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EXTENDED TO NOVEMBER 15, 2016 Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

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

OMB No 1545-0052

		dar year 2015 or tax year beginning	11 050-11 una ita separate	, and ending		Open to Public Inspection
		foundation		, and chang	A Employer identification	numher
IVAI	110 01	logitation				i number
F	יאיז	EL AND JAMES FLINN FOUN	DATTON		38-2143122	
	_	nd street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number	 -
		W. FORT STREET	•	1950	313-309-34	36
		own, state or province, country, and ZIP or foreign p	netal code			
		ROIT, MI 48226	ustai couc		C If exemption application is p	ending, check here
		all that apply: Initial return	Initial return of a fo	rmor public charity	 D 1 Foreign organizations	chack hara
u	IIIGUK	Final return	Amended return	tities public charity	D i rorcigii organizations	s, clicux liele
		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test,
ш (hack	type of organization: X Section 501(c)(3) ex			1	
	_		Other taxable private founda	tion	E If private foundation sta under section 507(b)(1)	
LES	_	rket value of all assets at end of year J Accounting		Accrual	1	
) —	her (specify)	Accidal	F If the foundation is in a under section 507(b)(1)	
\ <i>''</i>		59,909,272. (Part I, colu.		oasis)		(D), Check liefe
	irt I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
عت		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received				(
		Check X if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	45.	45.		STATEMENT 2
	4	Dividends and interest from securities	1,671,940.	1,671,940.		STATEMENT 3
	-	Gross rents				
		Net rental income or (loss)				
	_	Net gain or (loss) from sale of assets not on line 10	-221,461.			STATEMENT 1
를	b	Gross sales price for all 8,342,748.				
Revenue	7	Capital gain net income (from Part IV, line 2)		184,100.		
æ	8	Net short-term capital gain			N/A	
	9	Income modifications				
	10a	Gross sales less returns and allowances				
		Less Cost of goods sold				
	C	Gross profit or (loss)	<u> </u>			
	11	Other Income St DEC 0 1 2016	්ර් 169,2 4 8.	7,562.		STATEMENT 4
	12	Total Add lines 1 through 11	ဖြူ , 619 , 772 .	1,863,647.	0.	
\$	13	Compensation of officers, directors, trusteest etc. Other employee salaries and wages.	335,200.	101,872.	0.	233,328.
2016	14	Other employee salaries and wages	72,500.	24,887.	0.	47,613.
က်		Pension plans, employee benefits	50,786.	15,790.	0.	34,996.
ဆစ္က		Legal fees STMT 5	4,813.	1,497.		3,316.
٣		Accounting fees STMT 6	15,800.	4,912.	0.	10,888.
and Administrative Expense	ŀ	Other professional fees STMT 7	305,986.	61,431.	0.	244,555.
ว ≨ั		Interest	119,980.	8,016.	ļ <u>-</u>	17 766
řř		Taxes STMT 8	113,300.	8,016.	0.	17,766.
ΞĔ	19	Depreciation and depletion	25,435.	7,908.	0.	17,527.
Ę	20	Occupancy Travel conferences and meetings	31,081.	5,381.	0.	25,700.
֖֖֖֖֝֓֞֓֓֓֓֓֟֝֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	21	Travel, conferences, and meetings	3,822.	1,188.	0.	2,634.
) an	22	Printing and publications Other expenses STMT 9	48,831.	15,183.	0.	33,649.
ting	23		40,031.	13,103.	 -	33,043.
Operating	24	Total operating and administrative	1,014,234.	248,065.	0.	671,972.
ŏ	25	expenses. Add lines 13 through 23 Contributions, gifts, grants paid	2,465,190.	240,003.		2,465,190.
		Total expenses and disbursements	2,300,100			2,303,130.
	20	Add lines 24 and 25	3,479,424.	248,065.	0.	3,137,162.
	27	Subtract line 26 from line 12:	-, -, -, -, -, -, -,		 	3,13,,102,
	ľ	Excess of revenue over expenses and disbursements	-1,859,652.			
	Ι.	Net investment income (if negative, enter -0-)		1,615,582.		
		Adjusted net income (if negative, enter -0-)			0.	
5235 11-2		LHA For Paperwork Reduction Act Notice, see	instructions		100	Form 990-PF (2015)

Г	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	<u> </u>
<u></u>	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	202,762.	145,455.	145,455.
	2	Savings and temporary cash investments	366,565.	844,377.	844,377.
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	8	Receivables due from officers, directors, trustees, and other			
	١	disqualified persons			
	١,				
	7	Other notes and loans receivable			
	١.	Less: allowance for doubtful accounts			
Assets	8	Inventories for sale or use			
Ass	9	Prepaid expenses and deferred charges			
	l	Investments - U.S. and state government obligations	10 125 200	10 250 100	00 014 505
		Investments - corporate stock STMT 10	19,135,389.	18,359,180.	23,214,725.
	C	Investments - corporate bonds STMT 11	12,341,095.	12,398,003.	11,877,796.
	11	Investments - land, buildings, and equipment basis			
]	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 12	22,898,231.	21,378,860.	23,028,330.
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation			
	15	Other assets (describe ► STATEMENT 13)	939,057.	939,057.	798,589.
		Total assets (to be completed by all filers - see the		·	
	'	instructions. Also, see page 1, item 1)	55,883,099.	54,064,932.	59,909,272.
_	17		30,000,000		
	18	Grants payable			
"	19	Deferred revenue			
Liabilities	۱				
Ē	20	Loans from officers, directors, trustees, and other disqualified persons			
Lia	21	Mortgages and other notes payable			
	22	Other liabilities (describe)			
		T 1 A 11 1 1112 (1 1 1 1 1 1 1 1 1 1 1 1 1 1	0.	0.	
_	23	Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here	0.		
		, — "	1		
ņ		and complete lines 24 through 26 and lines 30 and 31.	FF 003 000	E4 064 030	
5	l	Unrestricted	55,883,099.	54,064,932.	
ala.	25	Temporarily restricted			
ä	26	Permanently restricted			
Ĕ		Foundations that do not follow SFAS 117, check here			
7		and complete lines 27 through 31			
2	27	Capital stock, trust principal, or current funds			
Net Assets or Fund Balance	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
As	29	Retained earnings, accumulated income, endowment, or other funds			
Š	30	Total net assets or fund balances	55,883,099.	54,064,932.	
	31	Total liabilities and net assets/fund balances	55,883,099.	54,064,932.	
T 6	art	Analysis of Changes in Net Assets or Fund B	alances		
=		······································			
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30	h	
		st agree with end-of-year figure reported on prior year's return)		1	55,883,099.
		r amount from Part I, line 27a		2	-1,859,652.
3	Othe	r increases not included in line 2 (itemize) GRANTS RETU	RNED	3	41,485.
4	Add	lines 1, 2, and 3		4	54,064,932.
		eases not included in line 2 (itemize)		5	0.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	54,064,932.
					Form 990-PF (2015)

