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Form **990-PF**Department of the Treasury

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.

2013
Open to Public Inspection

Internal Revenue Service For calendar year 2013 or tax year beginning and ending Name of foundation A Employer identification number METRO HEALTH FOUNDATION 38-2100939 Number and street (or P O box number if mail is not delivered to street address) Room/suite **B** Telephone number 333 W FORT STREET 1370 (313)965-4220 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here DETROIT, MI 48226 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test check here and attach computation Address change Name change H Check type of organization: X Section 501(c)(3) exempt private foundation 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: __ Cash X 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 7,341,388. (Part I, column (d) must be on cash basis) ▶\$ Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net (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 125,947 Contributions, gifts, grants, etc., received N/A Check if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 3 159,074 159,074 STATEMENT 4 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 314,332 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 8a 2<u>,394,503</u>. 314,332 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications CETVED

Gross sales less returns CETVED RS-OBC c Gross profit or (loss AY 19 SCANINED 11 Other income 1,676 1,676 STATEMENT Total. Add lines 1 through 1 601,029. 475.082. 87,462 17,492. 69,970. 32,192 6,438. Other employee salaries and wages <u>25,754.</u> Pension plans, employee benefits 40,374 8,075. 32,299. STMT 3 <u>6,083</u>. 3,042 16a Legal fees 2,326. STMT 13,050 6,525 **b** Accounting fees 6,525. c Other professional fees Administrative 17 Interest 37,731 STMT 5 0 0. 18 Taxes 19 Depreciation and depletion 18,056 4,576 13,480. 20 Occupancy 21 Travel, conferences, and meetings 7,861 ,965. 4,125. 22 Printing and publications 736 368 368. STMT 6 55,074 40,940 23 Other expenses 12,862. Operating 24 Total operating and administrative expenses. Add lines 13 through 23 298,619 89,421 167,709. 25 Contributions, gifts, grants paid 88,402 139,610. 26 Total expenses and disbursements. 387,021 89,421 Add lines 24 and 25 307,319. 27 Subtract line 26 from line 12: 2 Excess of revenue over expenses and disbursements 214,008 385,661 b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) N/A

323501 10-10-13 LHA For Paperwork Reduction Act Notice, see instructions. Form **990-PF** (2013)

		00-PF (2013) METRO HEALTH FOUNDATION		-2100939 Page			
Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only			Beginning of year	End of			
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	248,582.	611,461.	611,461.		
	3	Accounts receivable ► 17,323.	10 541	45.000	4.7.000		
		Less: allowance for doubtful accounts	18,741.	17,323.	17,323.		
	4	Pledges receivable -					
	_ ا	Less: allowance for doubtful accounts					
	1 [Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
	,	disqualified persons Other notes and loans receivable					
	′	Less: allowance for doubtful accounts					
co.	R	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges	390.				
As	_	Investments - U.S. and state government obligations			 -		
		Investments - corporate stock STMT 8	4,303,314.	4.974.453.	4,974,453.		
		Investments - corporate bonds STMT 9	1,732,387.	1,738,151.			
	11	Investments - land, buildings, and equipment basis					
		Less accumulated depreciation					
	12	Investments - mortgage loans					
	13	Investments - other					
	14	Land, buildings, and equipment: basis ▶					
		Less accumulated depreciation					
		Other assets (describe ► STATEMENT 10)	1,130.	0.	0.		
	16	Total assets (to be completed by all filers - see the					
_	-	instructions. Also, see page 1, item 1)	6,304,544.	7,341,388.	7,341,388.		
		Accounts payable and accrued expenses	614.	6,124.			
	18	Grants payable	95,250.	48,500.			
Liabilities	19	Deferred revenue					
Ē	20	Loans from officers, directors, trustees, and other disqualified persons					
Ë	21	Mortgages and other notes payable Other liabilities (describe ► STATEMENT 11)	0.	36,331.			
	**	Street madmines (describe		30,331,			
	23	Total liabilities (add lines 17 through 22)	95,864.	90,955.			
_	<u>-</u> -	Foundations that follow SFAS 117, check here	70,0020	3073031			
		and complete lines 24 through 26 and lines 30 and 31.					
ces	24	Unrestricted	6,208,680.	7,250,433.			
<u>a</u>	25	Temporarily restricted					
Ва	26	Permanently restricted					
Net Assets or Fund Balances		Foundations that do not follow SFAS 117, check here					
Ē		and complete lines 27 through 31.					
ts	27	Capital stock, trust principal, or current funds					
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
¥	29	Retained earnings, accumulated income, endowment, or other funds	6 200 600	7 250 422			
ž	30	Total net assets or fund balances	6,208,680.	7,250,433.			
	1	Total liabilities and not accept found belongs	6,304,544.	7,341,388.			
=		Total liabilities and net assets/fund balances		7,341,300			
P	art	Analysis of Changes in Net Assets or Fund Ba	alances				
1		net assets or fund balances at beginning of year - Part II, column (a), line 3	00		_		
	•	st agree with end-of-year figure reported on prior year's return)		1	6,208,680.		
		amount from Part I, line 27a			214,008.		
		r increases not included in line 2 (itemize)	SEE STA		827,745.		
		lines 1, 2, and 3		4	7,250,433.		
		eases not included in line 2 (itemize)	(L) I 00	5	7 250 422		
<u>6</u>	ıota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	umn (a), line 30	6	7,250,433.		

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Form 990-PF (2013) METRO HEALTH FOUNDATION Part IV Capital Gains and Losses for Tax on Investment Income						38-2100939 Page			Page 3		
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (b) How acquired P - Purchase D - Donation					:hase '		acquired lay, yr.)	(d) Dat (mo., d			
12	PUBLICLY TRADED	SECURITIES	S		<u> </u>		P				
_t)	 			<u> </u>						
_			 .		├				_	_	
_											
_6	(e) Gross sales price	(f) Depreciation allo		st or other basis					ain or (loss		
_	2 204 502	(or allowable)		expense of sale	4			(e) plu	s (f) minus		
_8				2,080,17	Ι.					314	<u>,332.</u>
_6									·	·	
_				 -					_		
_ <u>`</u>		-									<u> </u>
_	Complete only for assets showing	gain in column (h) and	owned by the foundation	n on 12/31/69			(1)	Gains (C	col. (h) gain	minus	
	(i) F.M.V. as of 12/31/69	(j) Adjusted basi as of 12/31/69		col. (j), if any			còl. (k), but i	not less that (from col. (n -0-) or	
_a										314	,332.
_				· -							
	<u> </u>										
e							F				
2	Capital gain net income or (net capi		also enter in Part I, line), enter -0- in Part I, line		}	2				314	,332.
3	Net short-term capital gain or (loss If gain, also enter in Part I, line 8, co		1222(5) and (6):		Ĵ						
	If (loss), enter -0- in Part I, line 8	day Castian 404	O(a) fan Dadusaa	I Tau N-4		3			N/A		
_	Part V Qualification Un						ent inco	me			
(F	or optional use by domestic private f	oundations subject to th	e section 4940(a) tax or	net investment in	come	e.)					
lf s	section 4940(d)(2) applies, leave this	part blank.									
W:	as the foundation liable for the section	n 4942 tax on the distrib	outable amount of any ve	ear in the hase ner	nd?					□ Vac	X No
	Yes," the foundation does not qualify				100						LAS NO
	Enter the appropriate amount in ea				ntries	S.					
	(a) Base period years Calendar year (or tax year beginning	ın) Adjusted qua	(b) alifying distributions	Net value of no	(c) nchai	ıtable-	use assets		Distrib (col. (b) div	(d) ution ratio ided by col.	(c))
	2012		414,256.		_6	<u>, 23</u>	4,039.				56451
_	2011		398,361.		6	,40	4,888.			.00	52196
_	2010		531,460.				1,734.				34336
	2009		364,837.				<u>5,307.</u>				<u> 53063</u>
_	2008		417,490.		<u> 7</u>	<u>,02</u>	<u>8,227.</u>	<u> </u>		.0	<u>59402</u>
2	Total of line 1, column (d)							2		. 33	35448
3	Average distribution ratio for the 5-	•	the total on line 2 by 5,	or by the number	of ye	ars					_
	the foundation has been in existence	e if less than 5 years						3_		.00	<u> 57090</u>
4	Enter the net value of noncharitable	-use assets for 2013 fro	m Part X, line 5					4		6,598	,219.
5	Multiply line 4 by line 3							5		442	,675.
6	Enter 1% of net investment income	(1% of Part I, line 27b)						6		3	857.
7	Add lines 5 and 6							7		446	<u>,532.</u>
8	Enter qualifying distributions from F	Part XII, line 4						8		307	319.
	If line 8 is equal to or greater than li See the Part VI instructions.	ne 7, check the box in Pa	art VI, line 1b, and comp	olete that part using	g a 19	% tax r	ate.				

