,015

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

	Lobbying Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total				
2a	Lobbying non-taxable amount	314,846	334,531	347,655	324,059	1,321,091				
b	Lobbying ceiling amount (150% of line 2a, column(e))					1,981,637				
c	Total lobbying expenditures		3,580	3,070	2,200	8,850				
d	Grassroots non-taxable amount	78,712	83,633	86,914	81,015	330,274				
е 	Grassroots ceiling amount (150% of line 2d, column (e))					495,411				
f	Grassroots lobbying expenditures				2,200	2,200				

	hedule C (Form 990 or 990-EZ) 2009					age 3
Pa	art II-B Complete if the organization is exempt under section 501(c)(3) a (election under section 501(h)).	and has NOT	filed I	orm	5768	3
			(a)		(b)	
		Yes	No		A moun	it
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referend through the use of	lum,	•			
а	a Volunteers?		No			
b	b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	,	Νο			
c	c Media advertisements?		Νο			
d	d Mailings to members, legislators, or the public?		Νο			
e	e Publications, or published or broadcast statements?		Νο			
f			Νο			
g	g Direct contact with legislators, their staffs, government officials, or a legislative body?		Νο			
h	h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		Νο			
i	i Other activities? If "Yes," describe in Part IV		Νο			
j	Total lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No			
b	b If "Yes," enter the amount of any tax incurred under section 4912					
c	c If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?		No			
Par	art III-A Complete if the organization is exempt under section $501(c)(4)$,	section 501(c)(5),	or s	ectio	n
	501(c)(6).				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	103	No
2				2		No
3		>		3		No
	art III-B Complete if the organization is exempt under section 501(c)(4),		c)(5).	or s	ectio	
	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR answered "Yes".					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of expenses for which the section 527(f) tax was paid).	political				
а	a Current year	2a				
b	b Carryover from last year	2b				
c	c Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e)	dues 3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying political expenditure next year?					
5	·	5	+			
	Part IV Supplemental Information					
	Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C	`line 5 and Par	+ II-R I	ne 1		
	ilso, complete this part for any additional information					
	Identifier Return Reference	Explanation				

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DLN: 93493316042910

OMB No 1545-0047

Open to Public

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990,

Part IV, line 6, 7, 8, 9, 10, 11, or 12.

emai	DETROIT AREA PRE-COLLEGE ENGINEERING PROGRAM INC 38-2451827			lisher	TOIL	
			Emp	loyer identificatio	n numbe	<u> </u>
			38-2	2451827		
Pa	rt I Organizations Maintaining Donor Adv		Funds	or Accounts. C	omple	te if the
	organization answered "Yes" to Form 990), Part IV, line 6. (a) Donor advised funds		b) Funds and othe		- 4 -
L	Total number at end of year	(a) Donor advised lunds	(b) Funds and othe	raccour	ils
2	Aggregate contributions to (during year)				3	053,694
- 3	Aggregate grants from (during year)				<u> </u>	000,00
ļ	Aggregate value at end of year					
5	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the or				– _{Yes}	✓ No
5	Did the organization inform all grantees, donors, and dused only for charitable purposes and not for the beneficonferring impermissible private benefit	onor advisors in writing that grant fun	nds may be	r purpose _	_ Yes	▽ No
Pai	t III Conservation Easements. Complete if	the organization answered "Yes	" to Forn	n 990, Part IV, l	ıne 7.	
2	Preservation of land for public use (e.g., recreation Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualification on the last day of the tax year	Preservation of	a certified	cally importantly lid historic structure		d
	casement on the last all, or the tax year			Held at the En	d of the	Year
а	Total number of conservation easements		2a			
b	Total acreage restricted by conservation easements		2b			
c	Number of conservation easements on a certified histo	orıc structure ıncluded ın (a)	2c			
d	Number of conservation easements included in (c) acq	quired after 8/17/06	2d			
3	Number of conservation easements modified, transferr	red, released, extinguished, or termin	ated by th	e organization dur	ing	
	the taxable year 🛌					
ļ	Number of states where property subject to conservat	ion easement is located 🕨				
5	Does the organization have a written policy regarding tenforcement of the conservation easements it holds?		andling of		_ Yes	√ No
;	Staff and volunteer hours devoted to monitoring, inspe	ecting and enforcing conservation eas	ements d	uring the year ►		
,	A mount of expenses incurred in monitoring, inspecting	g, and enforcing conservation easeme	nts during	; the year ► \$		
3	Does each conservation easement reported on line 2 (of 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	d) above satisfy the requirements of s	section	Γ	– Yes	ן No
•	In Part XIV, describe how the organization reports corbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemed	e footnote to the organization's finance ents	cial staten	nents that describ	es	
ar	Organizations Maintaining Collection			ner Similar As	sets.	
La	Complete if the organization answered "Y If the organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held fo provide, in Part XIV, the text of the footnote to its final	l 16, not to report in its revenue state or public exhibition, education or rese	ment and earch in fu			≘,
b	If the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for puprovide the following amounts relating to these items	·				
	(i) Revenues included in Form 990, Part VIII, line 1			► \$		
	(ii) Assets included in Form 990, Part X			► \$		
2	If the organization received or held works of art, histor following amounts required to be reported under SFAS		s for finan			

Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

Par	311 Organizations Maintaining Co	ilections of Art	, Hist	torica	al Tr	<u>easur</u>	es, or O	thei	r Simila	r Asse	ets (co	ontinued)
3	Using the organization's accession and othe items (check all that apply)	records, check an	y of the		_		_		se of its c	ollectio	n	
а	Public exhibition		d		Loand	rexcha	inge progr	ams				
b	Scholarly research		e	Γ (O ther							
С	Preservation for future generations											
4	Provide a description of the organization's co	llections and expla	ın how	they	furthe	r the or	ganızatıon	's ex	empt purp	ose in		
5	During the year, did the organization solicit o	r receive donations	ofart	, histo	orical t	treasure	s or othe	rsım	ılar			
	assets to be sold to raise funds rather than t										Yes	✓ No
Pai	rt IV Escrow and Custodial Arrang Part IV, line 9, or reported an an						answere	d "Ye	es" to Fo	rm 990	o, 	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?					tions or	other ass	ets n	iot	Г	Yes	√ No
b	If "Yes," explain the arrangement in Part XI\	and complete the	followi	ng tab	ole		Г			A		
_								•		A mo	unt	
c c	Beginning balance						-	1c				
d	Additions during the year							1d				
e f	Distributions during the year							1e				
	Ending balance	000 D 1 V 1	242				L	1f			.,	
2a	Did the organization include an amount on Fo		e 217							1	Yes	✓ No
b	If "Yes," explain the arrangement in Part XIV				d !!\/a.	.!! - о. Го	000	Dow	L TV Juna	10		
Pa	rt V Endowment Funds. Complete	(a)Current Year		<u>Werec</u> Prior Ye			Years Back		Three Years		e)Four Y	ears Back
1a	Beginning of year balance	11,753	(- /-		14,845	(-)::::					,	
ь	Contributions											
С	Investment earnings or losses	2,249			1,192							
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance	14,002			16,037							
2	Provide the estimated percentage of the yea	r end balance held a	as		'							
а	Board designated or quasi-endowment 🕨	%										
ь	Permanent endowment > %											
С	Term endowment ► %											
3a	Are there endowment funds not in the posses	ssion of the organiz	ation t	hat ar	e held	and ad	mınıstere	d for t	the			
	organization by	-									Yes	No
	(i) unrelated organizations			•				•		3a(i)		No
_	(ii) related organizations									3a(ii)	<u> </u>	No
	If "Yes" to 3a(II), are the related organizatio							•		3b		No
4 Dar	Describe in Part XIV the intended uses of the rt VI Investments—Land, Buildings					00 Dar	t V Juno	10				
Fal	tvi investments—Land, Buildings	s, and Equipme	III. Se			•	i '		(-) (Τ	
	Description of investment				Cost o	r otner stment)	(b) Cost or basis (otl			mulated ciation	(d) E	Book value
				1			Ī		I			
1a	Land		•									
b	Buildings											
b												
b c	Buildings											
b c d	Buildings											

