

Form **990**
Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2022
Open to Public Inspection

A For the 2022 calendar year, or tax year beginning 01-01-2022, and ending 12-31-2022

B Check if applicable:
 Address change
 Name change
 Initial return
 Final return/terminated
 Amended return
 Application pending

C Name of organization
ANN ARBOR SPARK

Doing business as

Number and street (or P.O. box if mail is not delivered to street address) Room/suite
330 EAST LIBERTY ST

City or town, state or province, country, and ZIP or foreign postal code
ANN ARBOR, MI 48104

D Employer identification number
38-2436899

E Telephone number
(734) 761-9317

F Name and address of principal officer:
PAUL KRUTKO
330 EAST LIBERTY ST
ANN ARBOR, MI 48104

G Gross receipts \$ 10,231,872

H(a) Is this a group return for subordinates? Yes No
H(b) Are all subordinates included? Yes No
 If "No," attach a list. See instructions.
H(c) Group exemption number ▶

I Tax-exempt status: 501(c)(3) 501(c) (6) ◀(insert no.) 4947(a)(1) or 527

J Website: ▶ WWW.ANNARBORUSA.COM

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: 1984 **M** State of legal domicile: MI

Part I Summary

1 Briefly describe the organization's mission or most significant activities:
ANN ARBOR SPARK ADVANCES THE REGION BY ENCOURAGING AND SUPPORTING BUSINESS ACCELERATION, ATTRACTION, EXPANSION AND RETENTION. OUR ORGANIZATION IDENTIFIES AND MEETS THE NEEDS OF COMPANIES AT EVERY STAGE, FROM START-UPS TO LARGE ORGANIZATIONS. ANN ARBOR SPARK COLLABORATES WITH BUSINESS, ACADEMIC, GOVERNMENT AND COMMUNITY INVESTMENT PARTNERS TO POSITION THE REGION AS A DESTINATION FOR INNOVATION.

2 Check this box if the organization discontinued its operations or disposed of more than 25% of its net assets.

3 Number of voting members of the governing body (Part VI, line 1a)	3	29
4 Number of independent voting members of the governing body (Part VI, line 1b)	4	28
5 Total number of individuals employed in calendar year 2022 (Part V, line 2a)	5	444
6 Total number of volunteers (estimate if necessary)	6	32
7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
7b Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	

	Prior Year	Current Year
8 Contributions and grants (Part VIII, line 1h)	12,474,849	8,885,367
9 Program service revenue (Part VIII, line 2g)	449,236	577,402
10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	-1,139,945	-18,866
11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		0
12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	11,784,140	9,443,903
13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	4,460,160	152,496
14 Benefits paid to or for members (Part IX, column (A), line 4)		0
15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	3,826,305	4,322,862
16a Professional fundraising fees (Part IX, column (A), line 11e)		0
b Total fundraising expenses (Part IX, column (D), line 25) ▶0		
17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	5,296,614	6,032,410
18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	13,583,079	10,507,768
19 Revenue less expenses. Subtract line 18 from line 12	-1,798,939	-1,063,865

	Beginning of Current Year	End of Year
20 Total assets (Part X, line 16)	15,665,812	16,558,054
21 Total liabilities (Part X, line 26)	638,225	2,596,111
22 Net assets or fund balances. Subtract line 21 from line 20	15,027,587	13,961,943

Part II 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 preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer
Date 2023-10-31

PAUL KRUTKO PRESIDENT/CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name Preparer's signature Date 2023-11-13 Check if self-employed PTIN P01442508

Firm's name ▶ YEO & YEO PC Firm's EIN ▶ 38-2706146

Firm's address ▶ 1450 EISENHOWER PLACE Phone no. (734) 769-1331
ANN ARBOR, MI 481083283

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:

ANN ARBOR SPARK ADVANCES THE REGION BY ENCOURAGING AND SUPPORTING BUSINESS ACCELERATION, ATTRACTION, EXPANSION AND RETENTION. OUR ORGANIZATION IDENTIFIES AND MEETS THE NEEDS OF COMPANIES AT EVERY STAGE, FROM START-UPS TO LARGE ORGANIZATIONS. ANN ARBOR SPARK COLLABORATES WITH BUSINESS, ACADEMIC, GOVERNMENT AND COMMUNITY INVESTMENT PARTNERS TO POSITION THE REGION AS A DESTINATION FOR INNOVATION.

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. 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 revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ including grants of \$) (Revenue \$) See Additional Data

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$) See Additional Data

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$) See Additional Data

(Code:) (Expenses \$ including grants of \$) (Revenue \$)