Part IV Capital Gains and I	osses for Tax on Inv	estmen	t Income							3
	kınd(s) of property sold (e.g., r e; or common stock, 200 shs. I			(b) I	How ac - Purc - Dona	quired hase ation		acquired lay, yr.)	(d) Date sold (mo., day, yr.)))
1a SCHWAB REDEMPTION	S			<u> </u>		P				
b K-1 PARTNERSHIP I	NCOME					P				
c TIFF MULTI-ASSET						P				
d HIGHBRIDGE CAP CO	RP					P				
e										
(e) Gross sales price	f) Depreciation allowed (or allowable)	, ,	st or other basis expense of sale		_			ain or (loss s (f) minus		
a 6,455,457.			6,556,19	3.					-100,73	6.
b 387,291.									387,29	
c 1,500,000.			1,626,99	8.	L.				-126,99	
d									24,54	3.
е										
Complete only for assets showing gain		e foundation	on 12/31/69			(1)	Gains (C	Col. (h) gain	minus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any			COI.	(k), but r Losses	not less that (from col. (n -U-) or h))	
a									-100,73	
b									387,29	
C									-126,99	8.
d									24,54	3.
e										
2 Capital gain net income or (net capital lo	ss) { If gain, also enter in If (loss), enter -0- ii			}	_2				184,10	0.
3 Net short-term capital gain or (loss) as d		(6):		5						
If gain, also enter in Part I, line 8, column	ı (c).			H					184,10	0
If (loss), enter -0- in Part I, line 8 Part V Qualification Under	Section 4940(e) for F	Seduced	Tay on Net	Inv	Aetn	ent Inco	\me		104,10	<u> </u>
										
(For optional use by domestic private found	anons subject to the section 45	40(a) iax on	net investment in	come	;.)					
If section 4940(d)(2) applies, leave this part	blank.									
Was the foundation liable for the section 49-	10 tay on the distributable amou	unt of any vo	or in the bace nor	Chor					Yes X	Mo
If "Yes," the foundation does not qualify und			•	iou r					1 tc5 [AL]	IVU
1 Enter the appropriate amount in each co				ntries						
(a)	(b)			(c)			Т		(d) oution ratio	
Base periód years Calendar year (or tax year beginning in)	Adjusted qualifying distril	butions	Net value of no			use assets		Distrib (col. (b.) div	oution ratio vided by col. (c))	
2014	2,849	.159.		64	.11	0,600		(0011 (0) 011	.0444	41
2013	2,603					7,286			.0429	
2012	2,839				•	2,777			.0495	
2011	2,983					8,286			.0518	
2010	2,307					9,452			.0415	
		,			,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
2 Total of line 1, column (d)							2		.2302	64
3 Average distribution ratio for the 5-year i	pase period - divide the total on	line 2 hv 5	or hy the number	of ve	ars		<u> </u>			
the foundation has been in existence if le			or by the number	0. 90	u. 0		3	ł	.0460	53
the foundation has been in existence in te	oo man o youro						٣			
4 Enter the net value of noncharitable-use	assets for 2015 from Part X, lin	ie 5					4	6	2,134,89	8.
5 Multiply line 4 by line 3							5		2,861,49	8.
,, - ,										
6 Enter 1% of net investment income (1%	of Part I, line 27b)						6		16,15	6.
7 Add lines E and 6									2 977 65	. 1
7 Add lines 5 and 6							7		2,877,65	4.
8 Enter qualifying distributions from Part >	(II, line 4						8	<u></u>	3,137,16	2.
If line 8 is equal to or greater than line 7, See the Part VI instructions.	check the box in Part VI, line 11	b, and comp	lete that part usin	g a 19	% tax r	ate.				

			21431			Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 49	<u> 148 -</u>	see ins	tru	ctio	ns)
18	a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.	Ţ				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
t	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	1		1	6,1	56.
	of Part I, line 27b	$\neg \uparrow$				
(c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3		3		1	6,1	56.
4		4			<u> </u>	0.
5		5		1	6.1	56.
6	· · · · · · · · · · · · · · · ·	<u> </u>		-	- , -	
	a 2015 estimated tax payments and 2014 overpayment credited to 2015					
	b Exempt foreign organizations - tax withheld at source					
	c Tax paid with application for extension of time to file (Form 8868)	- 1				
	· · · · · · · · · · · · · · · · · · ·					
	d Backup withholding erroneously withheld Tatal and the and approach. Add trace Se through Set	.		6	0 2	<i>1</i> 1
_	Total credits and payments. Add lines 6a through 6d	7		0	, , ,	$\frac{41.}{49.}$
8		8				49.
9	· · · · · · · · · · · · · · · · · · ·	9		_	- -	
10		10		_5	<u>3,1</u>	36.
	Enter the amount of line 10 to be: Credited to 2016 estimated tax ► 53,136. Refunded ►	11				<u>0.</u>
	art VII-A Statements Regarding Activities					
18	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	1	<u> </u>		Yes	
	any political campaign?		<u> </u>	la		X
t	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?		<u> </u>	Ь		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	i or		ı		
	distributed by the foundation in connection with the activities		- 1			
(c Did the foundation file Form 1120-POL for this year?		<u>L</u> 1	lc_		X
(d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			1		
	(1) On the foundation. ► \$ 0 . (2) On foundation managers. ► \$ 0 .			-		
6	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			ı		
	managers. ▶ \$ 0 .					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		Ĺ			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
48	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		7	a	X	
ŧ	b If "Yes," has it filed a tax return on Form 990-T for this year?			lb	X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or		\	ı	1	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state la	aw				
	remain in the governing instrument?		1.	6	x	
7				7	X	
·			-			
A:	a 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)			J		
	of each state as required by General Instruction G? If "No," attach explanation		١,	<u>,</u> [х	
0		dar	<u> _</u>	3b	Λ	
3	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calend	141	ŀ	۱	İ	v
40	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			0		

ETHEL AND JAMES FLINN FOUNDATION 38-2143122 Page 5 Part VII-A | Statements Regarding Activities (continued)

		İ	Yes	No
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	L
	Website address WWW.FLINNFOUNDATION.ORG		436	
14	The books are in care of ► ANDREA M. COLE Telephone no. ►313-30			
	Located at ▶333 W. FORT STREET, SUITE 1950, DETROIT, MI ZIP+4 ▶48	3220		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	3.1	. /₃▶	·
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank,		Yes	
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			ĺ
Ď٤	foreign country ► art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	—		<u> </u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	Ñc
1:	a During the year did the foundation (either directly or indirectly):		103	1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	1	1	1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			1
	a disqualified person?			ł
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No			1
	(5) Transfer any income or assets to a disqualified person (or make any of either available	1		ł
	for the benefit or use of a disqualified person)?			1
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			1
	if the foundation agreed to make a grant to or to employ the official for a period after	1		l
	termination of government service, if terminating within 90 days.)			1
ı	b If any 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)?	1b]]	X
	Organizations relying on a current notice regarding disaster assistance check here			
(c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			l
	before the first day of the tax year beginning in 2015?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			İ
1	a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			ĺ
	before 2015? Yes X No			
	If "Yes," list the years \blacktriangleright			1
١	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			1
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	l		ĺ
	statement - see instructions.) N/A	<u>2b</u>		
(c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.]]	
_	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			1
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			l
	during the year? Yes X No			
	b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after			1
	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			i
	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,	AL		ĺ
	Form 4720, to determine if the foundation had excess business holdings in 2015.) N/A	3b		₩
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	1	X

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b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

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Total. Add lines 1 through 3

All other program-related investments. See instructions.

Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

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3,121,006.

5

16,156.