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Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	e instru	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ 🔲 and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%		7,7	<u>13.</u>
	of Part I, line 27b			
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>
3	Add lines 1 and 2		7,7	13.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		<u>7,7</u>	<u> 13.</u>
	Credits/Payments:			
	2013 estimated tax payments and 2012 overpayment credited to 2013 6a 1,400.			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld			
	Total credits and payments. Add lines 6a through 6d		<u>1,4</u>	00.
	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		<u>6,3</u>	13.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	Enter the amount of line 10 to be: Credited to 2014 estimated tax			
	nrt VII-A Statements Regarding Activities		V	I NI -
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	<u> </u>	res	No
	any political campaign?	1a		X
	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 or			
	distributed by the foundation in connection with the activities.			
	Did the foundation file Form 1120-POL for this year? Enter the amount (if any) of tay on political expanditures (costion 4055) imposed during the years.	1c		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$\Bigsim \text{\$\text{\$\text{\$\text{\$}}}\$}\$\$\$ \$\text{\$\text{\$\text{\$0\$}}\$}\$			
	(1) On the foundation. \$ 0. (2) On foundation managers. \$ 0. Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
-	managers. > \$ 0.			
9	Has the foundation engaged in any activities that have not previously been reported to the IRS?			v
	If "Yes," attach a detailed description of the activities.	2		X
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		x
	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			
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		х
	If "Yes," attach the statement required by General Instruction T			
	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	Х	
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	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar			
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		<u>X</u>
<u> 10</u>	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X

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Pa	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?			
	If "Yes," attach statement (see instructions)	12		_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► RANDY WALAINIS Telephone no. ► (313)		<u>-42</u>	<u>20 </u>
	Located at ► 333 W FORT ST, SUITE 1370, DETROIT, MI ZIP+4 ►4	8226		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	٠.	. /₃ ►	
40	and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2013, did the foundation base on attack to a constitute or other outbooks.	<u>N</u>	/A Yes	No
10	At any time during calendar year 2013, did the foundation have an interest in or a signature or other authority over a bank,	مدا	162	
	securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 00, 22.1. If "Vec." anter the name of the foreign	16	L	_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			
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.	\top	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? Yes X No			
	(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.)			
D	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1,		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A Organizations relying on a current notice regarding disaster assistance check here	1 <u>b</u>		
	E 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?	10		х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	1.0		
_	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?			
	If "Yes," list the years \blacktriangleright ,,,			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
_	<u> </u>			
3a	1 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year? Yes X No			
D	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	3ь		
42	1 Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	- Ta		
•	had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b		Х
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Part VII-B Statements Regarding Activities for Which I	form 4720 May Be I	Required (contin	rued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	` ''		es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indir			ł	l
any voter registration drive?	•		es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section	<u> </u>			
509(a)(1), (2), or (3), or section 4940(d)(2)?			es 🗶 No		1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or		[TE]		į
the prevention of cruelty to children or animals?	#== # [== =		es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		in Regulations	37 / 3	_,	ļ
section 53.4945 or in a current notice regarding disaster assistance (see instru	•		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant?			🗀 📗		
		1/A Y	es L No		
If "Yes," attach the statement required by Regulations section 53.4945 6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •			1	
a personal benefit contract?	pay premiums on		es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	arcanal hanafit contract?	T (. –	ا ۵	v
If "Yes" to 6b, file Form 8870	ersonal benefit contract?		H	6b	<u> </u>
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		es X No	ł	
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	
Part VIII Information About Officers, Directors, Trusto		nagers Highly		70	
Paid Employees, and Contractors		ago.o, r.i.gi.i.	,		
List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans	(е	Expense ount, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	acc	ount, other lowances
		'	· ·		· · · · · ·
SEE STATEMENT 12		87,462.	9,743.	2	,142.
		-			
	-				
				ļ <u>.</u>	
Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Cooking		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	acci) Expense ount, other lowances
NONE			- Component		-
					_
					
	_				
		<u> </u>			
otal number of other employees paid over \$50,000					0

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Part VIII Information About Officers, Directors, Trustees, For Paid Employees, and Contractors (continued)	undation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none	enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 1 0
List the foundation's four largest direct charitable activities during the tax year. Include relevan number of organizations and other beneficiaries served, conferences convened, research pape	t statistical information such as the	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax y	ear on lines 1 and 2.	<u>Amount</u>
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		

Total. Add lines 1 through 3

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes;		
a		1a	6,336,820.
Ь	Average of monthly cash balances	1b	361,879.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	6,698,699.
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	1 2	0.
3	Subtract line 2 from line 1d	3	6,698,699.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	100,480.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6,598,219.
6	Minimum investment return. Enter 5% of line 5	6	329,911.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	329,911.
2a	Tax on investment income for 2013 from Part VI, line 5	- -	
b	Income tax for 2013. (This does not include the tax from Part VI.)		
c	Add lines 2a and 2b	2c	7,713.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	322,198.
4	Recoveries of amounts treated as qualifying distributions	4	598.
5	Add lines 3 and 4	5	322,796.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	322,796.
	art XII Qualifying Distributions (see instructions)		322,130.
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	307,319.
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 charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	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	307,319.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	307,319.
	Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the foundation of	malifies for	the section

Form **990-PF** (2013)

4940(e) reduction of tax in those years.