COMMUNICATION AND COMMUNITY ENGAGEMENT: SPARK USES ITS ESTABLISHED PLATFORM OF SOCIAL MEDIA FOLLOWERS, WEBSITE TRAFFIC, AND BRAND AWARENESS TO EXPAND LOCAL, REGIONAL, STATEWIDE, NATIONAL, AND GLOBAL AWARENESS OF THE ANN ARBOR REGION'S ATTRACTIVENESS FOR BUSINESS LOCATION AND CAREER AND LIFE OPPORTUNITIES. SPARK ALSO PROMOTES COMMUNITY EVENTS THAT MARKET THE REGION AS A GREAT PLACE TO START A BUSINESS AND/OR WORK FOR A START-UP. OUR WEEKLONG SERIES OF EVENTS, A2TECH360, HAD 25 TOTAL EVENTS AND OVER 13.5K REGISTERED ATTENDEES, 2.1M SOCIAL MEDIA VIEWS AND 70.4K WEB PAGE VIEWS. CAPITAL FUNDING: MICHIGAN ANGEL FUND & SPARK.CAPITAL (FORMERLY MICHIGAN PRE-SEED FUND). THE MISSION OF OUR FUNDING PROGRAMS IS TO SUPPORT HIGH-TECH COMPANIES THROUGHOUT THE STATE AT THEIR EARLIEST STAGES OF DEVELOPMENT AND POSITION THESE HIGH-GROWTH COMPANIES TO BE ABLE TO RAISE ADDITIONAL CAPITAL AND INVESTMENTS. CAPITAL PROGRAMS ARE AN INTENTIONAL ECONOMIC DEVELOPMENT TOOL THAT PAYS ITSELF BACK, ALLOWING THE FUNDS TO BE REDEPLOYED FOR FUTURE REINVESTMENT INTO MORE COMPANIES. WITH 155 MEMBERS, THE MICHIGAN ANGEL FUND (MAF) IS THE LARGEST ANGEL ORGANIZATION IN MICHIGAN. THE GROUP HAS 40 COMPANIES, FILLING AN IMPORTANT FUNDING GAP BY INVESTING IN VERY EARLY-STAGE COMPANIES ACROSS THE STATE THAT ARE NOT YET PRIMED FOR VENTURE AND OTHER SOURCES OF CAPITAL. MAF IS MANAGED BY ANN ARBOR SPARK. SPARK.CAPITAL FUND IS DESIGNED TO RETAIN ENTREPRENEURIAL COMPANIES. THESE ARE HIGH-RISK INVESTMENTS WITH A FORECAST OF ABOUT 65% PROJECTED TO REACH THE NEXT LEVEL OF FUNDING.

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, and Yes/No response. Rows include questions 1 through 21, with sub-questions a through f for items 11 and 14. Each row has a corresponding '1' through '21' in the first column of the table grid.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 covering various organizational requirements and reporting obligations.

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V []

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, Forms W-2G, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with 4 main columns: Question/Description, Sub-question label (e.g., 2a, 2b), and Yes/No/Amount. Rows include questions about employee reporting (2a-2b), unrelated business income (3a-3b), foreign accounts (4a-4b), prohibited tax shelter transactions (5a-5c), charitable contributions (6a-6b), and various organizational requirements (7a-7h, 8, 9a-9b, 10a-10b, 11a-11b, 12a-12b, 13a-13c, 14a-14b, 15, 16, 17).

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



Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year; 1b Enter the number of voting members included in line 1a, above, who are independent; 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?; 3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?; 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?; 5 Did the organization become aware during the year of a significant diversion of the organization's assets?; 6 Did the organization have members or stockholders?; 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?; 7b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?; 8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body? b Each committee with authority to act on behalf of the governing body?; 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates?; 10b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?; 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?; 11b Describe on 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; 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?; 12c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done; 13 Did the organization have a written whistleblower policy?; 14 Did the organization have a written document retention and destruction policy?; 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?; 15a The organization's CEO, Executive Director, or top management official; 15b Other officers or key employees of the organization; 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?; 16b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section C. Disclosure

Table with 2 columns: Question, Answer. Rows include: 17 List the states with which a copy of this Form 990 is required to be filed; 18 Section 6104 requires an organization to make its Form 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website, Another's website, Upon request, Other (explain in Schedule O); 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.; 20 State the name, address, and telephone number of the person who possesses the organization's books and records: TOM CRAWFORD 330 EAST LIBERTY ST ANN ARBOR, MI 48104 (734) 761-9317

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	8,885,367				
	g Noncash contributions included in lines 1a - 1f:\$	1g	6,984				
	h Total. Add lines 1a-1f			8,885,367			
Program Service Revenue	2a INCUBATOR RENT	Business Code					
		532000	299,398	299,398			
	b INCUBATOR SERVICES	561000	278,004	278,004			
	c						
	d						
	e						
	f All other program service revenue						
g Total. Add lines 2a-2f.		577,402					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		247,805			247,805	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
		6b Less: rental expenses					
		6c Rental income or (loss)					
		d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other		521,298		
		7b Less: cost or other basis and sales expenses			787,969		
		7c Gain or (loss)			-266,671		
		d Net gain or (loss)			-266,671		-266,671
	8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18						
		8b Less: direct expenses					
		c Net income or (loss) from fundraising events					
	9a Gross income from gaming activities. See Part IV, line 19						
9b Less: direct expenses							
c Net income or (loss) from gaming activities							
10a Gross sales of inventory, less returns and allowances							
	10b Less: cost of goods sold						
	c Net income or (loss) from sales of inventory						
11a Miscellaneous Revenue	Business Code						
	b						
	c						
	d All other revenue						
e Total. Add lines 11a-11d							
12 Total revenue. See instructions			9,443,903	577,402		-18,866	

Part IX Statement of Functional Expenses
 Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