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Part XIII · Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI,		10010 prior to 20 11		
line 7				3,132,074.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			8,897.	
b Total for prior years:				
, ,		0.		
3 Excess distributions carryover, if any, to 2015:				
a From 2010				
b From 2011		ı		
c From 2012				
d From 2013				
e From 2014	_			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: \triangleright \$ 3,137,162.			2 22 2	
a Applied to 2014, but not more than line 2a			8,897.	
b Applied to undistributed income of prior		2		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0			
(Election required - see instructions)	0.			2 100 065
d Applied to 2015 distributable amount				3,128,265.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a))			 	0.
6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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	j	_		
assessed		0.		
d Subtract line 6c from line 6b. Taxable		2		
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line			0	
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must				
be distributed in 2016		İ		3,809.
7 Amounts treated as distributions out of				3,003.
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	0.	j		
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2011	į			
b Excess from 2012				
c Excess from 2013		į	1	
d Excess from 2014				
e Excess from 2015				

523581 11-24-15

Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During the Y		- dynnon		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	 	
a Paid during the year				
ADULT WELL BEING SERVICES	NO INDIVIDUAL	PC	TO IMPLEMENT	
1423 FIELD STREET	RELATIONSHIP		DIALECTICAL BEHAVIORAL	
DETROIT, MI 48214			THERAPY	100,00
ASSOCIATION FOR CHILDREN'S MENTAL	NO INDIVIDUAL	PC	GENERAL OPERATING	
HEALTH	RELATIONSHIP		SUPPORT	
6017 W. ST. JOE HWY, SUITE 200			1	
LANSING, MI 48917				10,00
ASSOCIATION FOR CHILDREN'S MENTAL	NO INDIVIDUAL	PC	CAPACITY BUILDING	
HEALTH	RELATIONSHIP		GRANT TO IMPROVE	
6017 W. ST. JOE HWY, SUITE 200			WEBSITE	
LANSING, MI 48917				25,00
,				
CHILDREN'S CENTER OF WAYNE COUNTY	NO INDIVIDUAL	PC	TO IMPLEMENT	
79 ALEXANDRINE WEST	RELATIONSHIP		INCREDIBLE YEARS	
DETROIT, MI 48201	<u> </u>		THERAPEUTIC MODEL	53,00
COMMUNITY HEALTH AND SOCIAL SERVICES	NO INDIVIDUAL	PC	TO INTEGRATE	
5635 WEST FORT STREET	RELATIONSHIP		BEHAVIORAL HEALTH INTO	
DETROIT, MI 48209			DELIVERY SYSTEM AT	
,			PRIMARY CLINIC	100,00
Total SEE COI	NTINUATION SHEE	T(S)	▶ 3a	2,465,19
b Approved for future payment				
NONE				
HONE				
				· - ·- ·
		1	1	

Form 990-PF (2015) ETHEL AND JAN	MES FLINN F	OUNDATION		38-2	143122 Page 1
Part XVI-A Analysis of Income-Pro	ducing Activities	5			
Enter gross amounts unless otherwise indicated.	Unrelated bu	siness income		by section 512, 513, or 514	(e)
3	(a)	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
- a			 		
å	— } -		╀╾┼		
·	 -		{ 		
<u> </u>			++-		
0	-		├ -		
e					
			↓		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash		_			
investments	1		14	45.	
4 Dividends and interest from securities			14	1,671,940.	
5 Net rental income or (loss) from real estate:			t		
a Debt-financed property			1-1-		
b Not debt-financed property	<u> </u>		+ - + -		
6 Net rental income or (loss) from personal	 		 		
)		1 1		
property 7. Other results and the second	523000	10,451.	15	158,797.	
7 Other investment income	523000	10,451.	1-13	130,737.	
8 Gain or (loss) from sales of assets other	ì		10	221 461	
than inventory	<u> </u>		18	-221,461.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					_
11 Other revenue:				1	
a					
b			1-1		
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)	-	10,451.		1,609,321.	0
13 Total . Add line 12, columns (b), (d), and (e)				13	1,619,772
(See worksheet in line 13 instructions to verify calculations	c \			,· <u> </u>	
Part XVI-B Relationship of Activities		nlichment of E	vomnt l	Purposos	
Part AVI-B Relationship of Activities	s to the Accomp	phoninent of E	xempt i		
Line No. Explain below how each activity for which			A contribut	ed importantly to the accomp	lishment of
the foundation's exempt purposes (other t	than by providing funds t	for such purposes).			
		<u> </u>			
					
					
					

RAN. PLLC | Firm's EIN ► 38-1357951

Title

Check

Firm's name ► PLANTE & MORAN, PLLC

Firm's address ► 2601 CAMBRIDGE CT., SUITE 500

AUBURN HILLS, MI 48326

Preparer's signature

Phone no. 248-375-7100

Form 990-PF (2015)

Paid

Preparer

Use Only

Signature of officer or trustee

Print/Type preparer's name

Part XV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation)							
Recipient	If recipient is an individual.		,				
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount			
	or substantial contributor	recipient	 				
CODVED HEALTH COVED	TANDTUTDIAL	D.C.	TO EVENE GO OCCUPRING				
CORNER HEALTH CENTER	NO INDIVIDUAL	PC	TO EXPAND CO-OCCURRING				
47 N HURON STREET	RELATIONSHIP		MENTAL HEALTH AND				
YSPILANTI, MI 48197			SUBSTANCE USE DISORDER TREATMENT SERVICES	98,000			
		-					
COVENANT COMMUNITY CARE, INC.	NO INDIVIDUAL	PC	TO INTEGRATE				
559 WEST GRAND BOULEVARD	RELATIONSHIP		BEHAVIORAL HEALTH INTO				
ROYAL OAK, MI 48216	1		DELIVERY SYSTEM AT ALL				
			PRIMARY CLINICS	100,000			
COVENANT HOUSE MICHIGAN	NO INDIVIDUAL	PC	TO IMPLEMENT COGNITIVE				
2959 MARTIN LUTHER KING JR BLVD.	RELATIONSHIP		BEHAVIOR THERAPY				
DETROIT, MI 48208	KEENT TORDITT		TREATMENT	62,000			
221.021, 12 1020		 					
DEAF COMMUNITY ADVOCACY NETWORK	NO INDIVIDUAL	PC	TO PROVIDE CULTURALLY				
2111 ORCHARD LAKE ROAD, SUITE 101	RELATIONSHIP		COMPENTENT SERVICES				
SYLVAN LAKE, MI 48320			FOR DEAF AND HEARING				
			IMPAIRED COMMUNITY	30,000			
DEDDEGGEOU AND DEDOLAR GUIDDONG ALLE	NO INDIVIDUAL	na	TO FOUND TON WEGGE				
DEPRESSION AND BIPOLAR SUPPORT ALLI	NO INDIVIDUAL	PC	TO ESTABLISH MICHIGAN				
55 E. JACKSON CHICAGO, IL 60604	RELATIONSHIP		SUPPORT GROUP	45 000			
CHICAGO, 11 00004			+	45,000			
DETROIT CRIME COMMISSION	NO INDIVIDUAL	PC	TO PROVIDE MENTAL				
28 W. ADAMS, SUITE 300	RELATIONSHIP		HEALTH FIRST AID LAW				
DETROIT, MI 48226		 	ENFORCEMENT TRAINING	35,000.			
EASTER SEALS- MICHIGAN, INC.	NO INDIVIDUAL	PC	TO DEVELOP MENTAL				
2387 E. WALTON BLVD	RELATIONSHIP		HEALTH SCREENING				
AUBURN HILLS, MI 48326		ļ	KIOSKS	27,000			
GUIDANCE CENTER (THE)	NO INDIVIDUAL	PC	TO IMPLEMENT				
1301 ALLEN ROAD	RELATIONSHIP		TRAUMA-INFORMED				
SOUTHGATE, MI 48195			TREATMENT	88,000			
HEGIRA PROGRAMS INC.	NO INDIVIDUAL	PC	TO INTEGRATE				
8623 NORTH WAYNE ROADD, SUITE 200	RELATIONSHIP		BEHAVIORAL HEALTH				
WESTLAND, MI 48185			TREATMENT IN PRIMARY				
UNIDA HODD HEATEN GAGGER	NO THEFTITION	ļ	CARE	60,000			
HENRY FORD HEALTH SYSTEM	NO INDIVIDUAL	PC	TO INTEGRATE				
ONE FORD PLACE, SUITE 5A	RELATIONSHIP		STANDARDIZED				
DETROIT, MI 48202			BEHAVIORAL HEALTH				
			SCREENING AND TREATMENT WITHIN	100 000			
Total from continuation sheets			Premium Milling	2,177,190			
i otal troni continuation succis				,۱۱۱,130			