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,				
line 7				322,796.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2013:				
a From 2008 69,403.				
b From 2009 78,810.				
c From 2010 218,309.				
dFrom 2011 83,125.				
e From 2012 105,334.			i	
f Total of lines 3a through e	554,981.			
4 Qualifying distributions for 2013 from				
Part XII, line 4: ►\$ 307,319.			•	
a Applied to 2012, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0			
(Election required - see instructions)	0.			207 210
d Applied to 2013 distributable amount e Remaining amount distributed out of corpus	0.			307,319.
5 Excess distributions carryover applied to 2013	15,477.			15,477.
(If an amount appears in column (d), the same amount must be shown in column (a))	15,4//•			15,4//.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	539,504.			
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	j	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				<u> </u>
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	53,926.			
9 Excess distributions carryover to 2014	40			
Subtract lines 7 and 8 from line 6a	485,578.			
Analysis of line 9:				
a Excess from 2009 78,810.				
b Excess from 2010 218,309.				
c Excess from 2011 83,125.				
d Excess from 2012 105,334.				
e Excess from 2013				5 000 DE (0040)

Form **990-PF** (2013)

Part XIV Private Operating Fo	oundations (see ins		/II-A, question 9)	N/A	2100939 Page 1
1 a If the foundation has received a ruling or				11/ 21	
foundation, and the ruling is effective for					
b Check box to indicate whether the found		•	d in section	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	3 10 12())(0) 01	
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for		<u>, , ,</u>	<u> </u>		_
each year listed				:	
b 85% of line 2a		-		 	
c Qualifying distributions from Part XII,	-				-
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly		 	-		
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets					
` ,				 	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income				<u> </u>	
Part XV Supplementary Infor			if the foundation	n had \$5,000 or	more in assets
at any time during th	_ <u>-</u>	uctions.)	 		
1 Information Regarding Foundation	•				
a List any managers of the foundation who year (but only if they have contributed me	have contributed more t	han 2% of the total cor	itributions received by the	e foundation before the	e close of any tax
	ore than 40,000). (See Se	(1)(2)			
NONE	400/				
b List any managers of the foundation who other entity) of which the foundation has	own 10% or more of the a 10% or greater interest	stock of a corporation	(or an equally large porti	on of the ownership o	f a partnership or
NONE	J. ground mioros	-			
2 Information Regarding Contribution	on Grant Gift Loon	Sabalarahin ata D			
Check here 🕨 🔲 if the foundation on	ly makes contributions to	preselected charitable	e organizations and does i	not accept unsolicited	requests for funds. If
the foundation makes gifts, grants, etc. (s					, and d.
a The name, address, and telephone numb	er or e-mail address of th	e person to whom app	lications should be addre	ssed:	
SEE STATEMENT 13					
b The form in which applications should be	submitted and informati	on and materials they s	should include:		
c Any submission deadlines:					-
d Any restrictions or limitations on awards,	such as by geographical	areas, charitable fields	kinds of institutions or	other factors:	
,	J		, I. mondiono, ui		
			·		

3b		48 500	
	F	orm 990-PF (2013)	

Total

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

Enter gross amounts unless otherwise indicated.	Unrelated business income		Exclud	ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	code		code	741104111	
a					
b	<u></u>				
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash			1		
investments					
4 Dividends and interest from securities			14	150 074	
			14	159,074.	
5 Net rental income or (loss) from real estate:			1		
a Debt-financed property					
b Not debt-financed property			 		<u> </u>
6 Net rental income or (loss) from personal					
property			ll		
7 Other investment income			14	1,676.	
8 Gain or (loss) from sales of assets other					
than inventory			18	314,332.	
9 Net income or (loss) from special events			<u> </u>		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	 		1		
a					
b			-		
c					
d	ļ				
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		475,082.	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)				13	475,082.
Part XVI-B Relationship of Activities to Line No Explain below how each activity for which income the foundation's exempt purposes (other than below to be activity for which income the foundation's exempt purposes (other than below to be activity for which income the foundation's exempt purposes (other than below to be activities to be activi	ne is reported	ın column (e) of Part XVI-A			plishment of
	····				
		-			
					<u> </u>
					
					
				 	
		<u>.</u>		·	
		_			
- 					
323621 10-10-13					Form 990-PF (2013)

Part	XVII				and Transactions	and Relation		ncharitable		iye_ra
1 Did	the org	anization directly or indir	rectly engage in any	of the followin	g with any other organizat	tion described in se	ction 501(c) of		Yes	No
			-		7, relating to political orga					
a Tra	ansfers 1	from the reporting founda	ation to a noncharita	ible exempt org	ganization of:					
(1)	Cash							1a(1)		X
	Other	assets						1a(2)		Х
b Otl	her trans	sactions;								
(1)	Sales	of assets to a noncharital	ble exempt organiza	tion				1b(1)		Х
(2)	Purch	ases of assets from a noi	ncharitable exempt	organization				1b(2)		Х
(3)	Renta	l of facilities, equipment,	or other assets					1b(3)		Х
(4)	Reimb	oursement arrangements						1b(4)		Х
(5)	Loans	or loan guarantees						1b(5)		Х
(6)	Perfor	rmance of services or me	embership or fundra	ısıng solıcıtatıo	ns			1b(6)		Х
c Sh	aring of	facilities, equipment, ma	uling lists, other asse	ets, or paid em	ployees			1c_		Х
d Ift	he answ	ver to any of the above is	"Yes," complete the	following sche	dule. Column (b) should a	always show the fair	market value of the g	goods, other as:	sets,	
or	services	s given by the reporting fo	oundation. If the fou	ndation receive	ed less than fair market va	ilue in any transactio	on or sharing arrange	ment, show in		
CO	lumn (d) the value of the goods,	other assets, or serv	vices receiv <u>ed.</u>						
a) Line r	10	(b) Amount involved	(c) Name o	f noncharitable	exempt organization	(d) Descripti	on of transfers, transaction	ons, and sharing ar	τangeme	nts
				N/A				-		
	_									
					. <u> </u>					
		. <u> </u>								
							<u> </u>			
	_ _									
2a Is	the four	idation directly or indirect	tly affiliated with, or	related to, one	or more tax-exempt organ	nizations described				_
IN	section	501(c) of the Code (other	r than section 501(c)(3)) or in sect	ion 527?			L Yes	LX	No
b If	Yes," co	implete the following sch				 .				_
	_	(a) Name of org	janization		(b) Type of organization	<u> </u>	(c) Description of re	lationship		
		N/A								
							 			
						-				
	_									
	T		 		<u> </u>	<u> </u>				
٥.) and he	penalties of perjury, I declare the content of the true, correct, and con-	that I have examined the mplete Declaration of property of the control of the con	is return, includin reparer (other thai	g accompanying schedules an n taxpayer) is based on all info	id statements, and to the rmation of which prepa	ne best of my knowledge rer has any knowledge	May the IRS		
Sign Here			1 Jo Danie	2	n taxpayer) is based on all info			return with the	(see ins	
nere		Jame X			7/10/28/1	DIREC	TOR	_ X Yes		J No
	Sign	ature of officer of trustee		10	Date	Title	Charle	DTIN		
		Print/Type preparer's na	ame	Preparer's si	gnature	Date	Check if	PTIN		
Da: 4				Qut.	N. T.	5-7-14	self- employed			
Paid	ara-	BETSY ARET		بالكلاليا	1 m			P00996		
Prep		Firm's name ▶ PLA	NTE & MOF	KAN, PL	ħC		Firm's EIN ► 3	8-13579	51	
Use	Unity	Firm's address > =	0 707 33							
		Fırm's address ▶ P .	U. BOX 30) /			1			

SOUTHFIELD, MI 48037-0307

Form **990-PF** (2013)

