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### Form **990-PF** Department of the Treasury Internal Revenue Service

### 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. ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For calendar year 2013 or tax year beginning and ending A Employer identification number Name of foundation HERE TO HELP FOUNDATION 20-8057969 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number P.O. BOX 480 248-330-0723 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ROYAL OAK, 48068-0480 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Section 501(c)(3) exempt private foundation Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: | X | Cash Accrual If the foundation is in a 60-month termination (from Part II, col (c), line 16) Other (specify) under section 507(b)(1)(B), check here ▶\$ 2,116,920. (Part I, column (d) must be on cash basis.) Part I Analysis of Revenue and Expenses (c) Adjusted net (b) Net investment (d) Disbursements (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) ) for charitable purposes (cash basis only) expenses per books income income 100,740 N/A Contributions, gifts, grants, etc., received **69** if the foundation is not required to attach Sch. B **e**V Interest on savings and temporary cash investments 19,453 19,453 STATEMENT MAY 29,453 29,453 STATEMENT Dividends and interest from securities 5a Gross rents Net rental income or (loss) 172,351 STATEMENT 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 1,110,157. 172,351 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain SC Income modifications 10a Gross sales less returns and allowances 2014 2 2 MAY b Less Cost of goods sold c Gross profit or (loss) OGDEN 11 Other income 321,997 221 257 Total. Add lines 1 through 11 0 0. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits and Administrative Expenses 16a Legal fees 4 2,000 1,000 STMT 1,000. **b** Accounting fees 5 22,099. 22,099 c Other professional fees STMT 1,004 STMT 6 984 20 18 Taxes 19 Depreciation and depletion 20 Occupancy 909. 0 21 Travel, conferences, and meetings 909. 22 Printing and publications STMT 7 10,956 11 10,945. Operating 23 Other expenses 24 Total operating and administrative 12,874. 24,094 expenses. Add lines 13 through 23 36,968 452,271 25 Contributions, gifts, grants paid 452,271. 26 Total expenses and disbursements. 489,239 24,094 465,145. Add lines 24 and 25 27 Subtract line 26 from line 12: <167,242. 2 Excess of revenue over expenses and disbursements 197,163 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

	30-PF (2013) RERE TO RELE FOUNDATION	Beginning of year		3037303 Page 2
Part	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing			
	Savings and temporary cash investments	102,135.	24,399.	24,399.
	Accounts receivable ►			
	Less: allowance for doubtful accounts			
4	Pledges receivable ▶			
	Less: allowance for doubtful accounts			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons			
7	Other notes and loans receivable			
	Less: allowance for doubtful accounts			
φ 8	Inventories for sale or use			
76	Prepaid expenses and deferred charges			
₹   10a	Investments - U.S. and state government obligations STMT 8	677,082.	688,280.	686,731.
	Investments - corporate stock STMT 9	902,787.	781,357.	1,280,852.
1	Investments - corporate bonds STMT 10	100,373.	121,099.	124,938.
1	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
12	Investments - mortgage loans			
13	Investments - other			
1 1	Land, buildings, and equipment: basis			
	Less accumulated depreciation			
15	Other assets (describe ▶			
	Total assets (to be completed by all filers - see the			
	instructions. Also, see page 1, item 1)	1,782,377.	1,615,135.	2,116,920.
17	Accounts payable and accrued expenses			
18	Grants payable			
	Deferred revenue			
Liabilities 50 21 20 21	Loans from officers, directors, trustees, and other disqualified persons			
<u>ia</u> 21				
ا تا	Other liabilities (describe  )			
23	Total liabilities (add lines 17 through 22)	0.	0.	
	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
8 24	Unrestricted			
<u>E</u> 25	Temporarily restricted			
<b>E</b> 26	Permanently restricted			
Net Assets or Fund Balances 24 25 26 27 28 30	Foundations that do not follow SFAS 117, check here			
표	and complete lines 27 through 31.			
S 27	Capital stock, trust principal, or current funds	2,892,977.	2,892,977.	
28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
¥ 29	Retained earnings, accumulated income, endowment, or other funds	<1,110,600.>	<1,277,842.	•
₹ 30	Total net assets or fund balances	1,782,377.	1,615,135.	
		•		
31	Total liabilities and net assets/fund balances	1,782,377.	1,615,135.	
Part	III Analysis of Changes in Net Assets or Fund Ba	alances		
	I net assets or fund balances at beginning of year - Part II, column (a), line 3			
	st agree with end-of-year figure reported on prior year's return)	J <b>O</b>		1,782,377.
•	r amount from Part I, line 27a		1 2	<167,242.
			3	<u> </u>
	r increases not included in line 2 (itemize) lines 1, 2, and 3			1,615,135.
			4	
	eases not included in line 2 (itemize)  I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (h) line 30	5 6	1,615,135.
6 lota	r net assets of futile balances at end of year finite 4 minus line 3) - Fatt II, CO	idinii (O), iiiic OO		Form <b>990-PF</b> (2013)

8

See the Part VI instructions.

Enter qualifying distributions from Part XII, line 4

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

465,145.

	990-PF (2013) HERE TO HELP FOUNDATION  rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	<u>20-</u> 948 -	8057 see i	969 nstru	ıctio	Page 4 ns)
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
14	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1			1.9	72.
•	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).					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
	Add lines 1 and 2	3			1,9	72.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			1,9	72.
6	Credits/Payments:					
a	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 1,280.					
b	Exempt foreign organizations - tax withheld at source					
C	Tax paid with application for extension of time to file (Form 8868)					
	Backup withholding erroneously withheld 6d					
7	Total credits and payments. Add lines 6a through 6d	7			1,2	80.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9			6	92.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be: Credited to 2014 estimated tax	_11_				
	rt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	in			Yes	No
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)	?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	d or				
	distributed by the foundation in connection with the activities.					
C	Did the foundation file Form 1120-POL for this year?			1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 .					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers. ▶ \$					
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.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, o	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			_3_		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a_		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b		
5	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	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state	law				
	remain in the governing instrument?			6		<u>X</u>
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	X	
8a	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	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	ndar				3.5
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10	DE /	_A_