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

Do not include amounts reported on lines 6b, 7b, 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 domestic organizations and domestic governments. See Part IV, line 21	152,496			
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	841,038			
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	2,655,011			
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	75,202			
9 Other employee benefits	311,094			
10 Payroll taxes	440,517			
11 Fees for services (non-employees):				
a Management				
b Legal	13,294			
c Accounting	26,962			
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	2,709,287			
12 Advertising and promotion	667,564			
13 Office expenses	140,142			
14 Information technology	288,213			
15 Royalties				
16 Occupancy	880,937			
17 Travel	86,783			
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	45,788			
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	108,135			
23 Insurance	21,635			
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.)				
a ENTREPRENEUR IN RESIDENCE	415,836			
b EVENTS	275,260			
c FEES	153,791			
d DUES & SUBSCRIPTIONS	97,155			
e All other expenses	101,628			
25 Total functional expenses. Add lines 1 through 24e	10,507,768	0	0	0
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest-bearing		1	
	2 Savings and temporary cash investments	8,541,065	2	7,693,565
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	801,220	4	1,086,296
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	183,836	9	191,731
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	1,094,873		
	b Less: accumulated depreciation	925,501	10c	169,372
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11	5,810,804	13	5,913,541
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11	94,080	15	1,503,549
16 Total assets. Add lines 1 through 15 (must equal line 33)	15,665,812	16	16,558,054	
Liabilities	17 Accounts payable and accrued expenses	621,668	17	665,587
	18 Grants payable		18	
	19 Deferred revenue	16,557	19	525,470
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		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 Schedule D		25	1,405,054
	26 Total liabilities. Add lines 17 through 25	638,225	26	2,596,111
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.			
	27 Net assets without donor restrictions	14,150,953	27	13,311,661
	28 Net assets with donor restrictions	876,634	28	650,282
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
32 Total net assets or fund balances	15,027,587	32	13,961,943	
33 Total liabilities and net assets/fund balances	15,665,812	33	16,558,054	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	9,443,903
2	Total expenses (must equal Part IX, column (A), line 25)	2	10,507,768
3	Revenue less expenses. Subtract line 2 from line 1	3	-1,063,865
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	15,027,587
5	Net unrealized gains (losses) on investments	5	136,271
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	-138,050
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	13,961,943

Part XII Financial Statements and Reporting

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

- 1** Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a 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?
 If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:
 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 audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- 3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID:

Software Version:

EIN: 38-2436899

Name: ANN ARBOR SPARK

Form 990 (2022)

Form 990, Part III, Line 4a:

BUSINESS INCUBATOR/ACCELERATOR SERVICES SPARK CREATES LONG-TERM REGIONAL PROSPERITY BY ACCELERATING THE GROWTH OF START-UPS AND EARLY-STAGE COMPANIES THROUGH SUPPORT BY OFFERING DIRECT AND CONSULTANT SERVICES. SPARK CREATES A PLACE WHERE EARLY-STAGE COMPANIES CAN CONDUCT BUSINESS AT AFFORDABLE RATES AND CAN CO-LOCATE WITH OTHER ENTREPRENEURS AND IN THE ECO-SYSTEM. SPARK OFFERS THOSE COMPANIES EDUCATIONAL AND NETWORKING EVENTS IN THE INCUBATOR SPACE. WE CREATE AN ECOSYSTEM WHEREBY START-UPS CAN CONNECT EASILY WITH RESOURCES THEY NEED AT EARLY STAGES TO LAUNCH AND ESTABLISH, THUS ATTRACTING START-UPS TO THIS REGION. THIS SUPPORTS GROWTH IN THE COMPANIES THEMSELVES, THE DIRECT SUPPORT SERVICES, AND THE REGION'S ECONOMY, CREATING A VIRTUOUS CYCLE OF ECONOMIC GROWTH. SPARK IS PART OF THE AWARD-WINNING GLOBAL EPICENTER OF MOBILITY (GEM) PROGRAM, ADMINISTERING THE ENTREPRENEUR-IN-RESIDENCE (EIR) COMPONENT OF THE PROGRAM. ANOTHER MAJOR PROGRAM SPARK IS PART OF IS SWEEP (AUTOMATED STREET SWEEPER), WHICH IS PART OF THE TRANSATLANTIC AUTONOMOUS DRIVING ALLIANCE (A GROUP TO CREATE A NETWORK CONNECTING U.S. AND GERMAN COMPANIES TO DEVELOP AUTONOMOUS VEHICLE TECHNOLOGIES). ONCE THE SWEEPER IS TESTED, SPARK WILL WORK WITH THE LOCAL MUNICIPALITY TO PILOT ITS USE. IN 2022 SPARK ASSISTED 333 INNOVATION START-UPS WHICH CURRENTLY EMPLOY 983 FTE. SPARK NURTURED 101 INCUBATOR TENANTS.