Part VII Investments—Other Securities. Se	ee Form 990, Part X, line 12.	(-) Makkad after leaking
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related. S	See Form 990, Part X, line 13	3.
(a) Description of investment type	(b) Book value	(c) Method of valuation
——————————————————————————————————————	(b) Book value	Cost or end-of-year market value
Total (Column (h) should equal Form 990, Part Y, col (R) line 13.)	b	
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X.		
Total. (Column (b) should equal Form 990, Part X, col (B) line 13) Part IX Other Assets. See Form 990, Part X, (a) Desc	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
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Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	line 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, (a) Desc	line 15.	
Part IX Other Assets. See Form 990, Part X, (a) Description (b) Should equal Form 990, Part X, col.(B) line	e 15.)	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) lim Part X Other Liabilities. See Form 990, Part	e 15.) t X, line 25.	
Part IX Other Assets. See Form 990, Part X, (a) Description (b) Should equal Form 990, Part X, col.(B) line	e 15.)	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part	e 15.) t X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability	e 15.) t X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability	e 15.) t X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability	e 15.) t X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability	e 15.) t X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability	e 15.) t X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability	e 15.) t X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability	e 15.) t X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability	e 15.) t X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability	e 15.) t X, line 25.	
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Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability	e 15.) t X, line 25.	
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Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability	e 15.) t X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability	e 15.) t X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability	e 15.) t X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part 1 (a) Description of Liability	e 15.) t X, line 25. (b) A mount	

Schedule D (Form 990) 2009

	XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	3,120,868
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	3,481,176
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-360,308
4	Net unrealized gains (losses) on investments	4	2,249
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	2,249
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	-358,059
	XII Reconciliation of Revenue per Audited Financial Statements With Revenue p		<u> </u>
1	Total revenue, gains, and other support per audited financial statements	1	3,123,117
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities 2b		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	2,249
3	Subtract line 2e from line 1	3	3,120,868
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	3,120,868
Part	Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial	1	3,481,176
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
- а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	3,481,176
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	
		-	3,481,176
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5] 3,701,170

Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any

Identifier Return Reference Explanation

additional information

SCHEDULE M (Form 990)

Part I Types of Property

NonCash Contributions

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

Employer identification number Name of the organization DETROIT AREA PRE-COLLEGE ENGINEERING PROGRAM INC 38-2451827

		(a) Check If	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line	(d) Method of de reven	etermı	ning	
	Art—Works of art	applicable		1 g				
	Art—Historical treasures							
	Art—Fractional interests							
4	Books and publications							
-	Clothing and household							
•	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .							
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
12	Securities—Miscellaneous							
13	Q ualified conservation contribution—Historic							
	structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	O ther ▶ ()	Х	1	1,600,414				
	Other ►()							
	Other ►()							
	Other ► ()							
29	Number of Forms 8283 received for which the organization compl				29			
							Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it			
	must hold for at least three year	s from the o	date of the initial contributi	on, and which is not require	d to be used			
	for exempt purposes for the enti	re holding p	eriod?			30a		No
Ь	If "Yes," describe the arrangeme	ent in Part I	I.					
31	Does the organization have a gif	tacceptand	e policy that requires the i	review of any non-standard	contributions?	31		No
32a	Does the organization hire or us contributions?	e third parti	es or related organizations	to solicit, process, or sell i	non-cash	32a		Νο
ь	If "Yes," describe in Part II							
	If the organization did not report	revenuesı	n column (c) for a type of p	roperty for which column (a) is checked.			
_	describe in Part II		, , , p P	. ,				
For P	rivacy Act and Paperwork Reduction	Act Notice,	see the Instructions for Form	m 990. Cat No 51227J	Schedule	M (For	m 990)	2009

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2009

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DLN: 93493316042910

OMB No 1545-0047

Supplemental Information to Form 990

SCHEDULE O (Form 990)

Department of the Treasury
Internal Revenue Service

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

Attach to Form 990.