	1 990-PF (2013) HERE TO HELP FOUNDATION 20-8057	969		Page 5
_	art VII-A Statements Regarding Activities (continued)			
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?	١		.,
	If "Yes," attach statement (see instructions)	12		<u> </u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>
	Website address  WWW.HERETOHELPFOUNDATION.ORG		<del></del>	<del></del>
14	The books are in care of ► THE FOUNDATION Telephone no. ► 248-33			
	Located at ►P.O. BOX 480, ROYAL OAK, MI ZIP+4 ►48	068	-04	80
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	•
	and enter the amount of tax-exempt interest received or accrued during the year	N	/ <u>A</u>	
16	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank,	ı	Yes	1
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			
_	country	L		
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	o If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	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			
	before the first day of the tax year beginning in 2013?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2013? Yes X No			
	If "Yes," list the years >			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.			
	<b>&gt;</b>			
3a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	o If "Yes," did it have excess business holdings in 2013 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2013.) N/A	3b		
4a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b		_X_

Form 990-PF (2013) HERE TO HELP FOUNDATION			20-80579	69 Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,		
any voter registration drive?		Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	or	İ	
the prevention of cruelty to children or animals?		Ye	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	ere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for	om the tax because it maintai	ned		
expenditure responsibility for the grant?	N	// A	s No	
If "Yes," attach the statement required by Regulations section 53 494	5-5(d)		ļ	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Ye	s X No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		[ 6	Sb X
If "Yes" to 6b, file Form 8870				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	/	
1 List all officers, directors, trustees, foundation managers and their	compensation.	•		
A Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	enter -0-)	and deterred compensation	allowances
ROBERT SCHWARTZ	CEO AND SECRE	TARY		
P.O. BOX 480				
ROYAL OAK, MI 48068	40.00	0.	0.	0.
	PRESIDENT			
P.O. BOX 480		_	_	
ROYAL OAK, MI 48068	40.00	0.	0.	0.
	VICE PRESIDEN	$\mathbf{r}$		
P.O. BOX 480		_	_	
ROYAL OAK, MI 48068	3.00	0.	0.	<u>0.</u>
ILENE SCHWARTZ	TREASURER			
P.O. BOX 480	5 00			•
ROYAL OAK, MI 48068  2 Compensation of five highest-paid employees (other than those inc	5.00	O.	0.	<u> </u>
2 Compensation of live highest-paid employees totale than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
NONE				
				<del></del>
	-			
		<u> </u>	-	<del></del>
	}			
The state of the sample was part over \$50,000	<u> </u>	ــــــــــــــــــــــــــــــــــــــ		0
Total number of other employees paid over \$50,000				

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	art X		_		003/303	1 agc u
_	Minimum Investment Return (All domestic foundations	must complete this p	part. Foreign four	ndations, s	ee instructions)	
1	Fair market value of assets not used (or held for use) directly in carrying out charital	ble, etc., purposes:				
a	Average monthly fair market value of securities	1a	2,059 64	<u>,047.</u>		
b	Average of monthly cash balances			1b	64	<u>,838.</u>
C	Fair market value of all other assets			1c		
d	Total (add lines 1a, b, and c)			1d	2,123	<u>,885.</u>
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	2,123	,885.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount	it, see instructions)		4	31	,858.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and of	on Part V, line 4		5	2,092	
6_	Minimum investment return Enter 5% of line 5			6		,601.
P	art XI Distributable Amount (see instructions) (Section 4942(J)(3)	and (j)(5) private opera	ing foundations ar	ıd certaın		
	foreign organizations check here 🕨 🔃 and do not complete this par	t.)				
1	Minimum investment return from Part X, line 6			1	104	,601.
2a	Tax on investment income for 2013 from Part VI, line 5	2a	1,972.		-	
b	Income tax for 2013. (This does not include the tax from Part VI.)	2b				
C	Add lines 2a and 2b			2c	1	,972.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	102	<u>,972.</u> ,629.
4	Recoveries of amounts treated as qualifying distributions			4		0.
5	Add lines 3 and 4			5	102	,629.
6	Deduction from distributable amount (see instructions)			6		0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Pai	t XIII. line 1		7	102	,629.
P	art XII Qualifying Distributions (see Instructions)					, , , , ,
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	rposes:				
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	465	,145.
b	Program-related investments - total from Part IX-B			1b		0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charita	able, 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	465	,145.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inv					<u>,                                    </u>
-	income. Enter 1% of Part I, line 27b			5	1	972.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	463	, 173.
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years	when calculation wheth	er the foundation of	<del></del>		<u>,                                    </u>
	4940(e) reduction of tax in those years.	g Wildli		422mio0 10i	50000011	

### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,	<del></del>	· · · · · · · · · · · · · · · · · · ·		
line 7				102,629.
2 Undistributed income, if any, as of the end of 2013		- "		102,025
a Enter amount for 2012 only			o.	
<b>b</b> Total for prior years:				
· · · · · · · · · · · · · · · · · · ·		0.		
3 Excess distributions carryover, if any, to 2013:				
a From 2008 274,919.				
b From 2009 110, 273.				
c From 2010 184,809.				
d From 2011 243,086.				
e From 2012 285,835.				
f Total of lines 3a through e	1,098,922.			
4 Qualifying distributions for 2013 from				
Part XII, line 4: ▶\$ 465, 145.				
a Applied to 2012, but not more than line 2a			0.	
<b>b</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 2013 distributable amount	· · · · · · · · · · · · · · · · · · ·	··		102,629.
e Remaining amount distributed out of corpus	362,516.			102,023.
5 Excess distributions carryover applied to 2013	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a) )				<u> </u>
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,461,438.			
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 2012. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2013. Subtract	·			
lines 4d and 5 from line 1. This amount must				
be distributed in 2014				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2008				
not applied on line 5 or line 7	274,919.			
9 Excess distributions carryover to 2014.				
Subtract lines 7 and 8 from line 6a	1,186,519.			
10 Analysis of line 9:				
a Excess from 2009 110, 273.				
b Excess from 2010 184,809.				
c Excess from 2011 243,086.				
d Excess from 2012 285,835.				
e Excess from 2013 362,516.				
	<del>, ,</del>	<del></del>		Form <b>990-PF</b> (2013)