Form 990, Part III, Line 4b:

BUSINESS DEVELOPMENT (EXPANSION, ATTRACTION, RETENTION) SPARK MAXIMIZES POTENTIAL JOBS AND CAPITAL INVESTMENT IN THE REGION AND HELPS GROW THE REGION'S GDP THROUGH THE RETENTION AND EXPANSION OF ESTABLISHED DRIVING INDUSTRY COMPANIES AND THE TARGETED ATTRACTION DOMESTICALLY AND INTERNATIONALLY OF SIMILAR COMPANIES THAT FIT THE REGION'S IDENTIFIED CLUSTERS. THIS IS DONE BY REGULAR COMMUNICATION WITH LOCAL BUSINESSES TO DETERMINE THEIR NEEDS, MAKING KEY BUSINESS INTRODUCTIONS, ASSISTING WITH SITE SELECTION, COLLABORATING WITH LOCAL MUNICIPALITIES, AND ASSISTING COMPANIES IN WORKING WITH LOCAL ACADEMIC PARTNERS TO COMMUNICATE TALENT NEEDS. THIS YEAR THE MAJOR COMPANIES SPARK SUPPORTED ARE: "LUXWALL: (A BUILDING MATERIALS INNOVATOR) - TO SET UP THEIR FACILITY IN YPSILANTI TOWNSHIP, "STARTORIOUS: (AN INTERNATIONAL LIFE SCIENCE SUPPORT COMPANY) TO SET UP A FACILITY IN ANN ARBOR TO SERVE AS A HUB OF THEIR NORTH AMERICAN R&D OPERATIONS, "HATCI: (HYUNDAI AMERICA TECHNICAL CENTER, INC.) - TO EXPAND THEIR R&D AUTOMOTIVE CAMPUS IN SUPERIOR TOWNSHIP WITH INVESTMENT OF 51M. IN 2022, WITH 24 SUCCESSFUL COMPANY GROWTH PROJECTS, THE TEAM FACILITATED NEW INVESTMENT COMMITMENTS TOTALING MORE THAN 155 MILLION. THESE PROJECTS LED TO THE CREATION OF 559 NEW JOBS AND THE RETENTION OF OVER 900 EXISTING ONES, THEREBY STRENGTHENING THE LOCAL WORKFORCE.

Form 990, Part III, Line 4c:

MI STEM FORWARD: IN PARTNERSHIP WITH THE MICHIGAN ECONOMIC DEVELOPMENT CORPORATION, SPARK WORKED TO PROMOTE STEM TALENT RETENTION IN THE STATE BY RUNNING AN INTERNSHIP MATCHING PROGRAM. THE PROGRAM RECRUITS TALENTED COLLEGE STUDENTS TO POPULATE A TALENT DATABASE, GATHERS IMPACTFUL INTERNSHIP OPPORTUNITIES FROM INNOVATIVE COMPANIES THROUGHOUT THE STATE, AND THEN COVERS THE ADMINISTRATIVE BURDENS AND 50% OF THE COST OF THE RESULTING PLACEMENTS. AS OF DECEMBER 2022, SPARK RECRUITED 588 STUDENTS (INCREASING THE DATABASE OF INTERNS TO 2,589), AS WELL AS MORE THAN 400 COMPANIES. THESE COMPANIES HAVE POSTED OVER 646 UNIQUE JOB DESCRIPTIONS WITH A RATIO OF 4:1 INTERNS/JOB; 61% OF INTERNS WERE OFFERED A POSITION BY THE COMPANY THEY INTERNEED WITH.

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
DAVID RUUD CHAIR	1.00 0.25	X		X				0	0	0
KELLY SEXTON VICE CHAIR	1.00 0.25	X		X				0	0	0
DAVID SNODGRASS TREASURER	1.00 0.25	X		X				0	0	0
TIFFANY FORD SECRETARY	1.00 0.25	X		X				0	0	0
DAVID PARSIGIAN PAST CHAIR	1.00 0.25	X		X				0	0	0
DR ROSE BELLANCA BOARD MEMBER	1.00 0.25	X						0	0	0
GREGORY DILL BOARD MEMBER	1.00 0.25	X						0	0	0
MILTON DOHONEY BOARD MEMBER	1.00 0.25	X						0	0	0
MARA M FARMER BOARD MEMBER	1.00 0.25	X						0	0	0
LEIGH RGREDEN BOARD MEMBER	1.00 0.25	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MANDY GREWAL PHD BOARD MEMBER	1.00 0.25	X						0	0	0
JEFF HAUPTMAN BOARD MEMBER	1.00 0.25	X						0	0	0
CHRIS KOLB BOARD MEMBER	1.00 0.25	X						0	0	0
MARK LEPAGE MD MBA BOARD MEMBER	1.00 0.25	X						0	0	0
LON LOWEN BOARD MEMBER	1.00 0.25	X						0	0	0
TIMOTHY G MARSHALL BOARD MEMBER	1.00 0.25	X						0	0	0
JOHN MCLAUGHLIN BOARD MEMBER	1.00 0.25	X						0	0	0
TIM PETERSEN BOARD MEMBER	1.00 0.25	X						0	0	0
VENKAT DV RAO BOARD MEMBER	1.00 0.25	X						0	0	0
PAUL RONEY BOARD MEMBER	1.00 0.25	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
CHRIS SING BOARD MEMBER	1.00 0.25	X						0	0	0
BRENDA STUMBO BOARD MEMBER	1.00 0.25	X						0	0	0
SIMON WHITELOCKE BOARD MEMBER	1.00 0.25	X						0	0	0
DAVID WILHOIT BOARD MEMBER	1.00 0.25	X						0	0	0
CHRISTINA YORK BOARD MEMBER	1.00 0.25	X						0	0	0
JUSTIN HODGE BOARD MEMBER	1.00 0.25	X						0	0	0
ROBERT YOUNG BOARD MEMBER	1.00 0.25	X						0	0	0
NATHAN BURD BOARD MEMBER	1.00 0.25	X						0	0	0
PAUL KRUTKO PRESIDENT/CE	40.00 0.25	X		X				467,056	0	23,875
PHIL SANTER VP OF BUS. D	40.00				X			176,571	0	6,367