Phone no. 248-352-2500

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

<u>_</u>	METRO HEALTH FOUNDATION	38-2100939
Organization type (check	c one)·	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	n is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special	Rule See instructions
	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in	money or property) from any one
Special Rules		
509(a)(1) and 17	1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the a 0(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the in (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	
total contribution	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one coins of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or of foruelty to children or animals. Complete Parts I, II, and III	_ ·
contributions for If this box is che purpose Do not	1(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one concuse exclusively for religious, charitable, etc., purposes, but these contributions did not cked, enter here the total contributions that were received during the year for an exclusion complete any of the parts unless the General Rule applies to this organization because ble, etc., contributions of \$5,000 or more during the year	total to more than \$1,000 avely religious, charitable, etc.
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedul on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its set the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

Name of organization

Employer identification number

METRO HEALTH FOUNDATION

38-2100939

METICO	HEADIN FOUNDATION		-4100333
Part I	Contributors (see instructions) Use duplicate copies of Part I if addit	tional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ESTATE OF JENNIE KERR 500 WOODWARD AVENUE, SUITE 2500 DETROIT, MI 48226	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)

Employer identification number

METRO HEALTH FOUNDATION

38-2100939

art II	Noncash Property (see instructions) Use duplicate copies of F	Part 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
		\$	
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_		\$	
(a) lo. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_			

Name of org	anization		Employer identification number
METRO	HEALTH FOUNDATION		38-2100939
Part III	Exclusively religious, charitable, etc., indivivear Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional	dual contributions to section 501(c)(e following line entry. For organization., contributions of \$1,000 or less for the space is needed	(7), (8), or (10) organizations that total more than \$1,000 for the is completing Part III, enter the year. (Enter this information once)
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_			
_	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee

Grants and Contributions Paid from 1/1/2013 to 12/31/2013

Organization	Amount
Community Health and Social Services (CHASS)	
Detroit, MI	
To expand capacity to meet the primary care needs of newly-insured patients under the Affordable Care Act	12,500
(ACA) by engaging an additional Spanish-speaking physician for 15 hours per week.	
Council of Michigan Foundations	
Grand Haven, MI	
To support annual membership.	2,000
Crossroads of Michigan	
Detroit, MI	
For emergency assistance with prescription medication and medical supplies.	6,000
Hope Medical Clinic	
Ypsılantı, MI	
For the addition of a 15 hour per week Nursing Care Coordinator at the Hope Clinic in Wayne, MI.	12,500
iChallenged, Inc.	
Dearborn Heights, MI	
For retinal surgeries performed at the Kresge Eye Institute for uninsured low-income individuals who have acute or chronic medical conditions with ocular ramifications.	5,000
Joy-Southfield Community Development Corporation	
Detroit, MI	
To provide pre-natal, peri-natal, gynecologic and obstetric care, along with reproductive health services for men and women.	8,000
Leaps and Bounds Family Services	
Warren, MI	
To support general operations (unrestricted use - Matching Gifts Program).	500
Lions Hearing Center of Michigan	
Detroit, MI	
For the purchase of hearing aids for seniors screened by the Lions Hearing Center and deemed to have significant enough hearing loss to require a hearing aid, but can not afford them.	3,750
For implementation of a fund raising system under the Richard H. Justice Capacity Building Award.	5,000
Macomb Community College Foundation	
Warren, MI	10.000
For five (5) two thousand dollar (\$2,000) scholarships for students in the MCC nursing program who successfully	10,000
complete at least 12 credit hours of study in the nursing curriculum each term and demonstrate financial need	
Macomb County Rotating Emergency Shelter Team (MCREST)	
Roseville, MI	
To provide medical, dental and prescription assistance to low-income, homeless individuals and families in Macomb County.	4,000
	1.000
To support an outreach, education and enrollment program for newly Medicaid eligible individuals in Macomb	1,000

Grants and Contributions Paid from 1/1/2013 to 12/31/2013

Michigan League for Public Policy Lansing, MI To support annual membership. To support general operations (unrestricted use - Matching Gifts Program). Michigan Nonprofit Association Lansing, MI To support annual membership. Michigan Universal Health Care Access Network (MichUHCAN)	500
Lansing, MI To support annual membership. To support general operations (unrestricted use - Matching Gifts Program). Michigan Nonprofit Association Lansing, MI To support annual membership.	
To support annual membership. To support general operations (unrestricted use - Matching Gifts Program). Michigan Nonprofit Association Lansing, MI To support annual membership.	500
To support general operations (unrestricted use - Matching Gifts Program). Michigan Nonprofit Association Lansing, MI To support annual membership.	500
Michigan Nonprofit Association Lansing, MI To support annual membership.	
Lansing, MI To support annual membership.	160
To support annual membership.	160
	160
Michigan Universal Health Care Access Network (MichUHCAN)	
Farmington Hills, MI	
To support annual membership.	200
To support general operations (unrestricted use - Matching Gifts Program).	250
Oakland Integrated Healthcare Network	
Pontiac, MI	
For needed equipment for new health clinics in the Pontiac/Waterford area to increase access to comprehensive and integrated medical, dental and mental health services.	25,000
Starfish Family Services	
Inkster, MI	
For its prenatal and childbirth classes for low-income, high-risk pregnant women, ages 18-35.	3,000
Trinity Community Services and Educational Foundation on behalf of St. Frances Cabrini Clinic Detroit, MI	
To assist clients apply for health insurance coverage through the Affordable Care Act (ACA).	5,000
Trinity Health - Michigan's Mercy Primary Care Center Detroit, MI	
To provide Affordable Care Act (ACA) outreach, education and enrollment assistance for patients and the broader community.	9,000
University of Detroit Mercy - McAuley School of Nursing	
Detroit, MI	0.000
For two \$4,000 scholarships for nursing students who lack the financial resources to complete their undergraduate education.	8,000
Wayne State University - College of Nursing	
Detroit, MI	
For three (3) four thousand dollar (\$4,000) scholarships for third and fourth year nursing students who lack the	12,000
financial resources to complete their undergraduate education.	
World Medical Relief	
Detroit, MI	
To support the Prescription Assistance Program through the purchase of medications not available by donation of good-dated samples.	6,000
Total Grant and Contribution Payments	139,610

Metro Health Foundation (EIN #38-2100939) Grants Approved for Future Payment

Statement 15

Organization	Amount
Community Health and Social Services (CHASS)	
Detroit, MI	
To expand capacity to meet the primary care needs of newly-insured patients under the Affordable Care Act (ACA) by engaging an additional Spanish-speaking physician for 15 hours per week.	12,500
Macomb Community College Foundation Warren, MI	
For five (5) two thousand dollar (\$2,000) scholarships for students in the MCC nursing program who successfully complete at least 12 credit hours of study in the nursing curriculum each term and demonstrate financial need	10,000
Trinity Community Services and Educational Foundation on behalf of St. Frances Cabrini Clinic Detroit, MI	
To assist clients apply for health insurance coverage through the Affordable Care Act (ACA).	5,000
Trinity Health - Michigan's Mercy Primary Care Center Detroit, MI	
To provide Affordable Care Act (ACA) outreach, education and enrollment assistance for patients and the broader community	9,000
Wayne State University - College of Nursing Detroit, MI	
For three (3) four thousand dollar (\$4,000) scholarships for third and fourth year nursing students who lack the financial resources to complete their undergraduate education.	12,000
Total Grants Approved for Future Payment	48,500

