# IRS e-file Signature Authorization for a Tax Exempt Entity

r calendar year 2021, or fiscal year beginning	, 2021, and ending	, 20
		_

Department of the Treasury			ire send to the IRS. Kee	ep for your records. for the latest information.		
Internal Revenue Service Name of filer		GO LO WWW.	.irs.gov/Formoo/91E	or the latest information.	EIN or SSN	
	AN CASA,	INC.			**_**	****
Name and title of officer or p		PATTY	SARTN		I	
Name and the or officer of p	or som subject to tax		IVE DIRECTOR	1		
Part I Type of	Return and Re			•		
Form 5330 filers may enter or <b>10a</b> below, and the arm	er dollars and cents. Jount on that line for	For all other for the return be	forms, enter whole dolla ing filed with this form v	the applicable amount, if a ars only. If you check the b was blank, then leave line n, then enter -0- on the app	ox on line 1a, 2a, 3a 1b, 2b, 3b, 4b, 5b, 6	a, 4a, 5a, 6a, 7a, 8a, 9a, b, 7b, 8b, 9b, or 10b,
	here ▶X	b Total re	venue, if any (Form 99)	), Part VIII, column (A), line	· 12) <b>1</b>	ь 637,455.
<b>2a Form 990-EZ</b> ch				D-EZ, line 9)		gb
3a Form 1120-POL				22)		Bb
4a Form 990-PF ch				ome (Form 990-PF, Part V,		b
5a Form 8868 check				Bc)		ib
6a Form 990-T chec				line 4)		ib
7a Form 4720 check				ne 1)		'b
8a Form 5227 check				ear (Form 5227, Item D)		sb
9a Form 5330 check			(Form 5330, Part II, lin			b
10a Form 8038-CP				uested (Form 8038-CP, F		0b
				or Person Subject t	o Tax	OD
			•	r I am a person subje (EIN)	-	·
financial institution to det later than 2 business day payment of taxes to recei personal identification nu PIN: check one box only	oit the entry to this a s prior to the payme ve confidential infor mber (PIN) as my sig	account. To revent (settlement mation necessignature for the	voke a payment, I must ) date. I also authorize sary to answer inquiries e electronic return and,	or payment of the federal to contact the U.S. Treasury the financial institutions invand resolve issues related if applicable, the consent to SORS	Financial Agent at 1- volved in the process I to the payment. I ha to electronic funds wi	888-353-4537 no ing of the electronic ive selected a ithdrawal.
121 Tauthonze 110	NOLIKI OKD I	NI CIIOLD	ERO firm name	DOND	to entermy Find	Enter five numbers, but
	on the tay year 20	01 alaatraniaa		indicated within this return	that a capy of the ra	do not enter all zeros
with a state age		charities as pa		program, I also authorize		
return. If I have IRS Fed/State p	indicated within this program, I will enter	s return that a	•	er my PIN as my signature eing filed with a state agen nsent screen.	•	•
Signature of officer or person subjectific	ect to tax ▶ ation and Authe	entication			Date <b>D</b>	<u> </u>
			fication			
ERO's EFIN/PIN. Enter y number (EFIN) followed b	_	-	ncation	40714942 Do not enter al		
				l electronically filed return ized e-File (MeF) Informatio		
ERO's signature 🕨				Date <b>&gt;</b> _	04/21/22	
		<del></del>	<del></del>			
				<ul> <li>See Instructions</li> <li>Juless Requested To</li> </ul>	o Do So	
LHA For Privacy act an						Form <b>8879-TE</b> (2021)

