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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter Social Security numbers on this form as it may be made public.

OMB No 1545-0047

Open to Public Inspection

► Information about Form 990 and its instructions is at www.rs.gov/form990 A For the 2013 calendar year, or tax year beginning and ending Check if applicable C Name of organization D Employer identification number Address change ANN ARBOR AREA COMMUNITY FOUNDATION Name change 38-6087967 Doing Business As re er Initial Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Termin-300 301 NORTH MAIN STREET (734)663-0401 X Amende 20,060,839. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Applica ANN ARBOR, MI 48104-1296 H(a) is this a group return pending F Name and address of principal officer NEELAV HAJRA for subordinates? _Yes X No SAME AS C ABOVE H(b) Are all subordinates included? Tax-exempt status X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) ☑ Website: ➤ WWW.AAACF.ORG H(c) Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > L Year of formation: 1963 M State of legal domicile: MI Part I Summary Briefly describe the organization's mission or most significant activities COMMUNITY FOUNDATION PROVIDES FINANCIAL ASSISTANCE TO OTHER CHARITABLE ORGANIZATIONS. If the organization discontinued its operations or disposed of more than 25% of its net assets 18 Number of voting members of the governing body (Part VI, line 1a) 3 18 Number of independent voting members of the governing body (Part VI, line 1b) 4 63886JUN22TD 15 Total number of individuals employed in calendar year-2013-(Part-5 Total number of volunteers (estimate if necessary) 243 6 7 a Total unrelated business control 1011 art VIII, column (C), line 12 b Net unrelated business backer upone from Form 990-T, line 34 1 -27,420. 7a <u>Š</u> -27,420. Prior Year **Current Year** 5,003,084. Contributions and grants (F 5,871,974. Program service revenue Part VIII line 10 Investment income /Pa 2,115,858. 2,113,754. Other revenue (Party) 2,280. 2,400. , 6d, 8c, 9c, 10c, and 11e) Total revenue - add line 80 57 (must equal Part VIII, column (A), line 12) 7,121,222. 7,988,128. 12 2,621,276. 1,951,305. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 8 14 Benefits paid to or for members (Part IX, column (A), line 4) 706,522. 761,480. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 0. 16a Professional fundraising fees (Part IX, column (A), line 11e) 0. 503,385. b Total fundraising expenses (Part IX, column (D), line 25) 955,437 687,622. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 345,449. 4,338,193. Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) $\overline{3,775,773}$ Revenue less expenses Subtract line 18 from line 12 3,649,935. Beginning of Current Year **End of Year** 65,836,932. <u>75,565,322.</u> 20 Total assets (Part X, line 16) 1,130,547. 1,663,253. 21 Total liabilities (Part X, line 26) Net assets or fund balances Subtract line 21 from line 20 64,173,679. 434,775 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of prepare Hother than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign Nere PRESIDENT NEELAV HAJRA, Type or print name and title 3 Ø Date PTIN Print/Type preparer's name Preparer's signature /17 Paid DOUGLAS A. KELLY, CPA DOUGLAS A. KELLY, CP 05/31 P00091369 Firm's name REHMANN ROBSON LLC Preparer 38-3635706 Firm's EIN Firm's address > 555 BRIARWOOD CIRCLE, **Use Only STE 300** ANN ARBOR, MI 48108 Phone no. (734) 761-2005

May the IRS discuss this return with the preparer shown above? (see instructions) LHA For Paperwork Reduction Act Notice, see the separate instructions. 332001 10-29-13

X Yes No Form 990 (2013)

	Form 990 (2013)
4e	Total program service expenses ► 3,355,658.	_
- -u	(Expenses \$ including grants of \$) (Revenue \$)	_
4d	Other program services (Describe in Schedule O.)	_
		_
		-
		-
		-
		_
		-
		-
		-
		_
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)	-
		-
		-
		-
		-
		-
		-
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		-
	, (,,,,,,, .	_
4b	(Code) (Expenses \$ including grants of \$) (Revenue \$)	-
		-
		-
		-
		-
		-
		-
		-
	SELECTED FROM PROPOSALS PRESENTED.	
	VARIETY OF TAX EXEMPT ORGANIZATIONS PRIMARILY IN THE ANN ARBOR AREA	-
	THE FOUNDATION FULFILLS ITS EXEMPT PURPOSE BY GRANTING FUNDS TO A	_
	revenue, if any, for each program service reported. (Code) (Expenses \$ 3,355,658. including grants of \$ 2,621,276.) (Revenue \$)	-
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and	
	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.	
	If "Yes," describe these changes on Schedule O.	
	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No	
	If "Yes," describe these new services on Schedule O.	
	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?	
	Did the executation undertake any experience to regree during the user which were not listed an	-
	FROM THE GENERAL PUBLIC AND MAKES GRANTS TO EXEMPT ORGANIZATIONS.	-
	ORGANIZATIONS. THE ORGANIZATION RECEIVES AND INVESTS CONTRIBUTIONS	-
	MISSION: PROVIDE FINANCIAL ASSISTANCE TO OTHER CHARITABLE	_
1	Check if Schedule O contains a response or note to any line in this Part III	-
ran	Statement of Program Service Accomplishments Check of School de Constants of response or note to any line in this Bort III	
	990 (2013) ANN ARBOR AREA COMMUNITY FOUNDATION 38-6087967 Page 2	-

332003 10-29-13

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		'	
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		<u>'</u>	37
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
5	is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		v
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to		X	ĺ
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Λ	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		x
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	8		x
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for	- 0		
9	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			1
	If "Yes," complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
10	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X			
•	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	ĺ
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	X	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		_X_
е	Did the organization report an amount for other liabilities in Part X, line 257 If "Yes," complete Schedule D, Part X	1 <u>1e</u>	X	<u> </u>
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			ł
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			(
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			v
46	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	446	х	
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		
15		15		Х
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		<u> </u>
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX.			 -
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	- ''		_ -
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			_
	complete Schedule G, Part III	19		x
2 0a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
			990	(2013)

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			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		_X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			3.7
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		x
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or		,	
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,	i		
	complete Schedule L, Part II	26		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial	1		
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions).			<u> </u>
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	20		
-	contributions? If "Yes," complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations?	-		
	If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33_		<u> </u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
00	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-chantable related organization?	20		х
27	If "Yes," complete Schedule R, Part V, line 2	36_	\vdash	 ^
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			┝╧
~	Note. All Form 990 filers are required to complete Schedule O	38	\mathbf{x}	