Schwab One® Account of METRO HEALTH FOUNDATION

Account Number

December 1-31, 2013 Statement Period

Investment Detail - Fixed Income

Corporate Bonds	Par	Market Price	Market Value
AMERICAN EXPRES 2.125%18 DUE 07/27/18 CUSIP: 0258M0DJ5 MODIV: A2 S.B. A.	125,000 0000	100.4845	125,605.63
0. 7	125,000.0000	103 1658	Accrued Interest: 1,121.55
BANK AMER CORP 3.625%16 DUE 03/17/16 CUSIP. 06051GEG0 MOODY'S: Baa2 S&P: A-	100,000.0000	105 0534	105,053.40 Accrued Interest: 1,047.22
BERKSHIRE HATHAWA 2.2%16 DUE 08/15/16 CUSIP: 084670BB3 MOODY'S. Aa2 S&P: AA	100,000.0000	103.3558	103,355.80 Accrued Interest: 831.11
BLACKROCK INC. 4.25%21 DUE 05/24/21 CUSIP: 09247XAH4 MOODY'S: A1 S&P A+	100,000.0000	105 6394	105,639.40 Accrued Interest: 436.81
BOEING CAP CORP 3.25%14 DUE 10/27/14 CUSIP: 097014AK0 MOODY'S' A2 S&P: A	100,000.0000	102.3489	102,348.90 Accrued Interest: 577.78



Schwab One® Account of METRO HEALTH FOUNDATION

Account Number

December 1-31, 2013 Statement Period

Investment Detail - Fixed Income (continued)

Corporate Bonds (continued)	Par	Market Price	Market Value
DEERE & COMPANY 4.375%19 DUE 10/16/19 CUSIP: 244199BC8	125,000 0000	110.5563	138,195.38
MOODY'S: A2 S&P: A			Accrued Interest: 1,139.32
GENENTECH INC. 4.75%15 DUE 07/15/15 CUSIP: 368710AG4 MOODY'S WR S&P: AA	20,000 0000	106.3111	53,155.55 Accrued Interest: 1,095.14
GENERAL ELECTRIC 5.25%17 DUE 12/06/17 CUSIP: 369604BC6 MOODY'S: Aa3 S&P: AA+	50,000 0000	113.4651	56,732 55 Accrued Interest: 182.29
GOLDMAN SACHS G 2.375%18 DUE 01/22/18 CUSIP. 38141GRC0 MOODY'S Baa1 S&P: A-	100,000.0000	100.2243	100,224.30 Accrued Interest: 1,048.96
JPMORGAN CHASE 3.45%16 DUE 03/01/16 CUSIP: 46625HHX1 MOODY'S A3 S&P: A	200,000.0000	104.8004	209,600.80 Accrued Interest: 2,300.00
LLOVDS TSB BA 2.5884%14F DUE 01/24/14 LLOYDS TSB BANK P CUSIP: 539473AK4 MOODY'S. A2 S&P: A	75,000.0000	100.1120	75,084.00

Schwab One® Account of METRO HEALTH FOUNDATION

Account Number

December 1-31, 2013 Statement Period

Investment Detail - Fixed Income (continued)

Corporate Bonds (continued)	Par	Market Price	Market Value
PETROBRAS INTL F 3.5%17F DUE 02/06/17 PETROBRAS INTL FI CUSIP: 71645WAU5 MOODY'S: Road Sub- RRP	75,000.0000	101.0540	75,790.50
PETROBRAS INTL 3.875%16F DUE 01/27/16 PETROBRAS INTL FI CUSIP: 71645WAT8	50,000.0000	102.7070	51,353.50
MOODY'S: Baa1 S&P: BBB		The state of the s	Accrued Interest: 828.82
TEXAS INSTRUMENT 1.65%19 DUE 08/03/19 CUSIP: 882508AU8 MOODY'S: A1 S&P: A+	100,000.0000	96.6897	96,689.70 Accrued Interest: 678.33
TOYOTA MOTOR CRED 4.5%20 DUE 06/17/20 CUSIP: 89233P4C7 MOODY'S: Aa3 S&P: AA-	100,000.0000	108.5051	108,505.10 Accrued Interest: 175.00
WELLS FARGO BANK 2.1%17 DUE 05/08/17 CUSIP: 94974BFD7 MOODY'S: A2 S&P: A+	100,000.0000	101.8593	101,859.30 Accrued Interest: 309.17
Total Corporate Bonds	1,675,000.0000	Total Accrue	1,738,151.06 Total Accrued Interest for Corporate Bonds: 12,956.55
Total Fixed income	1,675,000.0000		1,738,151.06

Accrued Interest represents the interest that would be received if the fixed income investment was sold prior to the coupon payment.



Schwab One® Account of METRO HEALTH FOUNDATION

Account Number

December 1-31, 2013 Statement Period

Investment Detail - Equities

Equities	Quantity	Market Price	Market Value
AT&TINC NEW SYMBOL. T	200 0000	35.1600	7,032.00
ACADIA HEALTHCARE CO SYMBOL: ACHC	430 0000	47.3300	20,351 90
ACTUANT CORP CL A NEW SYMBOL: ATU	800.0000	36.6400	29,312.00
ALCOA INC SYMBOL. AA	3,520.0000	10.6300	37,417.60
AMERICAN EXPRESS COMPANY SYMBOL: AXP	790.0000	90.7300	71,676.70
AMERISAFE INC SYMBOL: AMSF	510.0000	42 2400	21,542 40
AMERN CAMPUS COMMUNITIES SYMBOL: ACC	720 0000	32 2100	23,191.20
APACHE CORP SYMBOL: APA	879 0000	85.9400	75,541.26
APPLE INC SYMBOL: AAPL	150 0000	561 0200	84,153.00
AUTO DATA PROCESSING SYMBOL: ADP	580.0000	80.7990	46,863.42 Accrued Dividend: 278.40
BALL CORPORATION SYMBOL. BLL	570.0000	51 6600	29,446.20

Schwab One® Account of METRO HEALTH FOUNDATION

Account Number

December 1-31, 2013 Statement Period

Equities (continued)	Quantity	Market Price M	Market Value
BANK AMER CO 6.375% PFD PFD SER 3 SYMBOL: BML+I	1,200.0000	23 2500	27,900.00
BANK OF AMERICA CORP SYMBOL: BAC	3,940 0000	15.5700	61,345.80
BAYTEX ENERGY CORP F SYMBOL: BTE	260.0000	39.1600	10,181.60
BOEING CO SYMBOL: BA	700.0000	136.4900	95,543.00
BORG WARNER INC SYMBOL: BWA	620.0000	55 9100	34,664.20
CABELAS INC SYMBOL: CAB	420.0000	96 6600	27,997.20
CARLISLE COMPANIES INC SYMBOL: CSL	320.0000	79.4000	25,408.00
CATERPILLAR INC SYMBOL: CAT	520 0000	90 8100	47,221.20
CENTURYLINK INC SYMBOL. CTL	370.0000	31.8500	11,784.50
CHURCH & DWIGHT CO INC SYMBOL. CHD	330 0000	66.2800	21,872.40
CISCO SYSTEMS INC SYMBOL: CSCO	2,690 0000	22.4300	60,336.70