	HELP FOUND			20-80	57969	Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII	-A, question 9)	N/A		
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating				
foundation, and the ruling is effective fo	or 2013, enter the date of t	the ruling	<b>▶</b> <u></u>		<u></u>	
b Check box to indicate whether the found	d <u>ation is a private operatii</u>	ng foundation described i	n section	4942(j)(3) or 4	942(j)(5)	
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		_	
income from Part I or the minimum	(a) 2013	<b>(b)</b> 2012	(c) 2011	(d) 2010	(e) To	tal
investment return from Part X for						-
each year listed						
<b>b</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				<del></del>		
alternative test relied upon:						
a "Assets" alternative test - enter:						
(1) Value of all assets					<del> </del>	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)						
<b>b</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,					ľ	
dividends, rents, payments on						
securities loans (section 512(a)(5)), or royalties)						
(2) Support from general public				-		
and 5 or more exempt	İ					
organizations as provided in section 4942(j)(3)(B)(iii)						
(3) Largest amount of support from					<del> </del>	
an exempt organization						
, <u> </u>					<del> </del>	
(4) Gross investment income  Part XV   Supplementary Info	rmation (Comple	te this part only	if the foundation	n had \$5 000 or m	ore in ass	ate .
at any time during			ii tile loulidatic	711 11au <del>40</del> ,000 01 111	ore in assi	513
			· <del></del> -	<u> </u>	<del></del>	<del></del>
1 Information Regarding Foundation		aba- 00/ af the tatal at		ha faadak.aa bafa kba ala		
a List any managers of the foundation where year (but only if they have contributed)			ributions received by t	ne toundation before the cic	ise of any tax	
, , , , ,	того тап фозосор. (СССС	0011011 007 (u)(L).)				
NONE	ha aven 100/ as many of th			-t		
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large po	rtion of the ownership of a p	arthership or	
••	ao a no ro or ground miloro	-				
NONE	tion Cront Cift Lan-	Cabalarabin etc. De				
	only makes contributions	to preselected charitable	organizations and doe	s not accept unsolicited req		. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	viduals or organizations u	nder other conditions,	, complete items 2a, b, c, an	d d.	
a The name, address, and telephone nun		he person to whom appli	cations should be add	ressed:		
ROBERT SCHWARTZ, 248	3-330-0723					
P.O. BOX 480, ROYAL	OAK, MI 480	68-0480	_	<u>-</u>		
b The form in which applications should	be submitted and informa	tion and materials they sl	nould include:			_
SEE ATTACHED.						
c Any submission deadlines:				_		
MONE  d Any restrictions or limitations on award	ts, such as by geographic	al areas, charitable fields	kinds of institutions of	or other factors	<del></del>	
SEE ATTACHED.	, see as sy goograpino	Jus, Jimi implo iloids,				
				· · · · · · · · · · · · · · · · · · ·	F 000 I	DE (0040)

### Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	d business income		d by section 512, 513, or 514	(e)		
<b>3</b>	(a)	(b)	(c) Exclu-	(d)	Related or exempt		
1 Program service revenue:	Business code	Amount	sion	Amount	function income		
a		· -					
b							
c		-					
d							
e	1 1						
f							
g Fees and contracts from government agencies	_						
2 Membership dues and assessments		_					
3 Interest on savings and temporary cash							
investments			14	19,453.			
4 Dividends and interest from securities			14	29,453.			
5 Net rental income or (loss) from real estate:							
a Debt-financed property					-		
b Not debt-financed property							
6 Net rental income or (loss) from personal							
property							
7 Other investment income							
8 Gain or (loss) from sales of assets other							
than inventory			18	172,351.			
9 Net income or (loss) from special events							
10 Gross profit or (loss) from sales of inventory							
11 Other revenue:							
a	_						
b	_						
c							
d	_						
e	_						
12 Subtotal. Add columns (b), (d), and (e)		(	).	221,257.	0		
13 Total. Add line 12, columns (b), (d), and (e)				13	221,257.		
(See worksheet in line 13 instructions to verify calculations.	)						

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).							
	<del></del>							
_								
-								
-								

323621 10-10-13

### Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

1	Did the or	ganization directly or indu	rectly engage in any	of the followin	g with any other organization	on described in se	ction 501(c) of		Yes	No
•		•			7, relating to political organ		0.001 00 1(0) 01			
2		from the reporting found				The control of the co				
•	(1) Cash		anon to a mononanta	olo oxompt or	gumzation of.			1a(1)		x
	(2) Other							1a(2)		X
h	Other tran							18(2)		
U		of assets to a noncharital	hle evemnt organiza	tion				16(1)		x
		nases of assets from a no								X
		il of facilities, equipment,		ngamzanon				1b(2)	-	X
		bursement arrangements						1b(3)		X
								1b(4)		X
		s or loan guarantees rmance of services or me	mbarchin ar fundrai	cina colioitatio	no			1b(5)		
_	• •		· ·	=				1b(6)		X
C		f facilities, equipment, ma	•			waya abayy the fair	r market value of the seeds o	1c	ata	
đ							r market value of the goods, or on or sharing arrangement, sh		eis,	
		s given by the reporting it			ou 1655 than ian market valt	ue ili aliy ilalisacii	on or Sharing arrangement, Si	IUW III		
a) i		(b) Amount involved			exempt organization	(d) Descripti	on of transfers, transactions, and s	nor:na na		
4).	.110	(b) Amount involved	(c) Name of		cxcmpt organization	(u) Descripti	on or transiers, transactions, and s	naring an	angeme	nts
				N/A		-				
	-									
	-					-				
	<del>-  </del> -									
					<del></del>					
			<u> </u>							
			· · · · · · · · · · · · · · · · · · ·	<del></del>						
						-	<del></del>			
		<u>.</u>	<del></del>		<del> </del>		<del></del>			
							- "			
				<del></del>						
				·						
2a		=	-		or more tax-exempt organi	zations described	_	_	_	7
		501(c) of the Code (other	•	)(3)) or in sect	ion 527?			_ Yes	LX	No
b	If "Yes," co	omplete the following scho								
		(a) Name of org	janization		(b) Type of organization	_	(c) Description of relationsh	ıp		
		N/A								
					-					
					<u>-</u> .					
	1				<u> </u>	<u> </u>	<del></del>			
٠.		penalties of perjury, I declare	that I have examined to noiste. Declaration of p	s return, includin eparer (other thar	g accompanying schedules and n taxpayer) is based on all inform	statements, and to the statements of which prepare	I May	the IRS o	iscuss t	his
Si	gn   📆			opa a (0aa	XC117114	r <b>k</b>	show	n with the	prepare (see inst	tr)?
П	ere	V Oliv	<u> </u>		1,0110	SECRE	TARY	Yes		No
	Sign	nature of officer or trusted			Date	Title	<u></u>			
		Print/Type preparer's na		Preparer's si	emeture	Date	Check if PTIN			
		JAMES A. H	UGUELET,		CPA		self- employed			
Pa		CPA, EA		1/1/2		05/09/14		180		
	eparer	Firm's name ► ABR	AHAM & GA	NEY,	P.C.		Firm's EIN ► 38-27	711	17	
Us	se Only				<del></del>					
		Firm's address ▶ 10	8 SPRING	ST.						
		ST	. JOHNS,	MI 488	79		Phone no. 989-22	4 - 6	836	
	<del></del>			<u></u>	<del></del>		For	m <b>99</b> 0	-PF	(2013)