Par	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	5		
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b	0	1	1
C	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a	15		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a_	<u> </u>	X
	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b_	<u> </u>	<u> </u>
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			١.,
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		<u> </u>
b	If "Yes," enter the name of the foreign country:	— l	ļ	İ
_	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		ļ	X
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	-	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	 	1
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>		
ъa	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit		 	х
_	any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	_6a_	-	 -
D	were not tax deductible?	6b		}
7	Organizations that may receive deductible contributions under section 170(c).	05	\vdash	
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the pa	yor? 7a		$\overline{\mathbf{x}}$
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	<u> </u>	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	12		
Ū	to file Form 8282?	7c]	x
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 1		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required	? 7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098	-С? 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting	1	. .	
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year	7 8		X
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a_	ļ	X
b	Did the organization make a distribution to a donor, donor advisor, or related person?	_9b		X
10	Section 501(c)(7) organizations. Enter.	ľ	}	1
а	Initiation fees and capital contributions included on Part VIII, line 12	{		[
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]			1
11	Section 501(c)(12) organizations. Enter		1	}
a	Gross income from members or shareholders 11a	_		
b	Gross income from other sources (Do not net amounts due or paid to other sources against		1	ì
40-	amounts due or received from them.) 11b			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	 	
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified compressit health insurance issuers		1	}
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a	├─-	 -
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	├	
	Note. See the instructions for additional information the organization must report on Schedule O		[1
D	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		i	1
_	Enter the amount of reserves on hand			1
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	t	x
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	 	<u> </u>

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

	Check if Schedule O contains a response or note to any line in this Part VI					A				
<u>Sec</u>	tion A. Governing Body and Management									
					Yes	No				
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	18	<u> </u>		ļ				
	If there are material differences in voting rights among members of the governing body, or if the governing	i								
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		_							
b	Enter the number of voting members included in line 1a, above, who are independent	1b	1	3						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationshi	p with	any other		_					
	officer, director, trustee, or key employee?			2		X				
3	B Did the organization delegate control over management duties customanly performed by or under the direct supervision									
	of officers, directors, or trustees, or key employees to a management company or other person?									
4	Did the organization make any significant changes to its governing documents since the prior Form 9	990 wa	is filed?	4		Х				
5	Did the organization become aware during the year of a significant diversion of the organization's as	sets?		_5		X				
6	Did the organization have members or stockholders?			6		X				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	ppoint	one or	1						
	more members of the governing body?			7a		X				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, s	tockh	olders, or							
	persons other than the governing body?			7b	<u>L</u>	X				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by th	e following:							
а	The governing body?			8a	X					
b	Each committee with authority to act on behalf of the governing body?			8b	X	L				
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be real	ched	at the	}	1					
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9	<u></u>	X				
<u>Sec</u>	tion B. Policies (This Section B requests information about policies not required by the Internal R	eve <u>nu</u> e	e Code.)							
					Yes	No				
10a	Did the organization have local chapters, branches, or affiliates?			10a	X					
b	If "Yes," did the organization have written policies and procedures governing the activities of such c	hapter	s, affiliates,	1						
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b	X					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing boo	ly befo	re filing the form?	11a	X	<u> </u>				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990									
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X	<u> </u>				
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	X					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," de	escribe	1		1				
	ın Schedule O how this was done			12c	X					
13	Did the organization have a written whistleblower policy?			13	Х	 				
14	Did the organization have a written document retention and destruction policy?			14	X					
15	Did the process for determining compensation of the following persons include a review and approv	al by ir	ndependent	1	1					
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?									
а	The organization's CEO, Executive Director, or top management official			15a	X	-				
Ь	Other officers or key employees of the organization			15b	X	L				
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			1	1	1				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ment v	vith a		}_					
	taxable entity during the year?			16a	 	Х				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate		•			l				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the orga	nızatıo	n's	-						
	exempt status with respect to such arrangements?		···	16b	L.,_					
Sec	tion C. Disclosure									
17	List the states with which a copy of this Form 990 is required to be filed ►MI					<u>-</u> -				
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	「(Sect	ion 501(c)(3)s only)	avaılat	ole					
	for public inspection. Indicate how you made these available Check all that apply	_								
	X Own website X Another's website X Upon request Other (explain		· ·							
19										
	statements available to the public during the tax year			_						
20	State the name, physical address, and telephone number of the person who possesses the books a	nd rec	ords of the organiz	ation:	-					
	NEEL HAJRA - 734-663-0401	14								
	301 N. MAIN STREET, SUITE 300, ANN ARBOR, MI 4810	4 .								

Form	aan	(2013)	
	220	120101	

ANN ARBOR AREA COMMUNITY FOUNDATION

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

Check if Schedule O contains a response or note to any line in this Part VII

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

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the organization	on nor any related	orga	ınıza	tion	cor	mpei	nsat	ed any current officer, o	director, or trustee	
(A)	(B)		(C)					(D)	(E)	(F)
Name and Title	Average	(do	Position (do not check more than one			than	one	Reportable	Reportable	Estimated
	hours per	box	box, unless person is both an officer and a director/trustee)			is bot	h an	compensation	compensation	amount of
	week			from	from related	other				
	(list any hours for	Irecto	1 1 1 1 1 1 1 1 1 1		the organization	organizations (W-2/1099-MISC)	compensation from the			
	related	e or c	itee		1	sated		(W-2/1099-MISC)	(44-27 1099-141130)	organization
	organizations	Individual trustee or director	Institutional trustee		yee	шрег		(11 2) 1000 111100)		and related
	below	ıdual	utton	<u></u>	oldm	est co	 =			organizations
	line)	Ingiv	Instit	Officer	Key employee	Highest compensated employee	Former			
(1) MARTHA DARLING	3.50									
MEMBER		X		X				0.	0.	0.
(2) BHUSHAN KULKARNI	4.00									- -
CHAIR		Х		X	L_			0.	0.	0.
(3) BRIAN CAMPBELL	2.50									
TREASURER		X		Х				0.	0.	0.
(4) JENNIFER POTEAT	2.50									
SECRETARY		Х		X				0.	0.	0.
(5) LEVI THOMPSON	1.30	1						_	_	
MEMBER		Х					_	0.	0.	0.
(6) PAUL SCHUTT	1.50				1	1			_	_
MEMBER		Х				<u> </u>		0.	0.	0.
(7) CYNTHIA CATTRAN	1.50								_	
MEMBER		X				_	L_	0.	0.	0.
(8) ANN DAVIS	2.00			l				_	_	
MEMBER		X				L	_	0.	0.	0.
(9) FREDERICK MCDONALD II	1.50			1	Ì			_ '	_	_
MEMBER		X		L	L	L	_	0.	0.	0.
(10) KEVIN THOMPSON	1.50				l				_	
MEMBER		X		L	_	<u> </u>	L	0.	0.	0.
(11) MICHELLE CRUMM	3.00									
VICE CHAIR		X		<u> </u>	╙	<u> </u>	<u> </u>	0.	0.	0.
(12) ROSE BELLANCA	1.00									
MEMBER		X		<u> </u>	_		_	0.	0.	0.
(13) GEORGE BOREL	1.50	ļ			ļ		ĺ			
MEMBER		X	_	<u> </u>	<u> </u>		<u> </u>	0.	0.	0.
(14) JEFFREY HAUPTMAN	2.00								_	•
MEMBER		X		_	┞_	_	!	0.	0.	0.
(15) ROBERT LAVERTY	1.30	,,							_	
MEMBER	1 30	X	 _	<u> </u>	₩	 	<u> </u>	0.	0.	0.
(16) CHRISTOPHER VAUGHAN	1.30	J.,	ĺ	1	1	1	1	<u> </u>	_	_
MEMBER	1 00	Х	_		-	\vdash	<u> </u>	0.	0.	0.
(17) NANCY MARGOLIS	1.00	J.,						1	^	_
MEMBER		X	<u> </u>		<u>L</u>	<u> </u>	<u>L_</u>	0.	0.	0.