102521 01-11-22

**Return of Organization Exempt From Income Tax** 

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

OMB No. 1545-0047

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

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

ΑI	For the	2021 calendar year, or tax year beginning an	d ending		
В	Check if applicable	C Name of organization		D Employer identific	cation number
	Addres	MICHIGAN CASA, INC.			
	Name change	Doing business as		**_***	* *
	Initial return Final	Number and street (or P.O. box if mail is not delivered to street address) 660 CASCADE WEST PARKWAY	Room/suite	E Telephone number 616-259-	
	⊥return/ termin- ated		0.5		638,282.
	ated □Amend			G Gross receipts \$	
F	return ☐Applica	GRAND RAPIDS, MI 49546		H(a) Is this a group re	
L	tion pendin	F Name and address of principal officer. LATTI SADIN		for subordinates	
_		SAME AS C ABOVE		H(b) Are all subordinates in	
		empt status: X 501(c)(3) 501(c) ( ) ( (insert no.) 4947(a)(1 e: ► WWW.MICHIGANCASA.ORG	) or 527	<b>–</b>	list. See instructions
			1 1/22	H(c) Group exemptio	
		organization: X Corporation	L Year	or formation: 1901 N	1 State of legal domicile; MI
•	_	Briefly describe the organization's mission or most significant activities: TO	ZDEZK E	ארכיי	TNTFDFCTC
e	1 1			SYSTEM, BY	
Governance	2	Check this box  if the organization discontinued its operations or dispose.			
/er	3				12
ģ	4	Number of voting members of the governing body (rart VI, line 1a)  Number of independent voting members of the governing body (Part VI, line 1b)			12
		Total number of individuals employed in calendar year 2021 (Part V, line 2a)			3
ties	6	Total number of volunteers (estimate if necessary)			12
Activities &	72	Total unrelated business revenue from Part VIII, column (C), line 12			0.
Ą	'a	Net unrelated business taxable income from Form 990-T, Part I, line 11			0.
	"	Net difference business taxable meetine from 10111 550 1,1 art 1, iiile 11		Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)		166,704.	636,507.
Jue	9	Program service revenue (Part VIII, line 2g)		0.	0.
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		0.	0.
æ	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		3,860.	948.
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		170,564.	637,455.
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.
	1	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.
"	45 0	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		100,474.	171,844.
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0.	0.
ben	. b	Total fundraising expenses (Part IX, column (D), line 25)	0.		
ŭ	17 (	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		129,395.	396,025.
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		229,869.	567,869.
	1	Revenue less expenses. Subtract line 18 from line 12		-59,305.	69,586.
or	G		В	eginning of Current Year	End of Year
Assets or	20	Total assets (Part X, line 16)		17,027.	77,373.
ASS	21	Total liabilities (Part X, line 26)		35,211.	25,971.
Net	Ⅎ	Net assets or fund balances. Subtract line 21 from line 20		-18,184.	51,402.
Pa	art II	Signature Block			
	-	lties of perjury, I declare that I have examined this return, including accompanying schedul			knowledge and belief, it is
true	, correct	t, and complete. Declaration of preparer (other than officer) is based on all information of v	vhich prepare	r has any knowledge.	
Sig	n	Signature of officer		Date	
Her	re	PATTY SABIN, EXECUTIVE DIRECTOR			
		Type or print name and title	1	Doto I	DTIN
	_	Print/Type preparer's name  Preparer's signature		Date Check Check if	PTIN
Paid	1	JENNIFER L. ROGELL, CPA	ODG	self-employ	Ed P01291797
	parer	Firm's name HUNGERFORD NICHOLS CPAS + ADVIS	UKS	Firm's EIN ▶	
Use	Only	Firm's address 2910 LUCERNE DR SE			6 040 2200
_		GRAND RAPIDS, MI 49546		Phone no. 6 1	6-949-3200
May	y the IP	S discuss this return with the preparer shown above? See instructions			X Yes No

		, , ,	
-			
Other program services (Describ	e on Schedule O.)		
(Expenses \$	including grants of \$	) (Revenue \$	)
Total program service expenses		_	

Total program service expenses ▶

Form 990 (2021)

## Form 990 (2021) MICHIGAN CASA, INC. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	<del>ا</del>		
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	<b>-</b> '-		
0	, ,			x
_	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?	_		<b>.</b>
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			,,
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	_X_	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes." complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		x
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the constitution maintain on office constitution and the Light of the Light of Obtain	14a		Х
b	Did the organization maintain an office, employees, or agents outside of the United States?  Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			<del></del> -
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		x
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	170		
13		15		x
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		<del></del>
10		46		x
47	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			_ v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines		v	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			177
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		X

Part IV	<b>Checklist of Required Schedules</b>	(continued)
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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		_X_
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		<u>X</u>
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	04-		Х
<b>L</b>	Schedule K. If "No," go to line 25a	24a		
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?  Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	24b		
·	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		_X_
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or 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? If "Yes," complete Schedule L, Part II	26		<u>X</u>
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			7.7
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<u>X</u>
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
_	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	28a		х
h	"Yes," complete Schedule L, Part IV	28b		X
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If</i>	200		
Ŭ	"Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		_X_
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		<u>X</u>
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
05 -	Part V, line 1	34		<u>X</u>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
D	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	35b		
36	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2  Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?	330		
00	If "Yes," complete Schedule R, Part V, line 2	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		Х
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pai	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V		·····	
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	4.	х	
	(gamoung) withings to prize withers:	1c	Z2	

132004 12-09-21

Form **990** (2021)

	990 (2021) MICHIGAN CASA, INC.		P	age 2
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return	_	37	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
_	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			- V
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	├─	X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		$\vdash$
44	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		x
h	If "Yes," enter the name of the foreign country	<del>4</del> a		1
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b	Ц_	Ц_
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	<u> </u>	X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		-
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	_		1,7
_	to file Form 8282?	7c		X
	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	-	<del>                                     </del>
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f 7g		$\vdash$
g h	If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?	7 <u>9</u> 7h	<u> </u>	<del>                                     </del>
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
Ū	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12	_		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	_		
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a	4		
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
40-	amounts due or received from them.)  11b	10-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?  If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
u	Note: See the instructions for additional information the organization must report on Schedule O.	100		
b	Enter the amount of reserves the organization is required to maintain by the states in which the			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b	<u> </u>	Щ
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			l .
	excess parachute payment(s) during the year?	15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		X
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any	47		

If "Yes," complete Form 6069.