Name and address (home or business) ally foundation manager or substantial contributor recipient HENRY FORD HEALTH SYSTEM ONE FORD PLACE, SUITE 5A DETROIT, MI 48202 RELATIONSHIP JUVENILE ASSESSMENT CENTER NO INDIVIDUAL PC TO SUPPORT SCHOOL-BASED MENTAL HEALTH SERVICES FOR AUTISM SPECTRUM DISORDER JUVENILE ASSESSMENT CENTER NO INDIVIDUAL PC TO EXPAND MENTAL HEALTH TREATMENT FOR AT-RISK ADULTS IN JUVENILE JUSTICE	nount
Recpient show any relationship to any flow any relationship to any flow any relationship to any flow any relationship to any flow any relationship to any flow and relationship to any flow and the flow and any flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow and the flow	nount
Name and address (home or business) Name and address (home or business) Name and address (home or business) any foundation manager or substantial contributor No. INDIVIDUAL No. INDIVIDUAL RELATIONSHIP RELATIONSHIP No. INDIVIDUAL PC NO. SUPPORT SCHOOL-BASED MENTAL HEALTH SERVICES FOR AUTISM SPECTRUM DISORDER JUVENILE ASSESSMENT CENTER NO. INDIVIDUAL RELATIONSHIP RELATIONSHIP NO. INDIVIDUAL PC TO. SUPPORT SCHOOL-BASED MENTAL HEALTH SERVICES FOR AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER TO EXPAND MENTAL HEALTH TREATMENT FOR AUTISM SPECTRUM ATTEMATION HEALTH TREATMENT FOR AUTISM SPECTRUM TO EXPAND MENTAL HEALTH TREATMENT FOR AUTISM SPECTRUM ATTEMATOR AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER AUTISM SPECTRUM DISORDER TO EXPAND MENTAL HEALTH TREATMENT FOR AUTISM SPECTRUM ATTEMATOR AUTISM SPECTRUM TO EXPAND MENTAL HEALTH TREATMENT FOR AUTISM SPECTRUM TO EXPAND MENTAL HEALTH SERVICES FOR POLICY RESEARCH AND EVALUATION TO IMPROVE CHILDREN'S MENTAL HEALTH SERVICES MENTAL HEALTH SERVICES NAMI METRO P.O. BOX 852 NORTHYLILE, MI 48167	nount
ONE FORD PLACE, SUITE 5A DETROIT, MI 48202 RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP RELATIONSHIP ROUNTSHIP RELATIONSHIP REL	-
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TMPROVE MENTAL HEALTH SERIVCES MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MICHIGAN MICHIGAN MICHIGAN'S CHILDREN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN MICHIGAN	
MICHIGAN'S CHILDREN MICHIGAN'S CHILDREN MO INDIVIDUAL PC FOR POLICY RESEARCH AND EVALUATION TO IMPROVE CHILDREN'S MENTAL HEALTH SERIVCES NAMI METRO P.O. BOX 852 NOTHVILLE, MI 48167	
RELATIONSHIP AND EVALUATION TO IMPROVE CHILDREN'S MENTAL HEALTH SERIVCES NAMI METRO P.O. BOX 852 NORTHVILLE, MI 48167	50,000
RELATIONSHIP AND EVALUATION TO IMPROVE CHILDREN'S MENTAL HEALTH SERIVCES NAMI METRO P.O. BOX 852 NORTHVILLE, MI 48167	
LANSING, MI 48933 IMPROVE CHILDREN'S MENTAL HEALTH SERIVCES NO INDIVIDUAL P.O. BOX 852 NORTHVILLE, MI 48167 IMPROVE CHILDREN'S MENTAL HEALTH SERIVCES POR GENERAL OPERATING SUPPORT	
NAMI METRO P.O. BOX 852 NORTHVILLE, MI 48167 MENTAL HEALTH SERIVCES POR GENERAL OPERATING SUPPORT	
NAMI METRO P.O. BOX 852 RELATIONSHIP SUPPORT NORTHVILLE, MI 48167	
P.O. BOX 852 RELATIONSHIP SUPPORT NORTHVILLE, MI 48167	50,000
P.O. BOX 852 RELATIONSHIP NORTHVILLE, MI 48167	
NORTHVILLE, MI 48167	
NAMI MICHIGAN NO INDIVIDUAL PC FOR GENERAL OPERATING	10,000.
VAMI MICHIGAN NO INDIVIDUAL PC FOR GENERAL OPERATING	
The second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second secon	
401 S. WASHINGTON AVENUE, SUITE 104 RELATIONSHIP SUPPORT	
LANSING, MI 48906	10,000
NAMI WASHTENAW COUNTY NO INDIVIDUAL PC FOR GENERAL OPERATING	
1100 N. MAIN RELATIONSHIP SUPPORT	
ANN ARBOR, MI 48104	10,000
NAMIONAL DULI ANDURANTE MOLECULE (WIN BOD NO INDIVIDUAL	
NATIONAL PHILANTHROPIC TRUST (WIN FOR NO INDIVIDUAL PC TO COMMISSION STUDY OF WARRIORS) WARRIORS) RELATIONSHIP VETERAN'S MENTAL	
RELATIONSHIP LINE ROAD, SUITE 150 RELATIONSHIP SERVICES IN MICHIGAN	
JENKINTOWN, PA 19046	10,000
	10,000
DAKWOOD HEALTH CARE SYSTEM FOUNDATION NO INDIVIDUAL PC TO EXPAND INTEGRATED	
15500 LUNDY PARKWAY RELATIONSHIP CARE MODEL IN HIGH	E0 000
DEARBORN, MI 48126 SCHOOLS Total from continuation sheets	50,000.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor PEDIATRIC FOUNDATION OF MICHIGAN NO INDIVIDUAL PC TO TRAIN PHYSICIANS 106 W. ALLEGAN STREET, SUITE 510 RELATIONSHIP AND CLINICAL STAFF AT 32 HEALTH CENTERS IN LANSING, MI 48126 SOUTHEAST MICHIGAN TO IMPLEMENT 88,000. PEDIATRIC FOUNDATION OF MICHIGAN NO INDIVIDUAL PC TO PROVIDE CLINICAL 106 W. ALLEGAN STREET, SUITE 510 RELATIONSHIP TRAINING TO IMPROVE LANSING, MI 48126 HEALTH OUTCOMES FOR FOSTER CHILDREN AND HTUOY 50,000. REGENTS OF THE UNIVERSITY OF MICH NO INDIVIDUAL PC TO TRAIN A NETWORK OF 4250 PLYMOUTH ROAD, SPC 5763 RELATIONSHIP LICENSED MENTAL HEALTH ANN ARBOR, MI 48109 PROFESSIONALS IN TREATMENT INTERVENTIONS FOR 100,000. REGENTS OF THE UNIVERSITY OF MICH NO INDIVIDUAL PC TO IMPLEMENT AND 4250 PLYMOUTH ROAD, SPC 5763 RELATIONSHIP EVALUATE AN ANN ARBOR, MI 48109 EVIDENCE-BASED ONLINE MONITORING. PSYCHO-EDUCATION 96,000. REGENTS OF THE UNIVERSITY OF MICH NO INDIVIDUAL PC TO EXPAND SERVICES FOR 4250 PLYMOUTH ROAD, SPC 5763 RELATIONSHIP STUDENTS IN NEED OF ANN ARBOR, MI 48109 COMPREHENSIVE MENTAL HEALTH 100,000. ROSE HILL CENTER NO INDIVIDUAL PC TO PROVIDE ADVANCED RELATIONSHIP 5130 ROSE HILL BLVD. CLINCIAL TRAINING FOR HOLLY, MI 48442 MENTAL HEALTH STAFF 32,000. SOUTHWEST COUNSELING SOLUTIONS NO INDIVIDUAL PC TO DEVELOP AN RELATIONSHIP 1920 25TH STREET INTEGRATED, DETROIT, MI 48210 COLLABORATIVE MODEL TO IMPROVE MENTAL HEALTH IN EARLY CHILDHOOD 50,000. SPECTRUM CHILD & FAMILY SERVICES NO INDIVIDUAL PC TO IMPLEMENT 28303 JOY ROAD RELATIONSHIP TRAUMA-INFORMED COGNITIVE BEHAVIORAL WESTLAND, MI 48185 THERAPY TREATMENT 90,000. ST. JOSEPH MERCY ANN ARBOR NO INDIVIDUAL TO IMPLEMENT PC 5301 MCAULEY DRIVE RELATIONSHIP COMPREHENSIVE YPSILANTI, MI 48152 INTEGRATED BEHAVIORAL HEALTH/PRIMARY CARE MODEL 100,000. STARFISH FAMILY SERVICES, INC. NO INDIVIDUAL PC TO IMPLEMENT RELATIONSHIP TRAUMA-INFORMED 30000 HIVELEY INKSTER MI 48141 PROGRAM FOR CHILDREN AGES 6-12 56,000. Total from continuation sheets