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38-6087967

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		Check if Schedule O cont	ains a respons	e or note to any lin				
]					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ts st	1 a	Federated campaigns	1a					
اقير	b	Membership dues	1b					
A, G	С	Fundraising events	1c					
語記	d	Related organizations	1d					
S,E	е	Government grants (contribut	ions) 1e					
Pis	f	All other contributions, gifts, gran						ľ
돌		similar amounts not included above	ve 1f	5,871,974.	:			į
들의	g	Noncash contributions included in lines	1a-1f \$	2,133,007.]		l '
Contributions, Gifts, Grants and Other Similar Amounts	h	Total. Add lines 1a-1f			5,871,974.	l		,
\Box				Business Code				1
Program Service Revenue	2 a							
	b				_			
	С			. [
ě a	d			. []				
5	е							
ا ته	f	All other program service reve	nue	<u> </u>				
\rightarrow	g	Total. Add lines 2a-2f		•				·
	3	Investment income (including	dividends, inte	erest, and				
		other similar amounts)		▶	699,311.		-27,420.	726,731.
	4	Income from investment of tax	x-exempt bond	proceeds 🕨				
	5	Royalties						
			(ı) Real	(II) Personal				;
	6 a	Gross rents	2,40					,
	b	Less: rental expenses		·				·
	С	, ,	2,40	<u>'</u>				المحجود والمحادو
	d	` '			2,400.			2,400.
Ì	7 a	Gross amount from sales of	(i) Secunties					
		assets other than inventory	13,487,15	<u>-</u>				,
Ì	b	Less cost or other basis	10 000 01	.]		Ì		;
		and sales expenses	12,072,71					,
1		Gain or (loss)	1,414,44					
		Net gain or (loss)			1,414,443.			1,414,443.
e l	8 a	Gross income from fundraising						ì
Other Revenue		including \$	of	l l				
æ		contributions reported on line						·
je		Part IV, line 18		a]
ŏ		Less direct expenses		b				
ļ		Net income or (loss) from fund	_					
ı	9 4	Gross income from gaming ac Part IV, line 19		ا ا				
- 1	h	Less: direct expenses		a				
		Net income or (loss) from gam		<u> </u>				
- 1		Gross sales of inventory, less	-					
	10 4	and allowances	returns	a				,
- {	h	Less: cost of goods sold		ь				
		Net income or (loss) from sale	s of inventory	~				
- 1		Miscellaneous Revenu		Business Code				
	11 a				-			
1	b							
	C							
	ď		·					
	е	Total. Add lines 11a-11d		•				
]	12_	Total revenue. See instructions.		_>]	7,988,128.	0.	-27,420.	2,143,574.
33200 10-29	9 · 13							Form 990 (2013)

Section 501(c)(3) and 501(c)(4) organizations must com	iplete all colum <u>ns. All otl</u>	her organizations mus	t complete column (A)
Check if Schedule O contains a respon	nse or note to any line in	this Part IX	
	/A\	/b\	/ <u>(^)</u>

	Check if Schedule O contains a respon			70	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21	2,621,276.	2,621,276.	<u>.</u>	
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				·
5	Compensation of current officers, directors,	205 202	00 044	05 205	106 115
	trustees, and key employees	305,283.	93,841.	85,327.	126,115.
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	265 126	104 707	165 604	04 665
7	Other salaries and wages	365,136.	104,787.	165,684.	94,665.
8	Pension plan accruals and contributions (include	12 556	2 720	4,701.	A 125
	section 401(k) and 403(b) employer contributions)	12,556. 31,431.	3,720. 9,312.	11,768.	4,135. 10,351.
9	Other employee benefits	47,074.	13,947.	17,625.	15,502.
10	Payroll taxes	47,074.	13,947.	17,025.	15,502.
11	Fees for services (non-employees)				
а	Management				
	Legal				
	Accounting				
	Lobbying				
e	Professional fundraising services. See Part IV, line 17	375,649.	375,649.		
f	Investment management fees	373,043.	373,043.		
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	195,690.	24,835.	101,006.	69.849.
40	· · · · · · · · · · · · · · · · · · ·	79,325.	11,899.	3,966.	69,849. 63,460.
12 13	Advertising and promotion Office expenses	15,525	11,033.	3,7551	
14	Information technology				
15	Royalties				
16	Occupancy	27,344.	8,101.	10,238.	9,005.
17	Travel				
18	Payments of travel or entertainment expenses				.
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	11,029.	3,268.	4,129.	3,632.
20	Interest	38.	11.	14.	13.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	60,754.	18,000.	22,747.	20,007.
23	Insurance	6,514.	1,930.	2,439.	2,145.
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A)				·
	amount, list line 24e expenses on Schedule O.)				
а	EQUIPMENT & MAINTENANCE	66,678.	19,755.	24,965.	21,958.
b	DONOR SERVICES	36,965.	4,665.	9,074.	23,226.
c	EVENTS	24,165.	9,666.	1,208.	13,291.
d	ANNUAL REPORT	16,678.	6,671.	834.	9,173.
е		54,608.	24,325.	13,425.	16,858.
25	Total functional expenses. Add lines 1 through 24e	4,338,193.	3,355,658.	479,150.	503,385.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				5 000
33201	0 10-29-13				Form 990 (2013)