Schwab One® Account of METRO HEALTH FOUNDATION

Account Number

December 1-31, 2013 Statement Period

Equities (continued)	Quantity	Market Price	Market Value
CONCHO RESOURCES INC	180.0000	108.0000	19,440.00
COPART INC SYMBOL: CPRT	300.0000	36.6500	10,995.00
CORRECTIONS CP AMER NEW SYMBOL CXW	425 0000	32 0700	13,629.75
COSTA INC CLASS A CLASS A SYMBOL: ATX	720.0000	21 7300	15,645.60
DAVITA HEALTHCARE PTNR SYMBOL: DVA	260.0000	63 3700	16,476.20
DENBURY RES INC NEW SYMBOL: DNR	1,300 0000	16 4300	21,359 00
DISNEY WALT CO SYMBOL: DIS	820.0000	76 4000 Accrued Div	62,648.00 Accrued Dividend: 705.20
DOVER CORPORATION SYMBOL: DOV	710.0000	96.5400	68,543 40
DU PONT E I DE NEMOUR&CO SYMBOL: DD	1,260.0000	64.9700	81,862.20
EAST WEST BANCORP SYMBOL: EWBC	770.0000	34.9700	26,926 90
ENERGEN CORP SYMBOL: EGN	340.0000	70 7500	24,055.00



Schwab One® Account of METRO HEALTH FOUNDATION

Account Number

Statement Period December 1-31, 2013

Equities (continued)	Quantity	Market Price	Market Value
EVEREST RE GROUP LTD F SYMBOL [.] RE	200.0000	155.8700	31,174.00
FIRSTENERGY CORP SYMBOL: FE	355 0000	32.9800	11,707.90
FREEPORT MCMORAN COPPER SYMBOL: FCX	1,300.0000	37.7400	49,062.00
GENERAL ELECTRIC COMPANY SYMBOL GE	3,000.0000	28.0300 Accrued L	84,090.00 Accrued Dividend: 660.00
GOLDMAN SACHS 6.2% PFD PFD SER B SYMBOL: GS+B	1,000.0000	22.5000	22,500.00
GRANITE CONSTRUCTION INC SYMBOL: GVA	1,120.0000	34.9800	39,177.60
HEARTLAND PAYMENT SYS SYMBOL: HPY	350.0000	49.8400	17,444.00
HEXCEL CORP NEW SYMBOL: HXL	700 0000	44 6900	31,283 00
HIBBETT SPORTS INC SYMBOL HIBB	330.0000	67 1520	22,160.16
HORNBECK OFFSHORE SVCS SYMBOL. HOS	500.0000	49.2300	24,615 00
IDEX CORP SYMBOL. IEX	270 0000	73.8500	19,939 50

Schwab One® Account of METRO HEALTH FOUNDATION

Account Number

Statement Period December 1-31, 2013

Equities (continued)	Quantity	Market Price	Market Value
ILLINOIS TOOL WORKS INC SYMBOL. ITW	520.0000	84.0800	43,721.60
INTEL CORP SYMBOL: INTC	2,210.0000	25 9550	57,360 55
INTL BUSINESS MACHINES SYMBOL: IBM	300.0000	187.5700	56,271 00
INVENSENSE INC SYMBOL: INVN	1,050.0000	20 7800	21,819.00
IRON MOUNTAIN INC NEW SYMBOL IRM	400.0000	30.3500	12,140 00 Accrued Dividend: 108.00
		91.5900	72,356.10
JPMORGAN CHASE & CO SYMBOL: JPM	1,390.0000	58.4800	81,287.20
KIMBERLY-CLARK CORP SYMBOL: KMB	620 0000	104 4600	64,765.20 Accrued Dividend: 502.20
KOHLS CORP SYMBOL. KSS	1,110.0000	56.7500	62,992.50
LAUDER ESTEE CO INC CL A SYMBOL: EL	670 0000	75.3200	50,464 40
LKQ CORP SYMBOL LKQ	580 0000	32.9000	19,082.00

Schwab One® Account of METRO HEALTH FOUNDATION

Account Number

Statement Period December 1-31, 2013

Equities (continued)	Quantity	Market Price	Market Value
M D U RESOURCES GROUP SYMBOL. MDU	700.0000	30 5500	21,385.00 Accrued Dividend: 124.25
M W I VETERINARY SUPPLY SYMBOL: MWIV	100 0000	169 9660	16,996.60
MACQUARIE INFRASTRUC LLC SYMBOL MIC	200 0000	54.4300	10,886 00
MARATHON OIL CORP SYMBOL: MRO	2,320.0000	35.3000	81,896.00
MASTERCARD INC SYMBOL: MA	110.0000	835 4600	91,900.60
MAXIM INTEGRATED PRODS SYMBOL MXIM	1,230 0000	27 9000	34,317.00
METLIFE INC SYMBOL [.] MET	1,660.0000	53 9200	89,507.20
MICROCHIP TECHNOLOGY INC SYMBOL: MCHP	700 0000	44.7500	31,325 00
MICROFINANCIAL INC SYMBOL: MFI	2,300 0000	8 5500	19,665.00
MICROSOFT CORP SYMBOL: MSFT	1,270.0000	37.4100	47,510.70
NETGEAR INC SYMBOL: NTGR	570 0000	32.9400	18,775.80



Schwab One® Account of METRO HEALTH FOUNDATION

Account Number

December 1-31, 2013 Statement Period

Equities (continued)	Quantity	Market Price	Market Value
NEW YORK CMNTY BANCORP SYMBOL: NYCB	730 0000	16.8500	12,300 50
NEWMONT MINING CORP SYMBOL: NEM	2,030.0000	23 0300	46,750.90
NIKE INC CLASS B SYMBOL NKE	900.0000	78.6400	70,776.00 Accrued Dividend: 216.00
OCCIDENTAL PETE CORP SYMBOL. OXY	240.0000	95.1000	22,824.00 Accrued Dividend: 153.60
OMNICOM GROUP INC SYMBOL: OMC	790.0000	74.3700	58,752 30 Accrued Dividend: 316.00
ONEBEACON INSURANCE GP F SYMBOL: OB	560.0000	15.8200	8,859.20
PACWEST BANCORP CALIFORNIA SYMBOL. PACW	320.0000	42.2200	13,510.40
PALL CORP SYMBOL·PLL	240 0000	85 3500	20,484 00
PEABODY ENERGY CORP SYMBOL: BTU	1,790.0000	19.5300	34,958.70
PEPCO HOLDINGS INC SYMBOL POM	485.0000	19.1300	9,278.05
PEPSICO INCORPORATED SYMBOL PEP	700.0000	82 9400	58,058.00 Accrued Dividend: 397.25



Schwab One® Account of METRO HEALTH FOUNDATION

Account Number

December 1-31, 2013 Statement Period

Equities (continued)	Quantity	Market Price	Market Value
PERRIGO CO PLC F US SHARES SYMBOL: PRGO	190.0000	153 4600	29,157.40
POTASH CORP SASK INC F SYMBOL. POT	1,520 0000	32.9600	50,099.20
PRAXAIR INC SYMBOL PX	550.0000	130.0300	71,516.50
PRESTIGE BRANDS HOLDINGS SYMBOL. PBH	000.0009	35 8000	21,480.00
PROSPERITY BANCSHARES SYMBOL: PB	350 0000	63 3900	22,186.50 Accrued Dividend: 84.00
QEP RESOURCES INC SYMBOL: QEP	430.0000	30.6500	13,179.50
SALLY BEAUTY HOLDINGS SYMBOL: SBH	450 0000	30 2300	13,603 50
SCHLUMBERGER LTD F SYMBOL SLB	1,110.0000	90.1100	100,022.10 Accrued Dividend: 346.88
SEACHANGE INTL INC SYMBOL: SEAC	1,050 0000	12.1600	12,768.00
SIRONA DENTAL SYSTEMS SYMBOL: SIRO	270.0000	70.2000	18,954.00
SKYWORKS SOLUTIONS INC SYMBOL: SWKS	800.0000	28 5600	22,848 00