Part XV Supplementary Informat				
3 Grants and Contributions Paid During th	If recipient is an individual,			-
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	
STARFISH FAMILY SERVICES, INC.	NO INDIVIDUAL	PC	TO IMPLEMENT	
30000 HIVELEY	RELATIONSHIP		INTEGRATED HEALTH CARE	
INKSTER, MI 48141		 	IMPLEMENTATION MODEL	35,000
		}		
STARR COMMONWEALTH	NO INDIVIDUAL	PC	TO SUPPORT	
13725 STARR COMMONWEALTH ROAD	RELATIONSHIP		STARR-PSYCHSYSTEMS	
ALBION, MI 49224		 	AUTISM SERVICES	50,000
UNIVERSITY OF DETROIT MERCY	NO INDIVIDUAL	PC	PROGRAM EVALUATION OF	
4001 WEST MCNICHOLS	RELATIONSHIP		THE EMOTIONAL SKILLS	
DETROIT, MI 48221			BUILDING CURRICULUM	50,000
WAYNE STATE UNIVERSITY	NO INDIVIDUAL	PC	FUTURE OF NURSING	
640 TEMPLE, SUITE 750	RELATIONSHIP		PROGRAM	
DETROIT, MI 48202		<u> </u>		15,000
WAYNE STATE UNIVERSITY	NO INDIVIDUAL	PC	TO PROVIDE UNIVERSAL	
640 TEMPLE, SUITE 750	RELATIONSHIP		SCREENING WITH	
DETROIT, MI 48202			MOTIVATIONAL	
			INTERVIEWING USING EVIDENCE-BASED	100 000
WAYNE STATE UNIVERSITY	NO INDIVIDUAL	PC	TO IMPLEMENT AND	100,000
640 TEMPLE, SUITE 750	RELATIONSHIP		EVALUATE MENTAL HEALTH	
DETROIT, MI 48202]	TREATMENT GUIDELINE	
,	l	1	FOR TRANSITION FROM	
			INPATIENT TO	50,000
ADRIAN DOMINICAN SISTERS	NO INDIVIDUAL	PC	MATCHING GIFT	
1257 E SIENA HEIGHTS DR	RELATIONSHIP		1	
ADRIAN, MI 49221			 	500
CHRIST CHURCH GROSSE POINTE	NO INDIVIDUAL	PC	MATCHING GIFT	
61 GROSSE POINTE BLVD	RELATIONSHIP	1	1	
GROSSE POINTE FARMS, MI 48236				5,000
CUIDTOM CUITIQUI CROSCO DOTAMA	NO INDIVIDUAL	P.G.	KA MOUTING CT DM	
CHRIST CHURCH GROSSE POINTE	NO INDIVIDUAL	PC	MATCHING GIFT	
61 GROSSE POINTE BLVD	RELATIONSHIP			200
GROSSE POINTE FARMS, MI 48236		 	 	200
DENISON UNIVERSITY	NO INDIVIDUAL	PC	MATCHING GIFT	
100 W COLLEGE ST	RELATIONSHIP	"	milding Gifi	
GRANVILLE, OH 43023		}	1	100
Total from continuation sheets				

ETHEL AND JAMES FLINN FOUNDATION

3 Grants and Contributions Paid During the Y		1		-
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
DETROIT EDUCATIONAL TELEVISION	NO INDIVIDUAL	PC	MATCHING GIFT	
FOUNDATION	RELATIONSHIP	"	AATCHING GITT	
1 CLOVER CT	NDEMITORONIII			
WIXOM, MI 48393				1
,			-	
DETROIT INSTITUTE OF ARTS	NO INDIVIDUAL	PC	MATCHING GIFT	
5200 WOODWARD AVE	RELATIONSHIP			
DETROIT, MI 48202	 			2
DETROIT ROTARY FOUNDATION	NO INDIVIDUAL	PC	MATCHING GIFT	
241 MADISON AVE, BOX 6	RELATIONSHIP			
DETROIT, MI 48226				2
DETROIT SYMPHONY ORCHESTRA	NO INDIVIDUAL	PC	MATCHING GIFT	
3711 WOODWARD AVE	RELATIONSHIP			
DETROIT, MI 48201				2
DETROIT ZOOLOGICAL SOCIETY	NO INDIVIDUAL	PC	MATCHING GIFT	
8450 W 10 MILE RD	RELATIONSHIP			
ROYAL OAK, MI 48067	<u> </u>			2
EASTERN MICHIGAN UNIVERSITY	NO INDIVIDUAL	PC	MATCHING GIFT	
FOUNDATION 1349 S HURON ST #1	RELATIONSHIP			
YPSILANTI, MI 48197				1
110111111111111111111111111111111111111				
FOCUS: HOPE	NO INDIVIDUAL	PC	MATCHING GIFT	1
1400 OAKMAN BLVD	RELATIONSHIP			
DETROIT, MI 48238		1		2
GROSSE POINTE ANIMAL ADOPTION SOCIETY	NO INDIVIDUAL	PC	MATCHING GIFT	
296 CHALFONTE AVE	RELATIONSHIP			
GROSSE POINTE FARMS, MI 48236				5,0
	lo Taratana	na	AN MONTHS STEE	
GROSSE POINTE ANIMAL ADOPTION SOCIETY	NO INDIVIDUAL	PC	MATCHING GIFT	
296 CHALFONTE AVE	RELATIONSHIP			1
GROSSE POINTE FARMS, MI 48236	1	1		1
GROSSE POINTE PARK FOUNDATION	NO INDIVIDUAL	PC	MATCHING GIFT	
15115 E JEFFERSON AVE	RELATIONSHIP			
GROSSE POINTE PARK, MI 48230				2
Total from continuation sheets				