Part X | Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (A) (B) End of year Beginning of year Cash - non-interest-bearing 1 4,214,894. 5,100,169. 2 2 Savings and temporary cash investments 1,047,949. 639,520. Pledges and grants receivable, net 3 3 4 Accounts receivable, net Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary 6 employees' beneficiary organizations (see instr) Complete Part II of Sch L Assets 7 Notes and loans receivable, net 7 8 8 Inventories for sale or use 46,705. 0. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 1,387,866. basis Complete Part VI of Schedule D 10a 1,024,499. 363,367. 1,085,253. 10b b Less accumulated depreciation 26,202,867. 25,082,364. 11 11 Investments - publicly traded securities 30,603,893. 41,065,037. 12 12 Investments - other securities. See Part IV, line 11 13 Investments - program-related See Part IV, line 11 13 14 14 Intangible assets 3,755,874. 1,533,230. 15 15 Other assets See Part IV, line 11 65,836,932. 75,565,322. Total assets. Add lines 1 through 15 (must equal line 34) 16 16 41,952. 30,177. 17 Accounts payable and accrued expenses 17 337,330. 72,213. 18 18 Grants payable 19 Deferred revenue 19 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability. Complete Part IV of Schedule D 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 23 23 Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties 24 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of 1,283,971. 1,028,157. 25 Schedule D 1,663,253 1,130,547. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here complete lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 62,286,561. 72,878,149. 27 Unrestricted net assets 1,887,118. 1,556,626. 28 28 Temporanly restricted net assets 29 Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 958), check here and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building, or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 74,434,775. 64,173,679. 33 33 Total net assets or fund balances 75,565,322. 65,836,932. Total liabilities and net assets/fund balances

orm	990 (2013) ANN ARBOR AREA COMMUNITY FOUNDATION	30-	-608/	90/	<u>Ра</u>	ge 12
	t XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
		İ	_			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	7	,98	8,1	28.
2	Total expenses (must equal Part IX, column (A), line 25)	2		, 33		
3	Revenue less expenses Subtract line 2 from line 1	3		,64		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		,17		
5	Net unrealized gains (losses) on investments	5	6	,48		
6	Donated services and use of facilities	6		2	<u>0,3</u>	50.
7	Investment expenses	7				_
8	Prior period adjustments .	8	<u> </u>			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		10	6,3	45.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,					
	column (B))	10	74	43	<u>4,7</u>	<u>75.</u>
<u>Pa</u>	rt XIII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					<u>Lx </u>
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other		_			
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule	0			-	
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	d on a				ļ
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	X	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis	٠,			
	consolidated basis, or both					1
	Separate basis Consolidated basis Both consolidated and separate basis					
C	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit	,			
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule C)			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Au	dıt			
	Act and OMB Circular A-133?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	iired au	dıt			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits			3b		

Form **990** (2013)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs gov/form990

OMB No 1545-0047

Open to Public Inspection

Name	of t	he organizati	on						E	mployer	identificati	on nu	mber
		_		OR AREA COMM						3	8-6087	967	
Par	ŧΠ	Reason	for Public Char	ity Status (All organiz	ations mu:	st complet	e this part	.) See inst	ructions.		_	-	
The or	rgan	zation is not a	private foundation	because it is: (For lines 1	through 1	11, check	only one b	ox.)					
1 [A church, co	nvention of churches	s, or association of chur	ches desc	nbed in se	ction 170	(b)(1)(A)(i)	١.				
2		A school des	cnbed in section 17	0(b)(1)(A)(ii). (Attach Sc	hedule E)								
з [A hospital or	a cooperative hospi	tal service organization of	described	ın section	170(b)(1)(A)(iii).					
4 [A medical res	search organization o	operated in conjunction	with a hos	pital desci	nbed in se	ction 170	(b)(1)(A)(ii	ii). Enter	the hospital	's nam	ne,
		city, and stat	e										
5 [An organizati	on operated for the	benefit of a college or ur	niversity ov	wned or op	perated by	a governi	mental uni	t describ	ed in		
		section 170	(b)(1)(A)(iv). (Comple	ete Part II)									
6		A federal, sta	te, or local governm	ent or governmental uni	t described	d ın sectio	n 170(b)(1)(A)(v).					
7		An organizati	on that normally rec	eives a substantial part	of its supp	ort from a	governme	ntal unit c	r from the	general	public desc	nbed i	ın
_		section 170(b)(1)(A)(vi). (Comple	te Part II.)									
8 _	X	A community	trust described in s	ection 170(b)(1)(A)(vi).	(Complete	Part II)							
9 L		An organizati	on that normally rec	eives: (1) more than 33 1	1/3% of its	support f	rom contri	butions, m	nembershi	p fees, a	nd gross re	ceipts	from
		activities rela	ted to its exempt fur	nctions - subject to certa	un excepti	ons, and (2) no more	than 33 1	1/3% of its	support	from gross	invest	ment
		income and i	unrelated business t	axable income (less sect	tion 511 ta	x) from bu	sinesses a	cquired b	y the orga	anızatıon	after June 3	30, 197	⁷ 5.
_	_	See section	509(a)(2). (Complete	Part III)									
10	_	An organizati	on organized and or	perated exclusively to te	st for publ	ıc safety. S	See sectio	n 509(a)(4	\$) .				
11 L		_		perated exclusively for the		-				-			or
			• • •	ations described in section		•		!). See se c	ction 509(a)(3). Ch	eck the box	that	
				organization and compl		_			.—_			_	_
г	_	a L Type I		•	ype III - Fui	•	~				n-functional		_
e L		-		t the organization is not									ın
_			-	han one or more publicly		_				9(a)(1) or	section 509	9(a)(2)	
f		•		ten determination from t	ine ins tha	atitisa iy	ре і, туре	ii, or Type	∌ III				
			rganization, check th					of the fall					
g		-		organization accepted ar irectly controls, either al			-					Yes	No
		.,	•		one or tog	etriei with	persons c	iescribed	in (ii) and ((III) DelO VV	11g(i)	163	NO
		_	· ·	upported organization? n described in (i) above?	ı						11g(ii)		<u> </u>
		•	·	person described in (i)		e?				-	11g(iii)		
h		• •	-	about the supported or						•	[119(/	'	
		1 TOVIGE LITE I	Ollowing intomitation	about the supported of	garnzation	(3).							
(i) N	lama	of supported	/::\ EIN	(iii) Type of organization	(iv) Is the c	organization	(v) Did voi	ı notify the	(vi) 1s	s the	(vii) Amoun	t of mo	natanı
ייניו		anization	(ii) EIN		in col. (i) lis			ion in col.	organization	on in co l. red in the		port	псыу
	o, g.	21112411011			governing	document?	(i) of you	support?	U.S	5.?	52,	P 0	
				(see instructions))	Yes	No	Yes	No	Yes	No			
		_											
									l				
					-						<u> </u>		
_													
Total								<u> </u>					

Schedule A (Form 990 or 990-EZ) 2013 ANN ARBOR AREA COMMUNITY FOUNDATION 38-60879