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MICHAEL FLANAGAN VP OF CAPITA	40.00					X		146,999	0	7,149
WILLIAM MAYER VP OF ENTREP	40.00					X		151,799	0	8,625
MARGARITA HERNANDEZ DIRECTOR OF	40.00					X		103,067	0	13,140
TOM CRAWFORD CFO	0.25 40.00 0.25			X				0	0	0

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

OMB No. 1545-0047
2022
Open to Public Inspection

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization
ANN ARBOR SPARK

Employer identification number
38-2436899

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

- 5** Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes No
- 6** Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

- 1** Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area
 Protection of natural habitat Preservation of a certified historic structure
 Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

- 3** Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____
- 4** Number of states where property subject to conservation easement is located ▶ _____
- 5** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No
- 6** Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ _____
- 7** Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year ▶ \$ _____
- 8** Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No
- 9** In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

- 1a** If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.
- b** If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenue included on 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 treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items:
- a** Revenue included on Form 990, Part VIII, line 1 ▶ \$ _____
- b** Assets included in Form 990, Part X ▶ \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? . . . **Yes** **No**

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---|--------|
| 1c Beginning balance | |
| 1d Additions during the year | |
| 1e Distributions during the year | |
| 1f Ending balance | |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? . . . **Yes** **No**
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶
 - b** Permanent endowment ▶
 - c** Term endowment ▶
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|---------------|----|
| (i) Unrelated organizations | 3a(i) | |
| (ii) Related organizations | 3a(ii) | |
| b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		601,241	501,146	100,095
d Equipment		493,632	424,355	69,277
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) . . . ▶				169,372

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. 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
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other _____		
(A)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	▶	

Part VIII Investments - Program Related.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) MICHIGAN PRE-SEED CAPITAL FUND	5,501,101	F
(2) MICRO LOANS	412,440	F
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col.(B) line 13.)	▶ 5,913,541	

Part IX Other Assets.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) RIGHT OF USE ASSET - OPERATING LEASE	1,395,032
(2) DEPOSITS	108,517
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 15.)	▶ 1,503,549

Part X Other Liabilities.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

(a) Description of liability	(b) Book value
1.	
(1) Federal income taxes	
OPERATING LEASE OBLIGATION, NET	986,679
OPERATING LEASE OBLIGATION, CURRENT	418,375
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.)	▶ 1,405,054

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
a	Net unrealized gains (losses) on investments	2a		
b	Donated services and use of facilities	2b		
c	Recoveries of prior year grants	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	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	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	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' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
a	Donated services and use of facilities	2a		
b	Prior year adjustments	2b		
c	Other losses	2c		
d	Other (Describe in Part XIII.)	2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line 1		3	
4	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	4a		
b	Other (Describe in Part XIII.)	4b		
c	Add lines 4a and 4b		4c	
5	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.

Return Reference	Explanation	
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Part XIII **Supplemental Information (continued)**

Return Reference	Explanation
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Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

**Schedule I
(Form 990)**

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

OMB No. 1545-0047

2022

**Open to Public
Inspection**

Department of the Treasury
Internal Revenue Service
Name of the organization
ANN ARBOR SPARK

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

Employer identification number
38-2436899

Part I General Information on Grants and Assistance

- 1 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 criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on 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.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) See Additional Data							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 10
 3 Enter total number of other organizations listed in the line 1 table 5

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Return Reference	Explanation
SCHEDULE I, PAGE 1, PART I, LINE 2	A REVIEW COMMITTEE OF COMMUNITY PARTNERS IS SET UP TO SCORE COMPANIES BASED ON REVIEW COMMITTEE CRITERIA. COMMITTEE VERIFIES COMPANY IS REGISTERED IN LARA, HAS AN ADDRESS, WEBSITE, AND CONTACT INFORMATION. ONCE SELECTED, COMPANIES ARE ASKED TO VERIFY SUBMISSION DATA, SIGN GRANT AGREEMENT, AND RETURN BANK INFORMATION AND W9 THROUGH DOCUSIGN. FUNDS ARE DISBURSED THROUGH ACH AND APPROVED BY CHIEF OF STAFF.

Additional Data

Software ID:
Software Version:
EIN: 38-2436899
Name: ANN ARBOR SPARK

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MIDDLE WEST 216 GREENWICH NE GRAND RAPIDS, MI 49506	80-1832624		12,000				
MUSKEGON INNOVATION HUB GVSU 200 VIRIDIAN DR MUSKEGON, MI 49440	38-1684280		5,996				

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NAIAS LLC 1900 W BIG BEAVER RD SUITE 202 TROY, MI 48084	80-1688572		40,000				
ANN ARBOR FILM FESTIVAL 455 E EISENHOWER PKWY ANN ARBOR, MI 48108	38-2379836	501C3	15,000				

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
EASTERN MICHIGAN UNIVERSITY 900 OAKWOOD ST YPSILANTI, MI 48197	38-2953297	501C3	10,000				
WASHTENAW ECONOMIC CLUB 4800 E HURON RIVER DR ANN ARBOR, MI 48103	38-1784300	501C3	10,000				

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ASSOCIATION OF BUSINESSES OF COLOR 107 FERRIS ST YPSILANTI, MI 48197	86-2095617	501C6	20,000				
MICHIGAN THEATRE 603 E LIBERTY ST ANN ARBOR, MI 48104	38-2269013	51C3	14,500				