ETHEL AND JAMES FLINN FOUNDATION 38-2143122

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
THE HENRY FORD	NO INDIVIDUAL	PC	MATCHING GIFT	
20900 OAKWOOD BLVD	RELATIONSHIP			_
DEARBORN, MI 48124	- 			20
HIGGINS LAKE FOUNDATION	NO INDIVIDUAL	PC	MATCHING GIFT	
207 TERRACE DR	RELATIONSHIP		MICHING CITT	
ROSCOMMON, MI 48653				10
IMMACULATE CONCEPTION UKRAINIAN	NO INDIVIDUAL	PC	MATCHING GIFT	
CATHOLIC SCHOOLS	RELATIONSHIP			
29500 WESTBROOK AVE				
WARREN, MI 48092				1,00
KIEVE-WAVUS EDUCATION, INC. 42 KIEVE RD	NO INDIVIDUAL RELATIONSHIP	PC	MATCHING GIFT	
NOBLEBORO, ME 04555	RELATIONSHIP			10
				 -
KYIV MOHYLA FOUNDATION	NO INDIVIDUAL	PC	MATCHING GIFT	
P.O. BOX 46009	RELATIONSHIP			
CHICAGO, IL 60646			<u> </u>	30
		7.0		
MENTAL HEALTH ASSOCIATION IN MI 2112 UNIVERSITY PARK DR	NO INDIVIDUAL RELATIONSHIP	PC	MATCHING GIFT	
OKEMOS, MI 48864	KEEATTONSIIII			1,00
		-		
MICHIGAN AIDS COALITION	NO INDIVIDUAL	PC	MATCHING GIFT	!
429 LIVERNOIS ST	RELATIONSHIP			
FERNDALE, MI 48220				10
MICOVICAN CANCER PROGRAPH	NO THEFTY PURT	, no	MARGUING CIER	
MICHIGAN CANCER RESEARCH 2000 TOWN CENTER	NO INDIVIDUAL RELATIONSHIP	PC	MATCHING GIFT	
SOUTHFIELD, MI 48075				20
MICHIGAN WOMEN'S FOUNDATION	NO INDIVIDUAL	PC	MATCHING GIFT	
615 GRISWOLD ST SUITE 1020	RELATIONSHIP			
DETROIT, MI 48226				10
NEIGHBORHOOD CLUB	NO INDIVIDUAL	PC	MATCHING GIFT	
17150 WATERLOO ST GROSSE POINTE, MI 48230	RELATIONSHIP			50
Total from continuation sheets		<u> </u>	_l	

ETHEL AND JAMES FLINN FOUNDATION 38-2143122

3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	oona suuton	
PENRICKTON CENTER FOR BLIND CHILDREN	NO INDIVIDUAL	PC	MATCHING GIFT	
26530 EUREKA RD	RELATIONSHIP			
FAYLOR, MI 48180	<u> </u>		 	200
PLANNED PARENTHOOD - MID & SOUTHEAST	NO INDIVIDUAL	PC	MATCHING GIFT	
MICHIGAN	RELATIONSHIP			
3100 PROFESSIONAL DR				
ANN ARBOR, MI 48104				200
PLYMOUTH UNITED CHURCH OF CHRIST	NO INDIVIDUAL	PC	MATCHING GIFT	
600 E WARREN AVE DETROIT, MI 48201	RELATIONSHIP			5,000
DBIRO11, M1 40201	-			3,000
	VO TURNING	ng.	WARGUING GIRM	
REGENTS OF THE UNIVERSITY OF MICHIGAN 4250 PLYMOUTH ROAD, SPC 5763	NO INDIVIDUAL RELATIONSHIP	PC	MATCHING GIFT	
ANN ARBOR, MI 48109				5,000
REGENTS OF THE UNIVERSITY OF MICHIGAN	NO INDIVIDUAL	PC	MATCHING GIFT	
4250 PLYMOUTH ROAD, SPC 5763	RELATIONSHIP			
ANN ARBOR, MI 48109				140
REGENTS OF THE UNIVERSITY OF MICHIGAN	NO INDIVIDUAL	PC	MATCHING GIFT	
4250 PLYMOUTH ROAD, SPC 5763	RELATIONSHIP			1
ANN ARBOR, MI 48109				100
REGENTS OF THE UNIVERSITY OF MICHIGAN 4250 PLYMOUTH ROAD, SPC 5763	NO INDIVIDUAL RELATIONSHIP	PC	MATCHING GIFT	
ANN ARBOR, MI 48109	REDATIONSHIP			100
REGENTS OF THE UNIVERSITY OF MICHIGAN	NO INDIVIDUAL	PC	MATCHING GIFT	
4250 PLYMOUTH ROAD, SPC 5763	RELATIONSHIP			
ANN ARBOR, MI 48109		 	_	100
REGENTS OF THE UNIVERSITY OF MICHIGAN	NO INDIVIDUAL	PC	MATCHING GIFT	
4250 PLYMOUTH ROAD, SPC 5763	RELATIONSHIP			4.00
ANN ARBOR, MI 48109	<u> </u>			100
	1			
ROSE HILL FOUNDATION	NO INDIVIDUAL RELATIONSHIP	PC	MATCHING GIFT	
5130 ROSE HILL BLVD. HOLLY, MI 48442	MEDITIONSHIP			200
Total from continuation sheets		-		1