323622 10-10-1

### Schedule B (Form 990, 990-EZ, or 990-PE)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.
Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2013

Name of the organization **Employer identification number** HERE TO HELP FOUNDATION 20-8057969 Organization type (check one). Filers of: Section: 501(c)( Form 990 or 990-EZ ) (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 Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization

Employer identification number

### HERE TO HELP FOUNDATION

20-8057969

(d) Type of contribution
Type of containation
Person X Payroll  Noncash (Complete Part II for noncash contributions)
(d) Type of contribution
Person Payroll Noncash (Complete Part II for noncash contributions)
(d) Type of contribution
Person Payroll Noncash (Complete Part II for noncash contributions)
(d) Type of contribution
Person Payroll Noncash (Complete Part II for noncash contributions.)
(d) Type of contribution
Person Payroll Noncash (Complete Part II for noncash contributions)
(d) Type of contribution
Person Payroll Noncash (Complete Part II for noncash contributions)  Form 990, 990-EZ, or 990-PF) (2013)

17330509 766504 RL-4180

Name of organization

Employer identification number

### HERE TO HELP FOUNDATION

20-8057969

art II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			<del></del>
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<b>\$</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<b>\$</b>	
(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

323454 10-24-13

Part IV   Capital Gains and Lo	sses for Tax on Investment Income				
	d describe the kind(s) of property so rick warehouse; or common stock, 2		(b) How acquired P - Purchase	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<del></del>	<del></del>		U - Donation	(1110.1, day, y1.7	(mo., day, yr.)
1a UBS FINANCIAL	#16474-COVERED	DED	P	-	
C UBS FINANCIAL		KED	P		·
	#16474-COVERED	PPD	P P		
e UBS FINANCIAL		(ED	P		
	#16477-COVERED	PED	P		
g UBS FINANCIAL		KED	P P		
	#16477-NON-COVER	PED	P		
	#16477-UNDETERMI		P		
	#16478-NON-COVER		P	<del> </del>	
k	"10470 NON COVEN		<del>                                     </del>		
1		<del>-</del> -		<del> </del> ·	
<u>'</u> m		···-		<del>   </del>	
n		<del></del>		<del> </del>	
0	· · ·	<del></del>			
	(f) Depreciation allowed	(g) Cost or other basis		A Coup or (loss)	
(e) Gross sales price	(or allowable)	plus expense of sale		) Gain or (loss) plus (f) minus (g)	
18,088.	,,	15,325.		(9)	2,763.
133,735.		137,513.			$\frac{2,763}{3,778}$
19,568.		14,642.	<del></del>		4,926.
497,369.		367,133.		<del></del> .	$\frac{4,926}{130,236}$
90,959.		92,025.			
122,234.		122,578.			<1,066.
0.4.000		70,925.		<del></del>	<344. 23,373.
94,298. 118,357.		109,411.	<del></del>		
9,274.		2,233.			8,946.
6,275.		6,021.			7,041.
		6,021.		<del></del>	254.
<u> </u>					
1					
· ·		· · · · · · · · · · · · · · · · · · ·	<del></del>	<del></del> -	
<u>, , , , , , , , , , , , , , , , , , , </u>				<del></del>	
·	ng gain in column (h) and owned by	the foundation on 12/31/69	(1) 1 or	con (from onl (h))	
Complete only for accosts offering	(j) Adjusted basis	(k) Excess of col. (i)		sses (from col. (h)) of col. (h) gaın over	col. (k).
(i) F.M.V. as of 12/31/69	as of 12/31/69	over col. (j), if any		ot less than "-0-")	
			<del></del>		2,763.
		<del></del>			<3,778.
					4,926.
		<del>     </del>		<del></del>	4,926. 130,236.
		<del>                                     </del>		<del></del> .	<1,066
		<del></del>		<del></del>	<344.
<del> </del>		<del>                                     </del>	·		23,373.
		<del> </del>	<u> </u>		8,946.
-			· · · · · · · · · · · · · · · · · · ·		7,041.
<del></del>		<del>                                     </del>			254.
		<del></del>			
<del></del>		<del> </del>	<del> </del>	<del></del>	
1		<del> </del>			<del>-</del>
			<del></del>		
		<del>                                     </del>			
<u> </u>		·		· -	
Constal gain not income or fact or	If gain, also ente	r in Part I, line 7 0-" in Part I, line 7			170 254
Capital gain net income or (net ca	I If (loss), enter "-(	0-" in Part I, line 7	<del> </del>		<u>172,351.</u>
	ss) as defined in sections 1222(5) ar	nd (6):			
If gain, also enter in Part I, line 8,		<b>P</b>	1		
If (loss), enter "-0-" in Part I, line 8	<u> </u>		1	N/A	

FORM 990-PF	INTERES	T ON	SAVIN	GS AN	D TEMPOR	ARY	CASH	INVESTM	IENTS	STATEMENT	1
SOURCE					(A) REVENUE PER BOOK		NET	(B) INVESTM INCOME	IENT	(C) ADJUSTED NET INCOM	
UBS FINANCIAL					6,9	30.		6,9	30.		
UBS FINANCIAL GOVT. OBLIGATE UBS FINANCIAL UBS FINANCIAL	IONS #16477				9,3 7	15. 34.		-	15. 34.		
GOVT. OBLIGATION OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF THE CONTROL OF T	IONS	-0.5	•		3 2,1	27. 47.		-	27. 47.		
TOTAL TO PART	I, LIN	E 3			19,4	53.		19,4	53.		
FORM 990-PF		DIV	IDENDS	AND	INTEREST	FRO	OM SEC	CURITIES		STATEMENT	2
SOURCE			OSS OUNT	G	PITAL AINS IDENDS		(A) EVENUI R BOOK		(B) INVEST		
UBS FINANCIAL #16474 UBS FINANCIAL		2	1,781.		0.		21,78	 B1.	21,781		
#16477			7,566.		0.		7,56	56.	7,566	•	
UBS FINANCIAL #16478			106.		0.		10	06.	106	•	

0.

29,453.

29,453.

29,453.