Schedule J
(Form 990)

Compensation Information

OMB No. 1545-0047

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
 ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
 ▶ Attach to Form 990.
 ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization
ANN ARBOR SPARK

Employer identification number
38-2436899

Part I Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.		
	<input type="checkbox"/> First-class or charter travel <input type="checkbox"/> Travel for companions <input type="checkbox"/> Tax idemnification and gross-up payments <input type="checkbox"/> Discretionary spending account		
	<input type="checkbox"/> Housing allowance or residence for personal use <input type="checkbox"/> Payments for business use of personal residence <input type="checkbox"/> Health or social club dues or initiation fees <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b	If any of the boxes on Line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked on Line 1a?	2	
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.		
	<input checked="" type="checkbox"/> Compensation committee <input type="checkbox"/> Independent compensation consultant <input type="checkbox"/> Form 990 of other organizations		
	<input checked="" type="checkbox"/> Written employment contract <input checked="" type="checkbox"/> Compensation survey or study <input checked="" type="checkbox"/> Approval by the board or compensation committee		
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:		
a	Receive a severance payment or change-of-control payment?	4a	No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.		
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.		
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:		
a	The organization?	5a	
b	Any related organization?	5b	
	If "Yes," on line 5a or 5b, describe in Part III.		
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:		
a	The organization?	6a	
b	Any related organization?	6b	
	If "Yes," on line 6a or 6b, describe in Part III.		
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described in lines 5 and 6? If "Yes," describe in Part III.	7	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III.	8	
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2, 1099-MISC compensation, and/or 1099-NEC			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 PAUL KRUTKO PRESIDENT/CEO	(i)	369,624 -----	97,432 -----	-----	23,875 -----	-----	490,931 -----	-----
	(ii)	-----	-----	-----	-----	-----	-----	-----
2 PHIL SANTER VP OF BUS. DEVELOP.	(i)	176,571 -----	-----	-----	6,367 -----	-----	182,938 -----	-----
	(ii)	-----	-----	-----	-----	-----	-----	-----
3 MICHAEL FLANAGAN VP OF CAPITAL PROG.	(i)	146,999 -----	-----	-----	7,149 -----	-----	154,148 -----	-----
	(ii)	-----	-----	-----	-----	-----	-----	-----
4 WILLIAM MAYER VP OF ENTREPR. SERV.	(i)	151,799 -----	-----	-----	8,625 -----	-----	160,424 -----	-----
	(ii)	-----	-----	-----	-----	-----	-----	-----

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) TOM CRAWFORD CONSULTING LLC	CFO	155,832	PAYMENT FOR SERVICES		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions).

Return Reference	Explanation

SCHEDULE O
(Form 990)Department of the Treasury
Internal Revenue Service**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.

▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022**Open to Public
Inspection**Name of the organization
ANN ARBOR SPARK