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
HE ROTARY FOUNDATION OF ROTARY	NO INDIVIDUAL	PC	MATCHING GIFT	
NTERNATIONAL	RELATIONSHIP			
241 MADISON AVE, BOX 6		1		
DETROIT, MI 48226	_			2
SEVEN PONDS NATURE CENTER, INC.	NO INDIVIDUAL	PC	MATCHING GIFT	
3854 CRAWFORD RD	RELATIONSHIP	-	i	
ORYDEN, MI 48428				1
SISTERS OF ST. BASIL THE GREAT	NO INDIVIDUAL	PC	MATCHING GIFT	
710 FOX CHASE RD	RELATIONSHIP			
JENKINTOWN, PA 19046				5
STARFISH FAMILY SERVICES, INC.	NO INDIVIDUAL	PC	MATCHING GIFT	
30000 HIVELEY	RELATIONSHIP	-		
INKSTER, MI 48141				1
STARR COMMONWEALTH	NO INDIVIDUAL	PC	MATCHING GIFT	
13725 26 MILE RD	RELATIONSHIP			
ALBION, MI 49224				1
			WARRANTING CLERK	
STRATFORD FESTIVAL OF AMERICA	NO INDIVIDUAL RELATIONSHIP	PC	MATCHING GIFT	
660 WOODWARD AVE DETROIT. MI 48226	RELATIONSHIP			5
DIIRO11, MI 40220	-			
THE TAFT SCHOOL	NO INDIVIDUAL	PC	MATCHING GIFT	
110 WOODBURY RD	RELATIONSHIP			
WATERTOWN, CT 06795				2
		 na	(AMOUTING STEE	
THE DETROIT INSTITUTE FOR CHILDREN	NO INDIVIDUAL	PC	MATCHING GIFT	
2075 E WEST MAPLE RD B-203 COMMERCE CHARTER TWP, MI 48390	RELATIONSHIP			2
COMMERCE CHARLER THE, MI 40370	-			
TRIUMPH MISSIONARY BAPTIST CHURCH	NO INDIVIDUAL	PC	MATCHING GIFT	
15801 JOY RD	RELATIONSHIP			
DETROIT, MI 48228				4
UKRAINIAN CATHOLIC EDUCATION	NO INDIVIDUAL	PC	MATCHING GIFT	
FOUNDATION	RELATIONSHIP			1
2247 W CHICAGO AVE				
CHICAGO, IL 60622				1,0

3 Grants and Contributions Paid During the	e Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	7 11100111
NITED UKRAINIAN AMERICAN RELIEF	NO INDIVIDUAL	PC	MATCHING GIFT	
OMMITTEE	RELATIONSHIP			
206 COTTMAN AVE				
HILADELPHIA, PA 19111				30
NIVERSITY LIGGETT SCHOOL	NO INDIVIDUAL	PC	MATCHING GIFT	
1045 COOK RD	RELATIONSHIP			
ROSSE POINTE WOODS, MI 48236		<u> </u>		20
VALE UNIVERSITY	NO INDIVIDUAL	PC	MATCHING GIFT	
P.O. BOX 2038	RELATIONSHIP			
NEW HAVEN, CT 06521	· · · · · · · · · · · · · · · · · · · ·	 		20
		<u> </u>	 	·
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<u> </u>			 	
		!		
Total from continuation sheets	L	L		

Part XV Supplementary Information
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution
NAME OF RECIPIENT - HENRY FORD HEALTH SYSTEM
TO INTEGRATE STANDARDIZED BEHAVIORAL HEALTH SCREENING AND TREATMENT
WITHIN MACOMB COUNTY HOSPITAL
NAME OF RECIPIENT - PEDIATRIC FOUNDATION OF MICHIGAN
TO TRAIN PHYSICIANS AND CLINICAL STAFF AT 32 HEALTH CENTERS IN
SOUTHEAST MICHIGAN TO IMPLEMENT EVIDENCE-BASED STANDARDIZED BEHAVIORAL
HEALTH SCREENING TOOLS AT WELL-CHILD VISITS
NAME OF RECIPIENT - REGENTS OF THE UNIVERSITY OF MICH
TO TRAIN A NETWORK OF LICENSED MENTAL HEALTH PROFESSIONALS IN TREATMENT
INTERVENTIONS FOR MILITARY MEMBERS AND FAMILIES
NAME OF RECIPIENT - REGENTS OF THE UNIVERSITY OF MICH
TO IMPLEMENT AND EVALUATE AN EVIDENCE-BASED ONLINE MONITORING,
PSYCHO-EDUCATION PROGRAM FOR COLLEGE STUDENTS WITH DEPRESSION AND
ANXIETY DISORDER.
NAME OF RECIPIENT - WAYNE STATE UNIVERSITY
TO PROVIDE UNIVERSAL SCREENING WITH MOTIVATIONAL INTERVIEWING USING
EVIDENCE-BASED TECHNOLOGY.
NAME OF RECIPIENT - WAYNE STATE UNIVERSITY
TO IMPLEMENT AND EVALUATE MENTAL HEALTH TREATMENT GUIDELINE FOR
TRANSITION FROM INPATIENT TO OUTPATIENT CARE

FORM 99	0-PF G	AIN OR (LOSS) F	ROM SALE	OF A	ASSETS		STA	TEMENT	1
DESCRIP	(A) TION OF PROPERTY	_			MANNER CQUIRED		TE IRED	DATE	SOLD
SCHWAB	REDEMPTIONS			PUF	RCHASED				
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	C	CATN	(F)	1 00
	6,455,457.	6,574,463.		0.	————	0.		-119	
DESCRIP	(A) TION OF PROPERTY				ANNER CQUIRED		TE IRED	DATE	SOLI
K-1 PAR	TNERSHIP INCOME	_		PUF	RCHASED				
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	c.	GAIN	(F)	SS
	387,291.	387,291.		0.		0.	·		0.
DESCRIP	(A) TION OF PROPERTY		-		ANNER CQUIRED	DA ACQU	TE IRED	DATE	SOLD
TIFF MU	LTI-ASSET			PUF	RCHASED			<u></u>	
	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE SALE	OF	(E) DEPRE	c.	GAIN	(F)	ss
	1,500,000.	1,626,998.		0.		0.		-126	998.

(A) DESCRIPTION OF PRO	PERTY						ANNEF QUIRE		DAT LUQU <i>A</i>		DATE S	OLD
HIGHBRIDGE CAP COF	RP.	_				PUR	CHASE	ED -		<u></u>		
(B) GROSS SALES PRI	CE	(C COST OTHER	OR	EXPE	D) NSE ALE	OF		E)	•	GAI	(F) N OR LOS	s
	0.		0.			0.			0.		24,5	43.
CAPITAL GAINS DIVI	DENDS	FROM P	ART IV									0.
TOTAL TO FORM 990-	PF, PA	ART I,	LINE 6A						=		-221,4	61.
FORM 990-PF INTER	REST ON	N SAVIN	GS AND	TEMPOR.	ARY	CASH	INVE	STME	ENTS	ST	ATEMENT	2
SOURCE				(A) EVENUE R BOOK		NET	(E INVE	STME	ENT		(C) ADJUSTED ET INCOM	
MONEY MARKET				<u> </u>	45.			4	15.	•		0.
TOTAL TO PART I, I	INE 3				45.			4	15.			0.
FORM 990-PF	DIV	/IDENDS	AND IN	TEREST	FRO	M SE	CURIT	TIES		ST	ATEMENT	3
SOURCE		ROSS MOUNT	CAPI GAI DIVID	NS		(A) VENUI		ET]	(B) INVES INCO		(C) ADJUST NET INC	
DIVIDENDS & BOND FUNDS	1,67	71,940.		0.	1,6	71,9	40.	1,67	71,94	10.		0.
TO PART I, LINE 4	1,67	71,940.		0.	1,6	71,9	40.	1,67	71,94	10.		0.

FORM 990-PF	OTHER	INCOME	<u>.</u>	STATEMENT 4
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
MINING INTERESTS		167,619.	167,619.	0.
MISCELLANEOUS INCOME		1,629.	1,629.	0.
K-1 PARTNERSHIP INCOME		0.	-161,686.	0.
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	169,248.	7,562.	0.
FORM 990-PF	LEGA	L FEES	<u> </u>	STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	4,813	1,497	. 0.	3,316.
TO FM 990-PF, PG 1, LN 16A =	4,813	1,497	0.	3,316.
FORM 990-PF	ACCOUNT	ING FEES	S	STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
AUDIT FEES	15,800	4,912.	. 0.	10,888.
TO FORM 990-PF, PG 1, LN 16B	15,800	4,912	. 0.	10,888.
FORM 990-PF C	THER PROFE	SSIONAL FEES	£	STATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER FEES	28,835			•
	52,466			
INVESTMENT EXPENSES MEDIA RELATIONS	224,685	0.	. 0.	224,685.