TO PART I, LINE 4

FORM 99	0-PF		GAIN OR	(LOSS)	FROM	SALE	OF	ASSETS		STA'	reme:	NT 3
		PROPERTY						MANNER ACQUIRED		ATE UIRED	DAT	E SOLD
UBS FIN	ANCIAL #	#16474-cc	OVERED									
		3)		C)	<b>537</b>	(D)	0.77	(E)			(F)	
		OSS PRICE		T OR BASIS	EX	PENSE SALE	OF.	DEPREC	•	GAIN	OR I	LOSS
		18,088.		15,325	•		0.		0.		:	2,763.
DESCRIP	(A) TION OF	PROPERTY	Z.					MANNER ACQUIRED		ATE UIRED	DAT	E SOLD
UBS FIN #16474-	ANCIAL NON-COVE	ERED										
		3)		C)		(D)		(E)			(F)	
	GRO SALES	OSS PRICE		T OR BASIS	EX	PENSE SALE	OF	DEPREC	•	GAIN	OR I	LOSS
	1	133,735.		137,513	•		0.		0.		<:	3,778.
DESCRIP	(A) TION OF	PROPERTY	Ž.					MANNER ACQUIRED		ATE UIRED	DATI	E SOLD
UBS FIN	ANCIAL #	#16474-C0	 OVERED									-
	•	3)		C)		(D)		(E)			(F)	
		OSS PRICE		T OR BASIS	EX	PENSE SALE	OF	DEPREC	•	GAIN	OR 1	LOSS
		19,568.		14,642	•		0.	-	0.		-	4,926.

DESCRIP	(A) TION OF PROPERTY			MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
UBS FIN #16474-	ANCIAL NON-COVERED	_	•			
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC	GATN	(F) OR LOSS
	497,369.	367,133.	0.		0.	130,236.
DESCRIP	(A) TION OF PROPERTY	_		MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
UBS FIN	ANCIAL #16477-CO	VERED				
	(B) GROSS	(C) COST OR	(D) EXPENSE OF	(E)		(F)
	SALES PRICE	OTHER BASIS	SALE	DEPREC.	GAIN	OR LOSS
	90,959.	92,025.	0.		0.	<1,066.>
DESCRIP	(A) TION OF PROPERTY			MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
UBS FIN	ANCIAL NON-COVERED	_	•			
	(B)	(C)	(D)	(E)		(F)
	GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC.	GAIN	OR LOSS
•	122,234.	122,578.	0.		0.	<344.>

(A) DESCRIPTION OF PROPERT	Y		MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
UBS FINANCIAL #16477-C	OVERED	•	<del></del>		
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC.	GAIN	(F) OR LOSS
94,298.	70,925.	0.	· <del></del>	0.	23,373.
(A) DESCRIPTION OF PROPERT	Y		MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
UBS FINANCIAL #16477-NON-COVERED	<del></del>	•			
(B) GROSS	(C) COST OR	(D) EXPENSE OF	(E)		(F)
SALES PRICE	OTHER BASIS	SALE	DEPREC.	GAIN	OR LOSS
118,357.	109,411.	0.		0.	8,946.
(A) DESCRIPTION OF PROPERT	Y		MANNER ACQUIRED	DATE ACQUIRED	DATE SOLD
UBS FINANCIAL #16477-UNDETERMINED		•	<del></del> -		
(B)	(C)	(D)	(E)		(F)
GROSS SALES PRICE	COST OR OTHER BASIS	EXPENSE OF SALE	DEPREC.	GAIN	OR LOSS

(A) DESCRIPTION OF PROPERTY			MANNER ACQUIRED	DATE ACQUIRED	DATE	SOLD
UBS FINANCIAL #16478-NON-COVERED	_					
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC	. GAIN	(F)	SS
6,275.	6,021.	0	•	0.	-	254.
(A) DESCRIPTION OF PROPERTY			MANNER ACQUIRED PURCHASED	DATE ACQUIRED	DATE	SOLD
(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	(E) DEPREC	. GAIN	(F)	SS
0.	0.	0	•	0.		0.
NET GAIN OR LOSS FROM S	ALE OF ASSETS				172,	351.
CAPITAL GAINS DIVIDENDS	FROM PART IV					0.
TOTAL TO FORM 990-PF, P	ART I, LINE 6A				172,	351.
FORM 990-PF	ACCOUN	TING FEES		STA	PEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOK		JUCA -TE	C) USTED ( INCOME	(D) CHARIT PURPO	ABLE
TAX & ACCOUNTING FEES	2,00	0. 1,	000.		1,	000.
TO FORM 990-PF, PG 1, L	N 16B 2,00	0. 1,	000.		1,	000.

DESCRIPTION	FORM 990-PF	OTHER PROFES	SIONAL FEES	S'	TATEMENT 5
UBS ADVISOR FEES #16478	DESCRIPTION	<b>EXPENSES</b>	NET INVEST-	ADJUSTED	(D) CHARITABLE PURPOSES
FORM 990-PF  TAXES  (A)  (B)  EXPENSES  NET INVEST- PER BOOKS  MENT INCOME  FOREIGN TAX-UBS #16474  FEDERAL EXCISE TAX  MICHIGAN ANNUAL REPORT FOREIGN TAX-UBS #16477  TO FORM 990-PF, PG 1, LN 18  (A)  EXPENSES  FORM 990-PF  OTHER EXPENSES  OTHER EXPENSES  TATEMENT  (A)  (B)  (C)  CHARITAI  PURPOSI  (A)  (B)  (C)  CHARITAI  PURPOSI  (A)  (B)  (C)  (D)  (D)  (D)  (D)  (D)  (D)  (D	UBS ADVISOR FEES #16477	5,601.	5,601.		0. 0. 0.
CA   CB   CC   CD	TO FORM 990-PF, PG 1, LN 16C	22,099.	22,099.		0.
EXPENSES   NET INVEST   ADJUSTED   CHARITAI	FORM 990-PF	TAX	ES	S'	FATEMENT 6
### FEDERAL EXCISE TAX   945.   945.   945.   MICHIGAN ANNUAL REPORT   20.   0.   7.   11.	DESCRIPTION	<b>EXPENSES</b>	NET INVEST-	ADJUSTED	(D) CHARITABLE PURPOSES
Ca	FEDERAL EXCISE TAX MICHIGAN ANNUAL REPORT	9 <b>4</b> 5. 20.	945. 0.		0. 0. 20. 0.
(A)	TO FORM 990-PF, PG 1, LN 18	1,004.	984.		20.
DESCRIPTION         EXPENSES PER BOOKS         NET INVEST-NET INCOME         ADJUSTED PURPOSE         CHARITAE PURPOSE           TELEPHONE WEBSITE         2,700.         0.         2,700.         2,700.         0.         6,267.         0.         6,267.         0.         6,267.         0.         20.         0.         20.         0.	FORM 990-PF	OTHER E	XPENSES	S	PATEMENT 7
WEBSITE         MAINTENANCE/CMOMPUTER       6,267.       0.       6,26         POSTAGE/UPS       205.       0.       20         OFFICE SUPPLIES       1,468.       0.       1,46         DUES       305.       0.       30         INTEREST-UBS #16478       11.       11.       11.	DESCRIPTION	<b>EXPENSES</b>	NET INVEST-	ADJUSTED	(D) CHARITABLE PURPOSES
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	TO FORM 990-PF, PG 1, LN 23	10,956.	11.		10,945.