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support								
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
1	Gifts, grants, contributions, and					İ			
	membership fees received (Do not								
	ınclude any "unusual grants.")	3,396,698.	8,243,926.	2,460,537.	5,016,398.	5,892,324.	25,009,883.		
2	Tax revenues levied for the organ-								
	ızatıon's benefit and either paid to								
	or expended on its behalf								
3	The value of services or facilities								
	furnished by a governmental unit to								
	the organization without charge								
4	Total. Add lines 1 through 3	3,396,698.	8,243,926.	2,460,537.	5,016,398.	5,892,324.	25,009,883.		
5	The portion of total contributions								
	by each person (other than a								
	governmental unit or publicly								
	supported organization) included								
	on line 1 that exceeds 2% of the								
	amount shown on line 11,								
	column (f)						8,664,992.		
6	Public support. Subtract line 5 from line 4						16,344,891.		
Sec	ction B. Total Support								
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total		
7	Amounts from line 4	3,396,698.	8,243,926.	2,460,537.	5,016,398.	5,892,324.	25,009,883.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties			1					
	and income from similar sources 9 Net income from unrelated business 529,344. 672,855. 697,602. 651,928. 701,711. 3,2								
9									
	activities, whether or not the								
	business is regularly carried on								
10	Other income. Do not include gain								
	or loss from the sale of capital								
	assets (Explain in Part IV)								
11	Total support. Add lines 7 through 10						28,263,323.		
12	Gross receipts from related activities	etc (see instructi	ons)			12	· · · · · · · · · · · · · · · · · · ·		
13	First five years. If the Form 990 is fo	r the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a sectio	n 501(c)(3)			
	organization, check this box and stop	o here							
Se	ction C. Computation of Publ	ic Support Pe	rcentage						
14	Public support percentage for 2013 (line 6, column (f) d	ivided by line 11, o	column (f))		14	57.83 %		
	Public support percentage from 2012					15	53.68 %		
16a	33 1/3% support test - 2013. If the	organization did no	ot check the box o	n line 13, and line	14 is 33 1/3% or n	nore, check this bo	x and		
	stop here. The organization qualifies						ightharpoons		
t	33 1/3% support test - 2012. If the				line 15 is 33 1/3%	or more, check th	nis box		
	and stop here. The organization qua								
178	10% -facts-and-circumstances tes								
	and if the organization meets the "fac	cts-and-circumstan	ices" test, check t	his box and stop h	ere. Explain in Pa	rt IV how the organ	nization		
	meets the "facts-and-circumstances"	_	=		_		▶∟		
t	10% -facts-and-circumstances tes	t - 2012. If the org	ganization did not o	check a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or		
	more, and if the organization meets t	he "facts-and-circu	ımstances" test, c	heck this box and	stop here. Explair	n in Part IV how the	. —		
	organization meets the "facts-and-cir		•	•			▶⊨		
<u>18</u>	Private foundation. If the organization	on did not check a	box on line 13, 16	a, 16b, 17a, or 17t					
					Sche	edule A (Form 990	or 990-EZ) 2013		

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not		Ì		1		
	ınclude any "unusual grants.")		•				
2	Gross receipts from admissions,				1		
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the		ì		1		
	organization's tax-exempt purpose						
3	Gross receipts from activities that	 					
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to	1			1		
	or expended on its behalf		l			1	I
5	The value of services or facilities						
	fumished by a governmental unit to		İ			[
	the organization without charge						
6	Total, Add lines 1 through 5						
	Amounts included on lines 1, 2, and						
	3 received from disqualified persons		į	ļ	1		
b	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that		ł	ļ	İ	1	
	exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6)						
Se	ction B. Total Support						
Cale	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6					<u> </u>	
10a	Gross income from interest,			-			
	dividends, payments received on				1	1	ı
	securities loans, rents, royalties and income from similar sources	Į					
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975	l		ļ	1		
	Add lines 10a and 10b				1		
	Net income from unrelated business			-			
	activities not included in line 10b,]		
	whether or not the business is regularly carried on	1		1			
12	Other income. Do not include gain						
	or loss from the sale of capital	I		Į.	\$		
13	assets (Explain in Part IV.) Total support. (Add lines 9, 10c, 11, and 12)						
	First five years. If the Form 990 is for	the organization'	s first, second, thii	d. fourth, or fifth	tax vear as a secti	on 501(c)(3) organiz	ation.
	check this box and stop here	and angument	,	<u>.,</u>	,		▶ □
Se	ction C. Computation of Publ	ic Support Pe	rcentage		<u></u>		
	Public support percentage for 2013 (I			column (f))		15	%
	Public support percentage from 2012	• • • • • • • • • • • • • • • • • • • •	•			16	%
	ction D. Computation of Inves						
	Investment income percentage for 20					17	%
18				,	-	18	
	a 33 1/3% support tests - 2013. If the			on line 14, and lin	e 15 is more than		
	more than 33 1/3%, check this box a	•					▶□
	33 1/3% support tests - 2012. If the	·='	•				and
•	line 18 is not more than 33 1/3%, che						_
20	Private foundation. If the organization						
<u>=~</u>		ala not officer a	13	a, a, 100, 01166K	DON AND SEC II		

Schedule A	(Form 990 or 990-EZ) 20 Supplemental Info	13 ANN ARI	BOR AREA	COMMUNITY	FOUNDATION	38-6087967 Page 4
Part IV			•		art II, line 10, Part II, line	e 17a or 17b; and Part III, line 12.
	Also complete this part	for any additiona	al_information. (S	ee instructions).		
		· · · · · · · · · · · · · · · · · ·				
_						
					_	
					•	
						
			ı.			
			·			
						
		 				
						

332024 09-25-13

Schedule A (Form 990 or 990-EZ) 2013

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.urs.gov/form990

OMB No 1545-0047 Open to Public

Inspection

Name of the organization

ANN ADDOD ADDA COMMINITAV POINDATTON

Employer identification number 3.8-6087967

Par	til Organizations Maintaining Donor Advise		CCOUNTS Complete if the
Fai	<u> </u>		Complete if the
	organization answered "Yes" to Form 990, Part IV, line		b) Funds and other accounts
	The second secon	92	b) I and and other accounts
1	Total number at end of year	3,418,880.	
2	Aggregate contributions to (during year)	1,167,497.	
3	Aggregate grants from (during year)	15,148,366.	
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	-	
	are the organization's property, subject to the organization's	_	•
6	Did the organization inform all grantees, donors, and donor a	•	
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose confer	
Das	impermissible private benefit?		
Par		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	line /.
1	Purpose(s) of conservation easements held by the organizati		
	Preservation of land for public use (e.g., recreation or e		•
	Protection of natural habitat	Preservation of a certified hi	storic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form of a co	onservation easement on the last
	day of the tax year		Little and the first and the first
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
C	Number of conservation easements on a certified historic str	• •	2c
ď	Number of conservation easements included in (c) acquired	after 8/17/06, and not on a historic structure	1
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re	leased, extinguished, or terminated by the organ	nization during the tax
_	year >		
4	Number of states where property subject to conservation ear		
5	Does the organization have a written policy regarding the per	· · · · · · · · · · · · · · · · · · ·	Yes No
_	violations, and enforcement of the conservation easements i		
6	Staff and volunteer hours devoted to monitoring, inspecting,		
7	Amount of expenses incurred in monitoring, inspecting, and		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(n)(4)(E	Yes No
_	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conservati	· · · · · · · · · · · · · · · · · · ·	
	include, if applicable, the text of the footnote to the organizar	tion's financial statements that describes the org	ganization's accounting for
Pai	t III Organizations Maintaining Collections o	f Art Historical Treasures or Other	Similar Assets
	Complete if the organization answered "Yes" to Form		J
12	If the organization elected, as permitted under SFAS 116 (AS		nd halance sheet works of art
ıa	historical treasures, or other similar assets held for public ext	•	
	the text of the footnote to its financial statements that descri		public scratec, provide, in rule xiii,
ь	If the organization elected, as permitted under SFAS 116 (AS		palance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, e		
	relating to these items:	addation, or robbaron in further arise or public se	
	(i) Revenues included in Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		▶ \$
2	If the organization received or held works of art, historical tre	easures, or other similar assets for financial dain	provide
2	the following amounts required to be reported under SFAS 1		piorido
	Revenues included in Form 990, Part VIII, line 1	. 10 y 100 000) foliating to those items	▶ \$
a h	Assets included in Form 990, Part X		S
IJ	, locate indiaded in Ferri doo, Fart A		* *