FORM 990-PF	TAX	ES		STATEMENT 8
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOI	
PAYROLL TAXES EXCISE TAXES	25,781. 94,199.	8,016		0. 17,766. 0. 0.
TO FORM 990-PF, PG 1, LN 18	119,980.	8,016	•	0. 17,766.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 9
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOI	
INSURANCE TELEPHONE/INTERNET SUPPLIES EQUIPMENT MISCELLANEOUS	5,001. 4,234. 6,525. 30,366. 2,705.	1,555 1,317 2,029 9,441 841	• •	0. 3,446. 0. 2,918. 0. 4,496. 0. 20,925. 0. 1,864.
TO FORM 990-PF, PG 1, LN 23	48,831.	15,183	·	33,649.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 10
DESCRIPTION		В	OOK VALUE	FAIR MARKET VALUE
COMMOM STOCK MUTUAL FUNDS			18,359,180.	23,214,725.
TOTAL TO FORM 990-PF, PART I		18,359,180. 23,214		

FORM 990-PF C	CORPORATE BONDS		STATEMENT 11		
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE		
FIXED INCOME MUTUAL FUNDS		12,398,003.	11,877,796.		
TOTAL TO FORM 990-PF, PART II, LI	NE 10C	12,398,003.	11,877,796.		
FORM 990-PF OT	HER INVESTMENTS		STATEMENT 12		
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE		
MULTI-ASSET MUTUAL FUNDS MARKETABLE HEDGE FUNDS REAL ESTATE/HARD ASSETS PRIVATE EQUITY FUNDS	COST COST COST	8,263,507. 6,159,116. 3,999,278. 2,956,959.	7,346,100. 6,924,570. 4,212,823. 4,544,837.		
TOTAL TO FORM 990-PF, PART II, LI	NE 13	21,378,860.	23,028,330.		
FORM 990-PF	OTHER ASSETS		STATEMENT 13		
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE		
MINING AND GAS INTERESTS	939,057.	939,057.	798,589.		
TO FORM 990-PF, PART II, LINE 15	T II, LINE 15 939,057.		798,589.		

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS STATEMENT 14
TRUSTEES AND FOUNDATION MANAGERS

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EVDENCE
DR. LINDA HRYHORCZUK 333 W. FORD STREET, SUITE 1950 DETROIT, MI 48226	TRUSTEE 1.00	0.	0.	0.
LYNN SCHNEIDER 333 W. FORD STREET, SUITE 1950 DETROIT, MI 48226	TRUSTEE 1.00	0.	0.	0.
GEORGE A. NICHOLSON, III 333 W. FORD STREET, SUITE 1950 DETROIT, MI 48226	TRUSTEE 1.00	0.	0.	0.
FREDDIE C. BURTON, JR. 333 W. FORD STREET, SUITE 1950 DETROIT, MI 48226	TRUSTEE 1.00	0.	0.	0.
JACK KRESNAK 333 W. FORD STREET, SUITE 1950 DETROIT, MI 48226	TRUSTEE 1.00	0.	0.	0.
DUANE TARNACKI 333 W. FORD STREET, SUITE 1950 DETROIT, MI 48226	TRUSTEE 1.00	0.	0.	0.
LEONARD W. SMITH 333 W. FORD STREET, SUITE 1950 DETROIT, MI 48226	CHIEF INVESTME		12,210.	0.
ANDREA M. COLE 333 W. FORD STREET, SUITE 1950 DETROIT, MI 48226	CHIEF EXECUTIV 40.00		19,410.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	335,338.	31,620.	0.

.FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 15

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

ANDREA M. COLE, EXECUTIVE DIRECTOR AND CEO 333 W. FORD STREET, SUITE 1950 DETROIT, MI 48266

TELEPHONE NUMBER

(313) 309-3436

EMAIL ADDRESS

ACOLE@FLINNFOUNDATION.ORG

FORM AND CONTENT OF APPLICATIONS

THE FOUNDATION ACCEPTS COMPETITVE PROPOSALS ONCE A YEAR THROUGH ITS ON-LINE GRANT APPLICATION SYSTEM.

ANY SUBMISSION DEADLINES

THE FDN ANNOUNCES RFPS ANNUALLY IN MAY, APPS ARE ACCEPTED THROUGH JULY AND ANNOUNCED IN SEPTEMBER.

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE FOUNDATION AWARDS GRANTS TO NON-PROFITS THAT DELIVER MENTAL HEALTH CARE AND SERVICES IN MICHIGAN.

Ethel and James Flinn Foundation 38-2143122 2015 Asset Detail

	Cost	Market Values
Cash - Non-interest-bearing		
Schwab Cash	32,583	32,583
Chase Checking Account	112,872	112,872
· ·	145,455	145,455
Savings and Temporary Cash Investments		
Schwab Money Market Fund	844,377	844,377
	844,377	844,377
Common Stock Mutual Funds		
Glenmede Small Cap Equity	1,577,455	2,258,449
Oakmark Fund	2,622,630	3,532,650
Vanguard Total Stock Index	4,242,427	6,568,563
JPMorgan Mid Cap Equity	989,817	1,172,712
DFA Emerging Markets Core Equi	1,900,080	1,547,276
Harbor International	2,723,895	3,031,022
Templeton Inst Foreign Small	1,670,437	2,184,064
Vanguard FTSE All World Ex US	2,632,440	2,919,989
	18,359,180	23,214,725
Fixed Income Mutual Funds		
Blackrock High Yield Bond	3,306,636	3,054,404
Loomis Sayles Investment Bond	2,338,917	2,067,810
Templeton Global Bond Fund	2,259,156	2,054,989
JP Morgan Core Bond Fund R6	4,493,295	4,700,593
	12,398,003	11,877,796
Multi-Asset Funds		
Blackrock Global Allocation	2,986,048	2,513,244
TIFF Multi-Asset Investor	2,848,996	2,472,542
Vanguard Star Fund	2,428,464	2,360,314
	8,263,507	7,346,100
Marketable/Hedge		
TIFF Absolute Return Pool II	3,300,000	3,372,406
JP Morgan Multi-Strategy	2,859,116	3,552,164
	6,159,116	6,924,570
Real Estate/Hard Assets		
Trumbull Property Fund	3,999,278	4,212,823
	3,999,278	4,212,823

Private Equity		
TIFF Private Equity 2007 Fund	194,136	307,287
TIFF Private Equity 2008 Fund	249,895	969,234
TIFF Private Equity 2009 Fund	289,876	513,265
TIFF Private Equity 2011 Fund	366,877	432,395
TIFF Private Equity 2014 Fund	260,000	236,329
Commonfund Cap IV	96,961	208,923
Commonfund Cap VII	93,511	213,946
Commonfund Cap VIII	436,624	552,470
Commonfund Natural Res. VIII	326,212	324,385
Commonfund International VII	477,867	607,006
Commonfund Cap Global 2014	165,000	179,597
	2,956,959	4,544,837
Mining and Gas Interests		
Kentucky Natural Gas	66,234	66,234
Mining	872,823	732,355
	939,057	798,589

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