FORM 990-PF	U.S.	AND STA	TE/CITY GOV	ERNMENT	OBLIGATIONS	STATEMENT	8
DESCRIPTION			U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKE	r
UBS #16477 UBS #16474			X		116,067. 572,213.	115,1 571,6	
TOTAL U.S. GOVER	NMENT OB	LIGATIO	ns	-	688,280.	686,7	31.
TOTAL STATE AND	MUNICIPA	L GOVER	NMENT OBLIG	SATIONS			
TOTAL TO FORM 99	0-PF, PA	RT II,	LINE 10A	=	688,280.	686,7	31.
FORM 990-PF			CORPORATE	STOCK		STATEMENT	9
DESCRIPTION					BOOK VALUE	FAIR MARKE	r
UBS #16477 UBS #16474				-	270,201. 511,156.	384,60 896,1	
TOTAL TO FORM 99	O-PF, PA	RT II,	LINE 10B	=	781,357.	1,280,8	52.
FORM 990-PF			CORPORATE	BONDS		STATEMENT	10
DESCRIPTION					BOOK VALUE	FAIR MARKE	r
UBS #16477 UBS #16478				_	95,837. 35.	94,3	95. 34.
UBS #16478				_	25,227.	30,5	
TOTAL TO FORM 99	0-PF, PA	RT II,	LINE 10C	_	121,099.	124,9	38.

## HERE TO HELP FOUNDATION FEIN #20-8057969

### ATTACHMENT TO FORM 990-PF PAGE 10, PART XV, LINE 2b, APPLICATION FOR THE CALENDAR YEAR ENDED DECEMBER 31, 2013

### **APPLICATION**

### **READ BEFORE APPLYING:**

### INDIVIDUALS MAY NOT APPLY ON THEIR OWN BEHALF ONLY QUALIFIED ADVOCATES MAY APPLY:

Click here for the IRS approved definition.

**GENERAL APPLICANT QUALIFICATIONS:** Please do not apply unless the applicant will be financially self-sufficient after receiving assistance from the Foundation. Applicants must live in Wayne or Oakland County ONLY.

**USED VEHICLES:** The Foundation can assist with the purchase of a used vehicle for individuals to get to and from employment; and are presently employed full time, which is defined as a minimum of 35 hours per week. All used vehicles are purchased through Volunteers of America in Pontiac. The maximum amount provided is \$2500.00.

**CAR REPAIRS:** \$800.00 maximum. One does not need to be employed full time to qualify for a car repair. The Foundation is prohibited from assisting with the purchase of tires. A copy of the car registration will be required.

**RENT:** \$1,000 maximum. Must establish that applicant can pay rent in the future and their utility bill is not in arrears. If amount owed is above \$1000.00, documentation that this additional amount will be paid by another source is required. **Do not proceed with the application if this can't be provided now.** 

**UTILITY BILLS:** \$500.00 maximum. If amount owed is above \$500.00, we require documentation that this additional amount will be paid by another source. **Do not proceed with the application if this can't be provided now.** Documentation of a reply from a State Emergency Relief (SER) application is also required.

**FURNITURE/APPLIANCES:** \$750.00 maximum. Applicant must be moving from a domestic violence or homeless shelter situation or where furniture/appliances were destroyed by fire. Exceptions to this rule may include where the individual is working or disabled and there is a valid reason for their inability to afford the requested furniture/appliances. Foundation cannot assist in every situation where an individual moves and is in need of furniture/appliances.All furniture/appliances are purchased through Al's Appliances and Furniture.

REQUESTS WE CANNOT FUND: Please click here for a list of those items.

**DENIAL OF DHS ASSISTANCE:** Since Here to Help is designed to be the last resort for assistance, where it is applicable we will require documentation of denial from DHS including State Emergency Relief (SER).

PLEASE DO NOT SUBMIT APPLICATION WITHOUT READING ALL INFORMATION ABOVE. APPLICATIONS NOT ADHERING TO THE ABOVE REQUIREMENTS WILL BE AUTOMATICALLY DELETED

PLEASE NOTE THAT DOCUMENTS SUPPORTING FACTS IN THE APPLICATION ARE REQUIRED TO BE FAXED OR EMAILED AT THE TIME THE APPLICATION IS SUBMITTED. REQUIRED DOCUMENTS ARE NOTED BELOW IN THE APPLICATION.

Please state request

(Foundation is a one time/one request resource)

	<u></u>
Amount requested	
Information Regarding (	Qualified Advocate Making Request
First name of Advocate	
Last name of Advocate	
Profession/Occupation	
Employer	
Work phone number	
Work email address	
Work street address	
City	photo har also who also recover a factor of the transport is a self-of the bod and hard to a minimum to
State	Michigan ▼
Zip	
How do you know the individual on whose behalf you are requesting	
a grant? Please fully provide the financ	ial circumstances for the individual, including all sources
	ne for all members of the household.
 	<u>, – 1</u>
 Please state what organization	سند ns/agencies have previously been contacted for assistance
and how other means of help a	are unavailable. Please state whether a request has been SER) and the response provided.
	<b>!</b> 1
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productive use (i.e	lease state in detail how the applicant puts his/her daily time to le. taking classes, learning a skill, volunteering etc.). Documentation is the daily productivity. If working, please type the answer: "Not
	<b>~</b>
4	<u> </u>
DETAILED INFORM ndividual and how	e grant will allow the individual to move forward. Please provide MATION regarding what caused the present circumstances for the w the individual will be self-sufficient in the future if help is provided by his answer needs to be extremely thorough or the Application will not
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Here to Help Foundation

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### HERE TO HELP FOUNDATION FEIN #20-8057969

### ATTACHMENT TO FORM 990-PF

## PAGE 10, PART XV, LINE 2d, RESTRICTIONS OR LIMITATIONS FOR THE CALENDAR YEAR ENDED DECEMBER 31, 2013

### **FUNDING GUIDELINES**

#### **GENERAL INFORMATION:**

The IRS has granted charitable status to the Foundation to assist in emergency situations with temporarily impoverished individuals who lack the basic necessities of life. We are able to help such individuals who, through no fault of their own, are facing an emergency situation and with the Foundation's assistance they will be able to move forward and be self-sufficient. There must be a very strong likelihood that if the Foundation provides assistance the individual will not need help in the foreseeable future and will be independent and able to meet all their monthly economic obligations.