	3310 2 (1 01111 000) = 0.10	OR AREA COM				6087967 Page 2			
Par									
3	Using the organization's acquisition, accession	on, and other records	s, check any of the	following that are a	significant use o	f its collection items			
	(check all that apply):								
а	Public exhibition	d		nange programs					
þ	Scholarly research	е	Other						
С									
4	-	•	· ·	_		Part XIII.			
5	During the year, did the organization solicit or				ar assets				
	to be sold to raise funds rather than to be ma					Yes No			
Par			te if the organization	n answered "Yes" to	Form 990, Part	t IV, line 9, or			
	reported an amount on Form 990, Par								
1a	Is the organization an agent, trustee, custodi	an or other intermedi	ary for contribution	s or other assets no	t included				
	on Form 990, Part X?					└─ Yes └─ No			
b	If "Yes," explain the arrangement in Part XIII	and complete the foll	owing table						
						Amount			
C	Beginning balance				1c				
d	Additions during the year				1d				
е	Distributions during the year				1e				
f	Ending balance		-10		1f	 			
	Did the organization include an amount on Fo					☐ Yes ☐ No			
	If "Yes," explain the arrangement in Part XIII								
Par	t V Endowment Funds. Complete if					nack 4-1 Four years book			
		(a) Current year 62,286,561.	(b) Prior year 53,376,888.	(c) Two years back 52,695,780.	(d) Three years t 44,043,5				
1a	Beginning of year balance								
b	Contributions	222. 2,503,036.							
С	Net investment earnings, gains, and losses	9,094,604.	8,231,026.	2,840,068.	6,080,3				
d	Grants or scholarships	2,621,276.	1,951,305.	2,306,043.	1,731,0	2,504,509.			
е	Other expenditures for facilities	340 030	216 150	200 420	172 .	206 044			
_	and programs	348,032.	316,158.	208,420.	173,7				
f	Administrative expenses	1,368,885.	1,077,986.	1,010,218.	889,6				
g	End of year balance	72,878,149.	62,286,561.	53,376,888.	52,695,7	44,043,598.			
2	Provide the estimated percentage of the curr	ent year end balance 100.00		i)) held as:					
a	Board designated or quasi-endowment		_%						
b	Permanent endowment ► .00	% •00 %							
С	Temporarily restricted endowment								
_	The percentages in lines 2a, 2b, and 2c should be a sh				Al	_			
За	Are there endowment funds not in the posse	ssion of the organiza	tion that are held a	na administered for	tne organization				
	by:								
	(i) unrelated organizations					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
_	(ii) related organizations	lieted as required an	s Schadula P2			3a(ii) X 3b			
	If "Yes" to 3a(ii), are the related organizations Describe in Part XIII the intended uses of the	•				30			
Par	t VI Land, Buildings, and Equipm		witherit fulfus.						
<u> </u>	Complete if the organization answere		Part IV. line 11a S	ee Form 990 Part X	line 10				
	Description of property	(a) Cost or ot	1		Accumulated	(d) Book value			
	besomption of property	basis (investm	1 ' '	1 ' '	epreciation	(a) Dook value			
12	Land	,		, ,	·				
	Buildings	1,128,6	567.		172,711.	955,956.			
	Leasehold improvements				: = , · = = ·	1			
	Equipment	259,1	199.		190,656.	68,543.			
	Other		-			1			
	I. Add lines 1a through 1e (Column (d) must e	gual Form 990, Part	X, column (B), line 1	(O(c))		1,024,499.			

	Complete it the organization answered Tes to Form 990, Fart I	7, III THE THE OF THE SEE FORM	1 990, Fait A, IIII6 23.
1.	(a) Description of liability	(b) Book value	
(1)	Federal income taxes		
(2)	LIABILITY TO LIFE BENEFICIARIES OF		
(3)	PLANNED GIFTS	487,048.	
(4)	ASSETS HELD FOR OTHERS	541,109.	
(5)			
(6)			
(7)			
(8)			
(9)			
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	1,028,157.	<u> </u>

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

38-6087967 Page 4 ·ANN ARBOR AREA COMMUNITY FOUNDATION Schedule D (Form 990) 2013 Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a 14,332,450. Total revenue, gains, and other support per audited financial statements Amounts included on line 1 but not on Form 990, Part VIII, line 12: 6,388,425 a Net unrealized gains on investments 20,350. 2b b Donated services and use of facilities 2c c Recovenes of prior year grants 106,345. 2d d Other (Describe in Part XIII.) 6,515,120. Add lines 2a through 2d 2e 7,817,330. Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b 170,798. 4b b Other (Describe in Part XIII) 170,798. c Add lines 4a and 4b 4c 988,128. Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 4,288,755. Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: 2a a Donated services and use of facilities 2b **b** Prior year adjustments 2c c Other losses d Other (Describe in Part XIII) 2d 2e e Add lines 2a through 2d 4.288. 755. 3 Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b 49,438. 4b b Other (Describe in Part XIII) 49,438. 4c c Add lines 4a and 4b 4,338,193. Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 Part XIII Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. PART V, LINE 4: BEGINNING WITH THE 2009 REPORTING YEAR, THE COMMUNITY FOUNDATION'S BOARD OF TRUSTEES DETERMINED THAT ASSETS THAT WOULD QUALIFY AS DONOR-RESTRICTED ENDOWMENTS, BUT FOR THE FOUNDATION'S VARIANCE POWER, SHOULD BE CLASSIFIED AS BOARD-DESIGNATED ASSETS. THESE ARE INCLUDED IN THE PERCENT REPORTED ON SCHEDULE D, PART V, LINE 2A. THE INTENDED USE OF THE FUNDS IS DETERMINED BY THE DONORS, AND THE INVESTMENT AND SPENDING POLICIES ARE DETERMINED BY THE BOARD, FOLLOWING THE UNIFORM PRUDENT MANAGEMENT OF INSTITUTIONAL FUNDS ACT (UPMIFA). PART XI, LINE 2D - OTHER ADJUSTMENTS: CHANGE IN VALUE OF CHARITABLE REMAINDER TRUST 106,345. 332054 09-25-13 Schedule D (Form 990) 2013

Schedule D (Form 990) 2013 ANN ARBOR AREA COMMUNITY FOUNDATION	38-6087967 Page 5
PartXIII Supplemental Information (continued)	
PART XI, LINE 4B - OTHER ADJUSTMENTS:	
AGENCY ENDOWMENT FUND INVESTMENT INCOME - SFAS 136	13,915.
AGENCY ENDOWMENT FUND REALIZED GAINS - SFAS 136	64,762.
AGENCY ENDOWMENT FUND GRANT INCOME - SFAS 136	92,121.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	170,798.
PART XII, LINE 4B - OTHER ADJUSTMENTS:	
AGENCY ENDOWMENT FUND GRANT EXPENSES - SFAS 136	33,742.
AGENCY ENDOWMENT FUND MISC EXPENSES - SFAS 136	15,696.
TOTAL TO SCHEDULE D, PART XII, LINE 4B	49,438.
	