Schwab One® Account of METRO HEALTH FOUNDATION

Account Number

Statement Period December 1-31, 2013

Equities (continued)	Quantity	Market Price	Market Value
SOLERA HOLDINGS LLC SYMBOL: SLH	270.0000	70.7600	19,105.20
STANDEX INTERNATL CORP	440.0000	62 8800	27,667.20
STAPLES INC SYMBOL SPLS	3,130 0000	15.8900	49,735.70 Accrued Dividend: 375.60
STEEL DYNAMICS INC SYMBOL: STLD	1,000.0000	19.5400	19,540.00
STRYKER CORP SYMBOL: SYK	1,060 0000	75 1400	79,648.40
SYMOPSYS INC SYMBOL, SNPS	500.0000	40.5700	20,285.00
SYMBOL: SYY	0000 006	36 1000	32,490.00
THE WHITEWAVE FOODS CO SYMBOL: WWAV	1,000 0000	22 9400	22,940 00
THERMO FISHER SCIENTIFIC SYMBOL: TMO	660.0000	111.3500	73,491.00 Accrued Dividend: 99.00
TRACTOR SUPPLY COMPANY SYMBOL: TSCO	420 0000	77.5800	32,583.60
TRANSOCEAN INC NEW F SYMBOL BIG	940.0000	49.4200	46,454 80



Schwab One® Account of METRO HEALTH FOUNDATION

Account Number

Statement Period December 1-31, 2013

Equíties (continued)	Quantity	Market Price	Market Value
UNITED PARCEL SERVICE B CLASS B SYMBOL: UPS	800.0000	105.0800	84,064.00
UNITEDHEALTH GROUP INC SYMBOL: UNH	1,000.0000	75.3000	75,300.00
UNIVERSAL HLTH SVCS CL B SYMBOL: UHS	240.0000	81.2600	19,502.40
WATERS CORP SYMBOL: WAT	280.0000	100.0000	28,000.00
WELLS FARGO BAN 7.5% PFD PFD SER L LDUE 12/31/99 SYMBOL: WFC+L	25.0000	1,110.0000	27,750.00
ZIONS BANCORP SYMBOL: ZION	800.0000	29.9600	23,968.00
8X8 INC NEW SYMBOL: EGHT	1,580.0000	10.1500	16,037.00
Pending Trades Total Equities	(136.0000) 88,543 0000		(77,477.00) 3,945,392 99

Charles SCHWAB

Schwab One® Account of METRO HEALTH FOUNDATION

Account Number

Statement Period December 1-31, 2013

Investment Detail - Other Assets

Other Assets	Quantity	Market Price	Market Value
BARCLAYS BANK 7.1% PFD PFD SER 3 SYMBOL: BCS+A	1,000.0000	25.1700	25,170.00
FIRST TR DJ INTERNET FD SYMBOL: FDN	2,900.0000	69.8600	173,594.00
ISHARES MSCI GRMNY GERMANY ETF SYMBOL: EWG	1,700.0000	31.7600	63,992.00
REALTY INCOME CORP REIT SYMBOL: O	260.0000	37.3300	9,705.80
SPDR S&P BIOTECH ETF SYMBOL: XBI	360.0000	130.2000	46,872.00
VANGUARD FTSE EMERGING MARKETS ETF SYMBOL: VWO	1,485.0000	41.1400	61,092.90
VANGUARD FTSE PACIFIC ETF SYMBOL: VPL	920.0000	61.3000	56,396.00
VANGUARD INTL EQTY INDEX FTSE ALL WORLD EX US ETF SYMBOL: VEU	12,500.0000	60.7300	634,125.00
Pending Trades Total Other Assets	(780 0000) 20,345.0000		(31,886 26) 1,026,061 44

Charles SCHWAB

Schwab One® Account of METRO HEALTH FOUNDATION

Account Number

Statement Period December 1-31, 2013

Investment Detail - Total

Transaction Detail - Purchases & Sales

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Settle Date	Trade Date	Settle Date Trade Date Transaction	Description	Quantity	Unit Price	Total Amount
12/03/13	11/27/13	Bought	COPART INC: CPRT	300.0000	34.3500	(10,313.95)
12/03/13	11/27/13	Sold	GRANITE CONSTRUCTION INC: GVA	(120.0000)	31.2500	3,740.98
12/05/13	12/02/13	Sold	APPLE INC: AAPL	(10.0000)	260.0000	5,590.95
12/05/13	12/02/13	Bought	TRANSOCEÁN INC NEW F: RIG	270.0000	50.0500	(13,522.45)
12/06/13	12/03/13	Bought	NEWMONT MINING CORP: NEM	250.0000	23.4240	(5,864.95)
12/11/13	12/06/13	Sold	SEACHANGE INTL INC: SEAC	(250.0000)	11.7703	2,933.58
12/12/13	12/09/13	Sold	SYSCO CORPORATION: SYY	(330.0000)	39.4276	13,001.93
12/17/13	12/12/13	Bought	BAYTEX ENERGY CORP F: BTE	60.0000	39.0857	(2,354.09)
12/17/13	12/12/13	Bought	MACQUARIE INFRASTRUC LLC: MIC	100.000	52.9000	(5,298.95)
12/17/13	12/16/13	Stock Split	BORG WARNER INC: BWA	310.0000	:	· · · · · · · · · · · · · · · · · · ·
12/19/13	12/19/13	Cash/Stock Merger	PERRIGO CO XXX INC CHG TO EI FM US	(190.0000)		
12/19/13 12/19/13	12/19/13	Cash/Stock Merger	PERRIGO CO XXX INC CHG TO EI FM US	:		1.90
12/19/13	12/19/13	Cash/Stock Merger	PERRIGO CO PLC F US SHARES: PRGO	190.0000	:	:

FORM 990-PF	DIVIDEND	S AND INTE	EREST	FROM SECU	JRITIES	STATEMENT	1
SOURCE	GROSS AMOUNT	CAPITA GAINS DIVIDEN	3	(A) REVENUE PER BOOKS	(B) NET INVEST MENT INCOM		
SCHWAB DIVIDENDS AND INTEREST	159,074	•	0.	159,074	159,074	•	
TO PART I, LINE 4 =	159,074	•	0.	159,074	159,074	•	
FORM 990-PF		OTHER	INCO	ME		STATEMENT	2
DESCRIPTION				(A) VENUE BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCON	
MISCELLANEOUS INCOME	E	_		1,676.	1,676.		
TOTAL TO FORM 990-PF	, PART I,	LINE 11 =		1,676.	1,676.		
FORM 990-PF		LEGA	L FE	ES		STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS	NE S ME	(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
LEGAL FEES		6,083	3.	3,042.		2,32	26.
TO FM 990-PF, PG 1,	LN 16A =	6,083	3. = =	3,042.		2,32	26.
FORM 990-PF		ACCOUNT	ING	FEES		STATEMENT	4
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
ACCOUNTING FEES		13,050).	6,525.	,	6,52	25.
TO FORM 990-PF, PG 1	 ., LN 16B	13,050).	6,525.		6,52	25.
	_		==		= 		