The Here to Help Foundation provides one-time grants to such individuals with identifiable and specific needs and where no other means of assistance are available through existing agencies or organizations (as the Foundation is a resource of last resort). The requested grant cannot be awarded if it will simply be a temporary solution and the individual will have a similar need in the near future. We'd love to help everyone but the IRS has specific requirements relative to assisting individuals directly and we must abide by those restrictions.

### **METHOD OF RECEIVING REQUESTS FOR GRANTS:**

Grants awarded by the Here to Help Foundation arise from unsolicited requests sent to us via our on-line application form from a <u>qualified advocate</u>.

#### GEOGRAPHIC AREAS WHERE WE PROVIDE HELP:

Grants are provided within Southeastern Michigan, specifically the counties of Wayne and Oakland.

### **GENERAL REQUIREMENTS FOR APPLICANTS:**

### **ELIGIBLE GRANTEES:**

- Eligible grantees include those impacted by circumstances in which otherwise financially secure individuals become "temporarily impoverished" due to events occurring beyond their control.
- To assure the effectiveness of any grants, individuals in need would be subject to the following general guidelines:
  - a. A clear demonstration of need. Verification of economic situation/financial resources will be required.
  - Defined objectives for what the grant would provide, including how it would assist
    the individual in moving forward and, ultimately, achieving a successful outcome and
    more enhanced life.
  - c. Evidence of the ability to properly utilize the funds.

### **EXAMPLES OF HELP PROVIDED:**

Please visit our Recent Grants page to see examples of some of the types of grants that the Here to

Help Foundation has provided. For any questions, please email <a href="mailto:info@heretohelpfoundation.org">info@heretohelpfoundation.org</a>.

### THE FOUNDATION CANNOT GRANT FOR THE FOLLOWING:

- 1. Scholarships/Tuition/Student Loans/Summer Camps
- 2. Property Tax Bills
- 3. Funeral Expenses
- 4. Medical and Dental Expenses
- 5. Wheelchair Associated Expenses and Wheelchair Ramps
- 6. Driver Responsibility Fees, Legal Fees, Traffic Tickets, Probation Related Restitution
- 7. Major Home Repairs
- 8. Outstanding Car Loans

Here to Help Foundation

**Privacy Notice** 

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### HERE TO HELP FOUNDATION FEIN #20-8057969

# ATTACHMENT TO FORM 990-PF PAGE 11, PART XV, LINE 3a, GRANTS PAID OR THE CALENDAR VEAR ENDED DECEMBER 31

L N		11, PART XV, LII LENDAR YEAR I	NE 3a, GRANTS PAID ENDED DECEMBER 31, 2013
FORM OF PAYMENT credit card check #633 check #635 check #card	credit card credit card credit card credit card credit card	credit card credit card credit card credit card credit card credit card credit card	credit card credit card credit card credit card credit card credit card credit card credit card credit card check#641 credit card check#642 credit card check#643 check#644 credit card credit card
DATE VENDOR 1/2/2013 DTE 1/2/2013 United Auto Repair 1/3/2013 City of Inkster Water 1/8/2013 Tigers Auto Medic 1/10/2013 VOA		VOA VOA VOA Lake Orion Master VOA Westport Property Motor Medics	
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ORGANIZATION Traveler's Aid Society Development Centers Starfish Family Service Sickle Cell Disease Association Michigan Rehabilitation Service	VA Hospital Spectrum Child and Family Serv Commutity Network Services New Center Community Health DHS Starfish Family Service	Cass Community Social Service VA Hospital Matrix Seasons Hospice St. Vincent del Paul Team Mental Health New Center Community Health Easter Seals	Spectrum Child and Family Serv Looking for My Sister South Oakland Shelter Spectrum Child and Family Serv Team Mental Health D-DHWP/HAPI Housing Program Neighborhood Services Org D-DHWP/HAPI Housing Program Neighborhood Services Org Neighborhood Services Org Neighborhood Services Org Sickle Cell Disease Association Jail and Outreach Ministry D-DHWP/HAPI Housing Program Matrix Michigan Works Operation Get Down TWW Employment Solutions Children's Center Commutity Network Services Starfish Family Service Detroit Recovery Project Small Treasure Maternal Heatith Dad Foundation for the Deaf/Hard

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\$700.00 \$700.00 \$700.00 \$725.00 \$700.00 \$700.00 \$700.00 \$700.00 \$725.0	-
Ronald Griffith Gregory McPherson Jeremy Gee Felix Poole Constance Ross Patricia Jones Tyeissa Jones Tyeissa Jones Justina Johnson Shaun Griffin Angela Colon Mistri Devose Jay Thomas David Riedel Norma Tomlinson Felicia Cash Gerald Whigman Nikki Gallimore Christina Cole Alvin Strickland Damien Benson Yashana Zamora Latonya Herring Brooke Kirby Laurie Turner Joseph Judith Jamesha Williams Elaine Hoffman James Mitchell Sherri Vanderven James Green David Hinton LaDonner Downer Rochelle West Weathersby Harris Wilson Brandi Hardiman Ebony Real Robert Branch Tiffany Collins Thomas Kennedy Charisma Harris William Ferrell	
Neighborhood Services Org Cmmunity Living Services D-DHWP/HAPI Housing Program COTS Neighborhood Services Org COTS Common Ground Spectrum Child and Family Serv Westside Mothers Commutity Network Services Commutity Network Services Commutity Network Services Detroit East Matrix Looking for My Sister Michigan Works Oak Park Career Center Bethel Housig Counseling Agency Detroit Public Schools Focus Hope CCRT Common Ground Training and Treatment Innovat Starfish Family Service Southfield Career Center Training and Treatment Innovat Starfish Family Service Spectrum Child and Family Serv Parkview Place Apartments Orchards Childrens Services Spectrum Child and Family Serv State of Michigan Starfish Family Service Spectrum Child and Family Serv State of Michigan Spectrum Child and Family Serv State of Michigan Spectrum Child and Family Serv Starfish Family Service COTS Neighborhood Services Org	