Employer identification number

38-2436899

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990 - ORGANIZATION'S MISSION	ANN ARBOR SPARK ADVANCES THE REGION BY ENCOURAGING AND SUPPORTING BUSINESS ACCELERATION, ATTRACTION, EXPANSION AND RETENTION. OUR ORGANIZATION IDENTIFIES AND MEETS THE NEEDS OF COMPANIES AT EVERY STAGE, FROM START-UPS TO LARGE ORGANIZATIONS. ANN ARBOR SPARK COLLABORATES WITH BUSINESS, ACADEMIC, GOVERNMENT AND COMMUNITY INVESTMENT PARTNERS TO POSITION THE REGION AS A DESTINATION FOR INNOVATION.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 1, PART I, LINE 6	THE ORGANIZATION USES VOLUNTEERS FOR CERTAIN EVENTS AND UTILIZES A VOLUNTEER BOARD OF DIRECTORS.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4A	<p>BUSINESS INCUBATOR/ACCELERATOR SERVICES SPARK CREATES LONG-TERM REGIONAL PROSPERITY BY ACCELERATING THE GROWTH OF START-UPS AND EARLY-STAGE COMPANIES THROUGH SUPPORT BY OFFERING DIRECT AND CONSULTANT SERVICES. SPARK CREATES A PLACE WHERE EARLY-STAGE COMPANIES CAN CONDUCT BUSINESS AT AFFORDABLE RATES AND CAN CO-LOCATE WITH OTHER ENTREPRENEURS AND IN THE ECOSYSTEM. SPARK OFFERS THOSE COMPANIES EDUCATIONAL AND NETWORKING EVENTS IN THE INCUBATOR SPACE. WE CREATE AN ECOSYSTEM WHEREBY START-UPS CAN CONNECT EASILY WITH RESOURCES THEY NEED AT EARLY STAGES TO LAUNCH AND ESTABLISH, THUS ATTRACTING START-UPS TO THIS REGION. THIS SUPPORTS GROWTH IN THE COMPANIES THEMSELVES, THE DIRECT SUPPORT SERVICES, AND THE REGION'S ECONOMY, CREATING A VIRTUOUS CYCLE OF ECONOMIC GROWTH. SPARK IS PART OF THE AWARD-WINNING GLOBAL EPICENTER OF MOBILITY (GEM) PROGRAM, ADMINISTERING THE ENTREPRENEUR-IN-RESIDENCE (EIR) COMPONENT OF THE PROGRAM. ANOTHER MAJOR PROGRAM SPARK IS PART OF IS SWEEP (AUTOMATED STREET SWEEPER), WHICH IS PART OF THE TRANSATLANTIC AUTONOMOUS DRIVING ALLIANCE (A GROUP TO CREATE A NETWORK CONNECTING U.S. AND GERMAN COMPANIES TO DEVELOP AUTONOMOUS VEHICLE TECHNOLOGIES). ONCE THE SWEEPER IS TESTED, SPARK WILL WORK WITH THE LOCAL MUNICIPALITY TO PILOT ITS USE. IN 2022 SPARK ASSISTED 333 INNOVATION START-UPS WHICH CURRENTLY EMPLOY 983 FTE. SPARK NURTURED 101 INCUBATOR TENANTS.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4B	<p>BUSINESS DEVELOPMENT (EXPANSION, ATTRACTION, RETENTION) SPARK MAXIMIZES POTENTIAL JOBS AND CAPITAL INVESTMENT IN THE REGION AND HELPS GROW THE REGION'S GDP THROUGH THE RETENTION AND EXPANSION OF ESTABLISHED DRIVING INDUSTRY COMPANIES AND THE TARGETED ATTRACTION DOMESTICALLY AND INTERNATIONALLY OF SIMILAR COMPANIES THAT FIT THE REGION'S IDENTIFIED CLUSTERS. THIS IS DONE BY REGULAR COMMUNICATION WITH LOCAL BUSINESSES TO DETERMINE THEIR NEEDS, MAKING KEY BUSINESS INTRODUCTIONS, ASSISTING WITH SITE SELECTION, COLLABORATING WITH LOCAL MUNICIPALITIES, AND ASSISTING COMPANIES IN WORKING WITH LOCAL ACADEMIC PARTNERS TO COMMUNICATE TALENT NEEDS. THIS YEAR THE MAJOR COMPANIES SPARK SUPPORTED ARE: "LUXWALL: (A BUILDING MATERIALS INNOVATOR) - TO SET UP THEIR FACILITY IN YPSILANTI TOWNSHIP, "STARTORIOUS: (AN INTERNATIONAL LIFE SCIENCE SUPPORT COMPANY) TO SET UP A FACILITY IN ANN ARBOR TO SERVE AS A HUB OF THEIR NORTH AMERICAN R&D OPERATIONS, "HATCI: (HYUNDAI AMERICA TECHNICAL CENTER, INC.) - TO EXPAND THEIR R&D AUTOMOTIVE CAMPUS IN SUPERIOR TOWNSHIP WITH INVESTMENT OF 51M. IN 2022, WITH 24 SUCCESSFUL COMPANY GROWTH PROJECTS, THE TEAM FACILITATED NEW INVESTMENT COMMITMENTS TOTALING MORE THAN 155 MILLION. THESE PROJECTS LED TO THE CREATION OF 559 NEW JOBS AND THE RETENTION OF OVER 900 EXISTING ONES, THEREBY STRENGTHENING THE LOCAL WORKFORCE.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 2, PART III, LINE 4D	<p>COMMUNICATION AND COMMUNITY ENGAGEMENT: SPARK USES ITS ESTABLISHED PLATFORM OF SOCIAL MEDIA FOLLOWERS, WEBSITE TRAFFIC, AND BRAND AWARENESS TO EXPAND LOCAL, REGIONAL, STATEWIDE, NATIONAL, AND GLOBAL AWARENESS OF THE ANN ARBOR REGION'S ATTRACTIVENESS FOR BUSINESS LOCATION AND CAREER AND LIFE OPPORTUNITIES. SPARK ALSO PROMOTES COMMUNITY EVENTS THAT MARKET THE REGION AS A GREAT PLACE TO START A BUSINESS AND/OR WORK FOR A START-UP. OUR WEEKLONG SERIES OF EVENTS, A2TECH360, HAD 25 TOTAL EVENTS AND OVER 13.5K REGISTERED ATTENDEES, 2.1M SOCIAL MEDIA VIEWS AND 70.4K WEB PAGE VIEWS. CAPITAL FUNDING: MICHIGAN ANGEL FUND & SPARK.CAPITAL (FORMERLY MICHIGAN PRE-SEED FUND). THE MISSION OF OUR FUNDING PROGRAMS IS TO SUPPORT HIGH-TECH COMPANIES THROUGHOUT THE STATE AT THEIR EARLIEST STAGES OF DEVELOPMENT AND POSITION THESE HIGH-GROWTH COMPANIES TO BE ABLE TO RAISE ADDITIONAL CAPITAL AND INVESTMENTS. CAPITAL PROGRAMS ARE AN INTENTIONAL ECONOMIC DEVELOPMENT TOOL THAT PAYS ITSELF BACK, ALLOWING THE FUNDS TO BE REDEPLOYED FOR FUTURE REINVESTMENT INTO MORE COMPANIES. WITH 155 MEMBERS, THE MICHIGAN ANGEL FUND (MAF) IS THE LARGEST ANGEL ORGANIZATION IN MICHIGAN. THE GROUP HAS 40 COMPANIES, FILLING AN IMPORTANT FUNDING GAP BY INVESTING IN VERY EARLY-STAGE COMPANIES ACROSS THE STATE THAT ARE NOT YET PRIMED FOR VENTURE AND OTHER SOURCES OF CAPITAL. MAF IS MANAGED BY ANN ARBOR SPARK. SPARK.CAPITAL FUND IS DESIGNED TO RETAIN ENTREPRENEURIAL COMPANIES. THESE ARE HIGH-RISK INVESTMENTS WITH A FORECAST OF ABOUT 65% PROJECTED TO REACH THE NEXT LEVEL OF FUNDING.</p>