	

Schedule D (Form 990) ANN ARBOR ARE

Rart XIII Supplemental Information (continued)

Part VII Investments - Other Securities. See Form 990, Part X, line 12.		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
BERENS GLOBAL	3,161,885.	FMV
BLACKSTONE	3,884,855.	FMV
COMMONFUND CAPITAL PRIVATE EQUITY VI	714,851.	FMV
COMMONFUND CAPITAL PRIVATE EQUITY VII	710,558.	FMV
COMMONFUND CAPITAL VENTURE PTNRS VIII	752,794.	FMV
LANDMARK EQUITY PARTNERS XIV, LP	632,196.	FMV
NEWLIN ENERGY PARTNERS	502,296.	FMV
NORTHGATE VENTURE PARTNERS III	282,170.	FMV
POINTER OFFSHORE LTD	4,534,708.	FMV
SIGULER & GUFF	542,842.	FMV
HIGHCLERE INTL INVESTORS FD	2,000,512.	FMV
AEW GLOBAL PROPERTY SECURITIES FUND, LP	2,252,914.	FMV
COLCHESTER GLOBAL BOND AI FUND	1,842,419.	FMV
LEGACY VENTURE VI (QP), LLC	293,728.	FMV
DENHAM COMMODITY PARTNERS FUND VI, LP	247,016.	FMV
LANDMARK- XV	104,723.	FMV
200401 05 04 40		Sahadula D (Farm 2001)

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

OMB No 1545-0047

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. ► Attach to Form 990. ► See separate instructions.

Department of the Treasury Internal Revenue Service

▶ Information about Schedule F (Form 990) and its instructions is at www.irs.gov/form990.

Inspection

	of the organization				į		
ANN A Pari	RBOR AREA COMMUNITY FOU	INDATION	es Outside	the United States. Comp	lete if the organi		-6087967 vered "Yes" on
reit	Form 990, Part IV, line		co Galoiae	ano ornica otates. comp	ioto ii tile organi.	Lation answ	10.00 100 011
1	For grantmakers. Does the	organization					_
	assistance, the grantees' eli		_	sistance, and the selection	criteria used to	award the	
	grants or assistance?						☐Yes ☐No
2	For grantmakers. Describe	e ın Part V t	he organizati	on's procedures for monitor	oring the use o	f its arants	and other
_	assistance outside the Unite			5.1 5 p. 65645.765 767 1.1161.115			
3	Activities per Region. (The fo			7			
	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity liste a program se describe specific service(s) in ri	rvice, c	(f) Total expenditures for and investments in region
	CENTRAL AMERICA & THE CARRIBEAN			INVESTMENTS			1 7,077,000
(2)							
(3)	·						
(4)							
(5)					-		
(6)							
(7)							
(8)							
(9)							
(10)							
(11)	<u> </u>						
(12)							
(13)		-					
(14)			i				
(15)							
(16)							
(17)							
3a	Sub-total						17,077,000
b	Total from continuation						
	sheets to Part I						
С	Totals (add lines 3a and 3b)	1					1 7,077,000

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. PartII

-	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	me of (b) IRS code (c) Region (d) Purpose of (e) Amount of (f) Manner of (g) Amount of (h) Easton and EIN grant cash grant disbursement assistance of non-c	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
Ξ	i								·
(2)									
(9)									
4									
(2)									
9									
2									
(8)	:								
(6)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter N

3 Enter total number of other organizations or entitles

Schedule F (Form 990) 2013

Page 3

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. Schedule F (Form 990) 2013

Part III Grants ar

_	•		• 			;					:) 2013
(h) Method of valuation (book, FMV, appraisal, other)																			Schedule F (Form 990) 2013
(g) Description of non-cash assistance																			Sch
(f) Amount of non-cash assistance																			
(e) Manner of cash disbursement														:					
(d) Amount of cash grant																			
(c) Number of recipients																			
tecipients of grant or assistance (b) Region (c) Number of recipients																			
(a) Type of grant or assistance	(1)	(2)	(6)	(4)	(5)	(9)	(2)	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	

Part	V Foreign Forms		
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	√ Yes	□ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471)	 ✓ Yes	□ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621)	√ Yes	□ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	☐ Yes	 No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	☑ No

Part V	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).
·	
	······································
- 	
·	
- 	
••••••••••••••••••••••••••••••••••••••	

SCHEDULE ! (Form 990)

Department of the Treasury Internal Revenue Service

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047	20 12	Open to Public	Inspection
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Employer identification number 38-6087967 X Yes Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection ANN ARBOR AREA COMMUNITY FOUNDATION General Information on Grants and Assistance Name of the organization Part I

criteria used to award the grants or assistance?

٠ ا	1	1		1	ĺ													
2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States	V, line 21, for any		(h) Purpose of grant or assistance	SEE ATTACHED LIST														
	es" to Form 990, Part I	id Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part I n be duplicated if additional space is needed.	ind Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IN an be duplicated if additional space is needed.	Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed.	the United States. Complete if the organization answered "Yes" to Form 990, Part IN ditional space is needed.	. Complete if the organization answered "Yes" to Form 990, Part IN seded.	(g) Description of non-cash assistance											
	anization answered "Y						. Complete if the organization answered "Y seded.								inization answered "Ye	(f) Method of valuation (book, EMV, appraisal, other)		
	complete if the orga							(d) Amount of cash cash assistance	0									
	Part II Grants and Other Assistance to Governments and Organizations in the United States. ((d) Amount of cash grant	2,331,550.											
					(c) IRC section if applicable													
		Governments and \$5,000 Part II can b	o Governments and n \$5,000 Part II can	to Governments and in \$5,000 Part II can	Governments and \$5,000 Part II can b	Governments and (\$5,000 Part II can b	Governments and \$5,000 Part II can b	o Governments and n \$5,000 Part II can I	(b) EIN									
		recipient that received more than \$5	Part II Grants and Other Assistance to Gover recipient that received more than \$5,000	1 (a) Name and address of organization or government	SEE ATTACHED LIST													