Open to Public Inspection

Name of the organization DETROIT AREA PRE-COLLEGE ENGINEERING PROGRAM INC **Employer identification number**

38-2451827

ldentifier	Return Reference	Explanation
ORGANIZATION'S MISSION	FORM 990 - ORGANIZATION'S MISSION	TO INCREASE THE NUMBER OF HISTORICALLY UNDERREPRESENTED STUDENTS WHO ARE MOTIVATED AND ACADEMICALLY PREPARED TO PURSUE CAREERS IN ENGINEERING, MATHEMATICS AND SCIENCE RELATED
ORGANIZATION'S PROCESS USED TO REVIEW FORM 990	FORM 990, PAGE 6, PART VI, LINE 11	NO REVIEW WAS OR WILL BE CONDUCTED
ENFORCEMENT OF CONFLICTS POLICY	FORM 990, PAGE 6, PART VI, LINE 12C	ALL THE OFFICERS ARE SUPPOSED TO DISCLOSE ANNUALLY ABOUT THIS
COMPENSATION PROCESS FOR TOP OFFICIAL	FORM 990, PAGE 6, PART VI, LINE 15A	A REVIEW IS DONE ANNUALLLY BY THE BOARD TO DETERMINE THE COMPENSATION
COMPENSATION PROCESS FOR OFFICERS	FORM 990, PAGE 6, PART VI, LINE 15B	A REVIEW IS DONE ANNUALLLY BY THE BOARD AND THE CEO TO DETERMINE THE COMPENSATION
GOVERNING DOCUMENTS DISCLOSURE EXPLANATION	FORM 990, PAGE 6, PART VI, LINE 19	NO DOCUMENTS AVAILABLE TO THE PUBLIC

For Paperwork Reduction Act Notice, see the Instructions for Form 990

Cat No 51056K

Schedule O (Form 990) 2009

Software ID: Software Version:

EIN: 38-2451827

Name: DETROIT AREA PRE-COLLEGE

ENGINEERING PROGRAM INC

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) A verage hours	verage Position (check all nours that apply)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other			
	per week	individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
REV DR CHARLES ADAMS PARENT ADVIS	5 00	X						0	0	0
DEAN BHUSHAN BHATT BOARD MEMBER	5 00	X						0	0	0
OLABISI A BOYLE BOARD MEMBER	5 00	X						0	0	0
DR HIRAM FITZGERALD BOARD MEMBER	5 00	X						0	0	0
DEAN ARTHUR HAMAN BOARD MEMBER	5 00	X						0	0	0
ELIOTT HALL BOARD MEMBER	5 00	Χ						0	0	0
JOHN MATLOCK BOARD MEMBER	5 00	X						0	0	0
BILL STEPPAN BAORD MEMBER	5 00	X						0	0	0
NANCY VARNER BOARD MEMBER	5 00	X						0	0	0
GERARD WHITE BOARD MEMBER	5 00	X						0	0	0
TONYA ALLEN BOARD MEMBER	5 00	X						0	0	0
CHRIS S ANDERSON BOARD MEMBER	5 00	X						0	0	0
REV CHERYLE HANNA BOARD MEMBER	5 00	X						0	0	0
DRGERALD O THOMPKINS BOARD MEMBER	5 00	X						0	0	0
GREGG ZANK BOARD MEMBER	5 00	X						0	0	0
JASON LEE EXE DIRECT	40 00			X				0	0	0
STEPHEN C LEWIS PRESIDENT	5 00			X				0	0	0
GENEVIEVE BELLAMY SECRETARY	5 00			X				0	0	0
ALBERT WARE TREASURER	5 00			Х				0	0	0

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
IN-KIND SERVICES	1,600,415	1,600,415		
CAMPUS BASED PROGRAMS	757,766	754,918	2,848	
CONSULTING SERVICES	289,500	189,255	100,245	
CURRICULUM	33,817	33,772	45	
MAINTENANCE	33,082	14,391	18,691	

TY 2009 Averaging Attachment

Name: DETROIT AREA PRE-COLLEGE

ENGINEERING PROGRAM INC

EIN: 38-2451827

Explanation: NO ACTIVITY