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 11B	A DRAFT OF THE FORM 990 IS DISTRIBUTED TO THE FINANCE COMMITTEE AND CEO PRIOR TO FILING.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 12C	MEMBERS OF THE BOARD OF DIRECTORS, EXECUTIVE COMMITTEE AND KEY STAFF MUST ANNUALLY SIGN A STATEMENT CONCERNING POTENTIAL CONFLICTS OF INTEREST. THESE STATEMENTS ARE PERIODICALLY REVIEWED BY THE FINANCE COMMITTEE TO DETERMINE IF FURTHER EXAMINATION OR ACTION IS NEEDED. IF AN CONFLICT OF INTEREST EXISTS, ANN ARBOR SPARK FOLLOWS UP WITH THE EXECUTIVE COMMITTEE, THE EXECUTIVE COMMITTEE DECIDES IF FURTHER ACTION IN NECESSARY.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 15A	COMPENSATION COMMITTEE - THE GOVERNANCE COMMITTEE IS RESPONSIBLE FOR EVALUATING AND ESTABLISHING THE SALARY AND BENEFITS FOR THE CEO AND KEY EMPLOYEES. STAFF PREPARES STATISTICS ON COMPARATIVE SALARY DATA FROM SIMILAR ORGANIZATIONS FOR BENCHMARKING. THIS DATA, ALONG WITH PERFORMANCE DATA, IS USED BY THE GOVERNANCE COMMITTEE TO DETERMINE COMPENSATION FOR THE FOLLOWING FISCAL YEAR.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 15B	COMPENSATION COMMITTEE - THE GOVERNANCE COMMITTEE IS RESPONSIBLE FOR EVALUATING AND ESTABLISHING THE SALARY AND BENEFITS FOR THE CEO AND KEY EMPLOYEES. STAFF PREPARES STATISTICS ON COMPARATIVE SALARY DATA FROM SIMILAR ORGANIZATIONS FOR BENCHMARKING. THIS DATA, ALONG WITH PERFORMANCE DATA, IS USED BY THE GOVERNANCE COMMITTEE TO DETERMINE COMPENSATION FOR THE FOLLOWING FISCAL YEAR.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PAGE 6, PART VI, LINE 19	THE ORGANIZATION SHARES INFORMATION THAT FALLS WITHIN PARAMETERS AGREED UPON BY OUR FUNDERS, CLIENTS AND PORTFOLIO COMPANIES. SPARK POSTS ITS AUDITED FINANCIAL STATEMENTS ON OUR WEBSITE. THE 990 IS AVAILABLE AS PUBLIC INFORMATION ON GUIDESTAR.COM. GOVERNING DOCUMENTS AND POLICIES ARE NOT USUALLY AVAILABLE TO THE GENERAL PUBLIC, ALTHOUGH THE STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS WEBSITE PROVIDES PUBLIC ACCESS TO ANN ARBOR SPARK'S ARTICLES OF INCORPORATION.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	LDFA CONSULTANTS 1,044,036 0 0 GENERAL CONSULTANTS 1,894,334 -267,585 27,245 OTHER CONSULTING 11,257 0 0 TOTAL 2,949,627 -267,585 27,245

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	PAYMENT TO MEDC 24,931 RETURN OF FUNDS 64,464 RETURN OF FUNDS -64,464 PAYMENT TO MEDC -24,931

**SCHEDULE R
(Form 990)**

Related Organizations and Unrelated Partnerships

OMB No. 1545-0047

2022

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
▶ **Attach to Form 990.**
▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

Department of the Treasury
Internal Revenue Service

Name of the organization
ANN ARBOR SPARK

Employer identification number

38-2436899

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) ANN ARBOR SPARK FOUNDATION 201 S DIVISION STE 430 ANN ARBOR, MI 48104 38-2436899	SUPPORT	MI	3	12B	N/A		No

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Disproportionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end- of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		No
b Gift, grant, or capital contribution to related organization(s)		No
c Gift, grant, or capital contribution from related organization(s)	Yes	
d Loans or loan guarantees to or for related organization(s)		No
e Loans or loan guarantees by related organization(s)		No
f Dividends from related organization(s)		No
g Sale of assets to related organization(s)		No
h Purchase of assets from related organization(s)		No
i Exchange of assets with related organization(s)		No
j Lease of facilities, equipment, or other assets to related organization(s)		No
k Lease of facilities, equipment, or other assets from related organization(s)		No
l Performance of services or membership or fundraising solicitations for related organization(s)		No
m Performance of services or membership or fundraising solicitations by related organization(s)		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		No
o Sharing of paid employees with related organization(s)	Yes	
p Reimbursement paid to related organization(s) for expenses		No
q Reimbursement paid by related organization(s) for expenses		No
r Other transfer of cash or property to related organization(s)		No
s Other transfer of cash or property from related organization(s)		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) ANN ARBOR SPARK FOUNDATION	C	121,000	COST

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

Return Reference	Explanation