~	Enter total number of section 501(c)(3) and government organizations	nd government or		listed in the line 1 table			•	135.
က	Enter total number of other organizations listed in the line 1 table	s listed in the line 1	1 table			:	•	
LH HA	LHA For Paperwork Reduction Act Notice, see the Instructions for Fo	, see the Instructi	ions for Form 990.				Schedule I (Form 990) (2013)	990) (2013)

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Page 2 (f) Description of non-cash assistance 38-6087967 (e) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed. THE PROGRAM OFFICER. ON A CASE-BY-CASE BASIS, INTERIM REPORTS Part IV. Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information ARE REQUIRED FROM RECIPIENTS OF MULTI-PAYMENT GRANTS BEFORE PROGRESS THE PROGRAM (d) Amount of non-cash assistance GRANT RECIPIENTS AND THESE REPORTS ARE ALSO REVIEWED BY ANN ARBOR AREA COMMUNITY FOUNDATION (c) Amount of cash grant (b) Number of recipients FINAL REPORTS ARE REQUIRED FROM ALL (a) Type of grant or assistance PAYMENTS ARE ISSUED. 2) Schedule I (Form 990) (2013) LINE REVIEWED BY H OFFICER Pârtill PART

Schedule I (Form 990) (2013)

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SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Noncash Contributions

Attach to Form 990.

► Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

ANN ARBOR AREA COMMUNITY FOUNDATION

Employer identification number 38-6087967

Par	t I Types of Property								
	· · · · · · · · · · · · · · · · · · ·	(a)	(b)	(c)		(d)			
		Check if applicable	Number of contributions or	Noncash contril amounts report		Method of d			
		applicable		Form 990, Part VII		noncash contrib	ution a	mount	5
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes			_					
8	Intellectual property								
9	Securities - Publicly traded	X	25	2,020,	536.	QUOTED MARE	(ET	PRI	CE
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14									
15									
16									
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies				·				
21	Taxidermy		ļ						
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts	<u> </u>	·		 				
25	Other ()								
26	Other ()								
27	Other ()			<u> </u>					
28	Other (<u> </u>		<u> </u>	-	<u> </u>			
29	Number of Forms 8283 received by the organic								
	for which the organization completed Form 82	83, Part IV,	Donee Acknowled	gement [29			Tv 1	Г
00-	5 - 45				4 00 1	to a final and a final a final		Yes	No
30a	During the year, did the organization receive b	•		· ·			Į.	l i	ĺ
	at least three years from the date of the initial	contribution	, and which is not	required to be used	tor exen	npt purposes for			x
	the entire holding period?			•			30a		
	If "Yes," describe the arrangement in Part II.			-64d					
31	Does the organization have a gift acceptance						31	<u> </u>	
s∠a	Does the organization hire or use third parties	or related o	iganizations to sol	cit, process, or sell	noncash		20-	x	
	contributions?						32a	1	<u> </u>
	If "Yes," describe in Part II. If the organization did not report an amount in	columa (a)	for a tune of proce	rty for which colum	n (a) in at	pocked	1		
33	· ·	Column (C)	ioi a type of prope	ITY TOT WHICH COIUM	ııı (a) is cr	ieckea,	1		1
	describe in Part II.						1	I	

Schedule M	(Form 99	90) (2013)	ANN A	KROK	AREA	COMMONT	TY FOUND	ATION	38-6087967	Page 2
Partell	Suppl	emental	Informa	tion. Pr	ovide the	information requ	uired by Part I, I	nes 30b, 32b	, and 33, and whether the organ	ization
	is repor	ting in Part t for any ad	i, column (i	D), the ni	umber of c	contributions, th	e number of iter	ms received,	or a combination of both. Also co	mplete
	uns pan	. 101 any au		ormation						
SCHEDU	LE M	, LINE	32B:							
MA DIZEM	מז ת גו	GEGIID	TMTDO	3.0.0	COLD	mun ou ou	DD 027ED 6			
MARKET	ABLE	SECUR	TTIES	ARE	SOLD	THROUGH	BROKERS	•		
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SCHEDULE 0

(Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. ➤ Attach to Form 990 or 990-EZ.

OMB No 1545-0047 Open to Public

Department of the Treasury Internal Revenue Service

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.us.gov/form990

Inspection

Name of the organization **Employer identification number** ANN ARBOR AREA COMMUNITY FOUNDATION 38-6087967 FORM 990, PART VI, SECTION B, LINE 11: PRIOR TO FILING, FORM 990 AND FORM 990T ARE REVIEWED BY THE AUDIT COMMITTEE, AND COPIES ARE PROVIDED TO ALL MEMBERS OF THE BOARD. FORM 990, PART VI, SECTION B, LINE 12C: IN THE EVENT A BOARD MEMBER HAS A CONFLICT OF INTEREST WITH RESPECT TO A MATTER BEFORE THE BOARD, THAT MEMBER IS REQUIRED TO ABSTAIN FROM VOTING ON THAT ISSUE. FORM 990, PART VI, SECTION B, LINE 15: THE BOARD REVIEWS THE COMPENSATION OF THE CEO USING COMPARABILITY DATA, AND CONTEMPORANEOUSLY SUBSTANTIATES ITS DELIBERATIONS AND DECISION. THE CEO REVIEWS THE COMPENSATION OF OTHER OFFICERS USING COMPARABILITY DATA, AND PRESENTS HER COMPENSATION RECOMMENDATIONS IN SUMMARY TO A COMMITTEE OF THE BOARD FOR APPROVAL. HER REVIEW AND THEIR DECISION IS SUBSTANTIATED CONTEMPORANEOUSLY. THE TRUSTEE COMMITTEE ANNUALLY REVIEWS OFFICER/KEY STAFF COMPENSATION AT THE SAME TIME. FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS AND POLICIES ARE AVAILABLE UPON REQUEST. FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE, AAACF.ORG. FORM 990 IS AVAILABLE ON GUIDESTAR.ORG AND AAACF.ORG. FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN VALUE OF CHARITABLE REMAINDER TRUST:

106,345.

Name of the organization ANN ARBOR AREA COMMUNITY FOUNDATION	Employer identification number 38-6087967
FORM 990, PART XII, LINE 2C:	
PROCESS OF OVERSIGHT OF THE AUDIT OF ORGANIZATION'S	
FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOU	NTANT BY THE
AUDIT COMMITTEE HAS NOT CHANGED FROM LAST YEAR.	
AMENDED FORM 990, PART IV, LINE 14B:	
FORM 990 IS BEING AMENDED TO CHANGE THE RESPONSE FOR FORM	
990, PART IV, LINE 14B TO "YES" AND TO ATTACH A COMPLETED	SCHEDULE F
AND FORM(S) 926.	
	· · · · · · · · · · · · · · · · · · ·

Schedule O (Form 990 or 990-EZ) (2013)

332212 09-04-13