FORM 990-PF	TAX	ES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
EXCISE TAX	37,731.	0.		0.		
TO FORM 990-PF, PG 1, LN 18	37,731.	0.		0.		
FORM 990-PF	OTHER E	XPENSES	}	STATEMENT 6		
DESCRIPTION BANK CHARGES OFFICE EQUIPMENT & SUPPLIES MISCELLANEOUS	(A) EXPENSES PER BOOKS 34,184. 3,231. 9,519.	(B) NET INVEST- MENT INCOME 34,184. 808. 1,932.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES 0. 2,421. 6,435.		
DUES & SUBSCRIPTIONS INSURANCE TELEPHONE PARKING UTILITIES	253. 4,161. 2,170. 180. 1,376.	126. 2,081. 1,085. 36. 688.		127. 2,080. 1,013. 98. 688.		
TO FORM 990-PF, PG 1, LN 23	55,074.	40,940.		12,862.		
FORM 990-PF OTHER INCREASES	S IN NET ASS	ETS OR FUND BA	ALANCES S	STATEMENT 7		
DESCRIPTION				AMOUNT		
UNREALIZED GAIN ON INVESTMENT	SECURITIES			827,745.		
TOTAL TO FORM 990-PF, PART II	II, LINE 3		_	827,745.		

FORM 990-PF C	ORPORATE STOCK		STATEMENT 8		
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE		
COMMON STOCKS AND EQUITY FUNDS		4,974,453.	4,974,453.		
OTAL TO FORM 990-PF, PART II, LINE 10B		4,974,453.	4,974,453.		
FORM 990-PF C	ORPORATE BONDS		STATEMENT 9		
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE		
BONDS		1,738,151.	1,738,151.		
TOTAL TO FORM 990-PF, PART II, LI	1,738,151.	1,738,151.			
FORM 990-PF	OTHER ASSETS		STATEMENT 10		
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE		
REFUNDABLE EXCISE TAX	1,130.	0.	0.		
TO FORM 990-PF, PART II, LINE 15	1,130.	0.	0.		
FORM 990-PF OT:	HER LIABILITIES		STATEMENT 11		
DESCRIPTION		BOY AMOUNT	EOY AMOUNT		
DESCRIPTION EXCISE TAXES PAYABLE DEFERRED EXCISE TAX LIABILITY		BOY AMOUNT 0. 0.	6,331. 30,000.		

FORM 990-PF

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STATEMENT

FORM 990-FF FAR			FOUNDATION MANAG			SMENT 12
NAME AND ADDRESS			TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
LILLIE M. TABOR 333 WEST FORT STREET DETROIT, MI 48226			PRESIDENT 2.00	0.	0.	0.
CHERYL L. CHANDLER 333 WEST FORT STREET DETROIT, MI 48226	SUITE	1370	VICE PRESIDENT 1.00	0.	0.	0.
RAYMOND COCHRAN 333 WEST FORT STREET DETROIT, MI 48226			TREASURER 2.00	0.	0.	0.
DORIS M. FELL 333 WEST FORT STREET DETROIT, MI 48226	SUITE	1370	TRUSTEE 1.00	0.	0.	0.
GLENN F. KOSSICK 333 WEST FORT STREET DETROIT, MI 48226			TRUSTEE 1.00	0.	0.	0.
GLORIA ROBINSON 333 WEST FORT STREET DETROIT, MI 48226			TRUSTEE 1.00	0.	0.	0.
RANDY WALAINIS 333 WEST FORT STREET DETROIT, MI 48226	SUITE	1370	EXECUTIVE DIREC 32.00	TOR 87,462.	9,743.	2,142.
LAURA CHAMPAGNE 333 WEST FORT STREET DETROIT, MI 48226			TRUSTEE 1.00	0.	0.	0.
VALERIE HEROD BELAY 333 WEST FORT STREET DETROIT, MI 48226	SUITE	1370	TRUSTEE 1.00	0.	0.	0.
BARBARA JUSTICE 333 WEST FORT STREET DETROIT, MI 48226	SUITE	1370	TRUSTEE 1.00	0.	0.	0.
JUDITH BEAN, PHD 333 WEST FORT STREET DETROIT, MI 48226	SUITE	1370	TRUSTEE 1.00	0.	0.	0.

PART VIII - LIST OF OFFICERS, DIRECTORS

METRO HEALTH FOUNDATION			38-2100939		
PATRICIA MCCANN 333 WEST FORT STREET SUITE 1370 DETROIT, MI 48226	TRUSTEE 1.00	0.	0.	0.	
TOTALS INCLUDED ON 990-PF. PAGE 6	S. PART VIII	87 462	9 7/3	2 142	

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

13

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

RANDY WALAINIS 333 WEST FORT STREET SUITE 1370 DETROIT, MI 48226

TELEPHONE NUMBER

313-965-4220

FORM AND CONTENT OF APPLICATIONS

ALL FUNDING REQUESTS MUST BE DISCUSSED WITH FOUNDATION STAFF PRIOR TO PREPARATION AND SUBMISSION OF GRANT REQUESTS. FOUNDATION STAFF WILL DETERMINE IF A GRANT REQUEST LETTER OR FULL GRANT APPLICATION IS REQUIRED. THE FOUNDATION HAS SPECIFIC GRANT REQUEST LETTER AND GRANT APPLICATION FORMATS. IN ADDITION TO COMPLETING THE REQUIRED REQUEST DOCUMENT, GRANTSEEKERS WILL BE ASKED TO PROVIDE A COPY OF THEIR CURRENT IRS DETERMINATION LETTER INDICATING 501(C)(3) TAX-EXEMPT STATUS: A LIST OF BOARD OF DIRECTORS (WITH AFFILIATIONS); THE ORGANIZATION'S CURRENT ANNUAL OPERATING BUDGET, INCLUDING EXPENSES AND REVENUE; MOST RECENT ANNUAL FINANCIAL STATEMENT (INDEPENDENTLY AUDITED, IF AVAILABLE; IF NOT AVAILABLE, THEY SHOULD ATTACH A COPY OF THIER MOST-RECENTLY COMPLETED IRS FORM 990); LETTERS OF SUPPORT SHOULD VERIFY PROJECT NEED AND COLLABORATION WITH OTHER ORGANIZATIONS; AND ANNUAL REPORT, IF AVAILABLE.

ANY SUBMISSION DEADLINES

NO, THERE ARE NO SUBMISSION DEADLINES FOR 2014.

RESTRICTIONS AND LIMITATIONS ON AWARDS

GRANTS ARE MADE TO ORGANIZATIONS WITH PROGRAMS SERVING RESIDENTS OF WAYNE. OAKLAND AND MACOMB COUNTIES IN MICHIGAN. NO GRANTS HIGHER THAN \$30,000; NO BRICK AND MORTAR GRANTS; NO GRANTS WILL BE MADE TO MUNICIPALITIES, OTHER GOVERNMENT ENTITIES, ANY GOVERNMENTAL DEPARTMENTS OR FUNDS (EXCEPT BY SPECIFIC BOARD ACTION). MHF WILL NOT PROVIDE LOANS; SUPPORT RELIGIOUS ORGANIZATIONS; INDULGE IN LOBBYING; OR SUPPORT ORGANIZATIONS WHICH DISCRIMINATE BECAUSE OF AGE, RACE, ETHNIC ORIRIN, RELIGION, SEXUAL ORIENTATION, HANDICAP, OR SEX.