Neighborhood Services Org Neighborhood Services Org D-DHWP/HAPI Housing Program Hospice of Michigan	Kim Friday Curtis Scales Pinky Qualls Laura Thomas	\$725.00 \$700.00 \$200.00 \$750.00		
Michigan Rehabilitation Service CCRT	Karı Stevens Yolanda Burnett	\$957.00 \$500.00		check#773 check#786
	Bridgett Goodnight	\$500.00	10/2/2013 DTE	credit card
	Nancy LaClair	\$500,00		check#788
Michigan Rehabilitation Service	Darron Lenoar	\$2,500.00	-	credit card
	Deborah Turner	\$2,192.03	10/13/2013 VOA	credit card
New Center Community Health	Felicia Levy	\$2,385.03		credit card
	Shantell Henderson	\$2,500.00		credit card
Spectrum Child and Family Serv	Telicia Norton	\$2,160.53	_	credit card
Starfish Family Service	Melony Boss	\$674.00		check#789
Lincoln Behavioral Services	Yasmeen Keith	\$2,271.53		credit card
Romulus Tower Apartments	Raymond Pierce	\$424.04		credit card
Commutity Network Services	Mathilde Holmes	\$470.00		check#790
The Guidance Center	Shantell Smith	\$1,000.00		check#791
Rochester Area Neighborhood Area	Laurie Delaney	\$2,271.53		credit card
	Mark Chateauvert	\$800.00		credit card
	Blake Long	\$479.00		credit card
	Frenchy Jones	\$2,500.00	_	credit card
The Guidance Center	Sara Gonzalez	\$319.00		check#792
Starfish Family Service	Richard Mong	\$438.38		check#793
Team Mental Health	Tina Wilson	\$800.00		credit card
Job Link Service Center	Jeraldine Johnson	\$2,500.00		credit card
	Halid Alshara	\$1,000.00		check#794
	Stacie Wicker	\$2,500.00		credit card
Spectrum Child and Family Serv	Tamika Hood	\$2,500.00	_	credit card
	Diana King	\$991.56		check#795
Starfish Family Service	Kerri Romanko	\$563.78	10/31/2013 US Bank	check#796
Commutity Network Services	Amy McLain	\$2,500.00		credit card
	Daniel Berry	\$2,430.53	-	credit card
Neighborhood Services Org	Donna Garcia	\$190.00	10/2/2013 Al's Appliance and Furniture	check#797
D-DHWP/HAPI Housing Program	Jerome Scruggs	\$605.00	Al's Appliance and	
D-DHWP/HAPI Housing Program	Anthony Stewart	\$725.00	10/9/2013 Al's Appliance and Furniture	
Neighborhood Services Org	Feyisitan Idowu	\$725.00	Al's Appliance and	
	Francine Leggerr	\$725.00	Al's Appliance and	
D-DHWP/HAPI Housing Program	Reginald Denard	\$660.00	Al's Appliance and	
	Kim Manning	\$680.00	Al's Appliance and	
	Foresteen Hood	\$190.00		:
Spectrum Child and Family Serv	Renee Yulanda Holman	\$2,500.00	2013	credit card
New Center Community Health	Asia Usry	\$2,500.00	11/1/2013 VOA	credit card

Rochester Area Neighborhood Area Renaissance Head Start The Guidance Center Heartline Team Mental Health DHS Women in Touch VOID State of Michigan Spectrum Child and Family Serv Community Care Services Spectrum Child and Family Serv Community Care Services Northeast Guidance Center Peace Home Health Services Matrix Easter Seals Training and Treatment Innovat Wyandotte Public Schools Development Centers Southwest Solution Haven Easter Seals Spectrum Child and Family Serv Easter Seals Detroit Employment Solutions Neighborhood Services Org Hospice of Michigan New Center Community Health Neighborhood Services Org Team Mental Health	Brenda Rudolph Dontrell Jones Michael Garcia Joy Bennett Janet Blakemore Willie Burrell Jamal Burns VOID Daniel Berry Maxine Lockard Debra Needham Kahil Davis Rogenia Neal Jarita Nolen-Moss Elaina McCrimon Caroline Robinson Doreen Pannett Veany Gonzalez Sheryl Tillmon Jamel Foster Natasha Ellis Denise Hall Neiketa Keith Johnella Fitzpatrick Shankquaneik Powell Richard Wilcox Dennis Joiner Willie Dorsey Ralph Oden Sylvia Stribling Geneva Daniel	\$2,500.00 \$2,500.00 \$2,500.00 \$2,500.00 \$2,500.00 \$2,305.03 \$2,305.03 \$2,305.03 \$2,305.03 \$2,305.03 \$2,305.03 \$2,305.03 \$2,305.00 \$2,305.00 \$2,305.00 \$2,305.00 \$2,305.00 \$2,300.00 \$2,300.00 \$2,500.00 \$2,500.00 \$2,500.00 \$2,500.00 \$325.00 \$190.00 \$190.00 \$190.00	11/1/2013 Rochester Hills Tire and Service credit card 11/4/2013 VOA 11/8/2013 Elite Car Care credit card 11/8/2013 VOA 11/8/2013 VOA credit card 11/8/2013 VOA credit card 11/8/2013 VOA credit card 11/8/2013 VOA credit card 11/15/2013 VOA credit card 11/20/2013 VOA credit card 11/22/2013 VOA credit card 11/22/2013 WOA credit card 11/22/2013 WIllage Squire Apartments credit card 11/22/2013 WIRD Marathon Petro credit card 11/22/2013 WOA credit card 11/22/2013 WISPECISION Tune Auto credit card 11/22/2013 WISPECISION Tune Auto credit card 11/22/2013 Al's Appliance and Furniture credit card 11/22/2013 Al's Appliance and Furnitu	credit card credit
Spectrum Child and Family Serv	Jay'Lynn Albert	\$2,470.53	-	credit card
Michigan Works Fellowship Community Outreach	Sirenea Gulley Charvae Jones	\$800.00 \$2,500.00		credit card credit card
DHS Oakland Schools	Treasure Randall Michelle Rodgers	\$2,500.00 \$850.00		credit card check#804
Michigan Rehabilitation Service St. Vincent del Paul Michigan Behabilitation Service	Larry Nesbit Jennifer Day Tecola Pincknev	\$600.00 \$669.00 \$671.00	12/11/2013 Michigan Auto Repair Center 12/11/2013 Tuffy Auto Center 12/11/2013 C.A.R.S Automotive	credit card credit card credit card
Prichigali Reliabilitationi Selvice Orchards Childrens Services Team Mental Health	Shannon Rogers Antonio Williams	\$500.00 \$2,500.00		check#805 credit card
Matrix Disability Network	Regina Marshall Edireka Davis	\$2,500.00 \$428.34	12/13/2013 VOA 12/16/2013 Superior Properties	credit card check#806