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on 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 Yes No 12 **1a** Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. 12 **b** Enter the number of voting members included on line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other X officer, director, trustee, or key employee? 2 Did the organization delegate control over management duties customarily performed by or under the direct supervision 3 Х of officers, directors, trustees, or key employees to a management company or other person? 3 X Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 4 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? 6 Х 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? Х 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? X 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: Х a The governing body? 8a **b** Each committee with authority to act on behalf of the governing body? Х 8b 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 on Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes Nο 10a Did the organization have local chapters, branches, or affiliates? Х b 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? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a b Describe on Schedule O the process, if any, used by the organization to review this Form 990. Х 12a Did the organization have a written conflict of interest policy? If "No," go to line 13 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes." describe 12c on Schedule O how this was done Did the organization have a written whistleblower policy? Х 13 13 Х Did the organization have a written document retention and destruction policy? 14 14 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? The organization's CEO, Executive Director, or top management official Х 15a Х Other officers or key employees of the organization 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a Х taxable entity during the year? 16a b 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 List the states with which a copy of this Form 990 is required to be filed ▶MI Section 6104 requires an organization to make its Forms 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 X Own website Another's website Upon request Other (explain on Schedule O) Describe on 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. State the name, address, and telephone number of the person who possesses the organization's books and records PATTY SABIN - 616.259.7200

Form **990** (2021)

660 CASCADE WEST PARKWAY SUITE 65.

49546

GRAND RAPIDS

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

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

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

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

See the instructions for the order in which to list the persons above.

(A)	(B)			_ ((				(D)	(E)	(F)
Name and title	Average	Position (do not check more than one					one	Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	son i	s both	an	compensation	compensation	amount of
	week (list any	-						from the	from related organizations	other compensation
	hours for	direct				p		organization	(W-2/1099-MISC/	from the
	related	tee or	ustee			ensate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	al trus	nal tr		loyee	comp		1099-NEC)		and related
	below line)	Individual trustee or director	In stit utio nal tru stee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) PATTY SABIN	40.00	드	드	0	3	王ə	Fc			
EXECUTIVE DIRECTOR		1		х				91,135.	0.	0.
(2) AMY D'APRILE	1.00							,		
SECRETARY		Х		X				0.	0.	0.
(3) KATHLEEN BRACH	1.00									
DIRECTOR		Х						0.	0.	0.
(4) KELLI GIERZ	1.00	1								
DIRECTOR		Х						0.	0.	0.
(5) KYLE PURDY	1.00	ļ								
DIRECTOR	1 00	Х						0.	0.	0 .
(6) PHIL STARK	1.00	<b>.</b> ,							_	
DIRECTOR (7) LYNN GARDNER	1.00	Х						0.	0.	0.
DIRECTOR	1.00	Х						0.	0.	0.
(8) PETE SCUDDER	1.00							0.	<u></u>	0.
TREASURER	1.00	х		Х				0.	0.	0.
(9) PHIL MINSTER	1.00									
DIRECTOR		Х						0.	0.	0.
(10) DIANNA SOLOMON	1.00									
DIRECTOR		Х						0.	0.	0.
(11) BRENDA BAKER-MBACKE'	1.00									
DIRECTOR		Х						0.	0.	0.
(12) ROBERT JAMULA	1.00								_	_
CHAIRMAN		Х		Х				0.	0.	0.
(13) ZENELL BROWN	1.00	ļ								
DIRECTOR		Х						0.	0.	0 .
		-								
		1								
			$\vdash$							
		1								
		1								

Form **990** (2021)

Par	Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	anc	<u>iH t</u>	ghes	st Co	ompensated Employee	s (continued)				
	(A)	(B)			(0	C)			(D)	(E)			(F)	
	Name and title	Average	١,,		Pos				Reportable	Reportable		Es	stimate	ed
		hours per		not c , unle					compensation	compensation	n		nount	
		week	offi	cer ar	nd a di	irecto	r/trus	tee)	from	from related			other	
		(list any	ector						the	organizations	3	com	pensa	tion
		hours for	or dir	a.			ted		organization	(W-2/1099-MIS	C/	fı	om th	е
		related	Individual trustee or director	Institutional trustee			Highest compensated employee		(W-2/1099-MISC/	1099-NEC)		_	anizat	
		organizations below	al tru	onal t		loyee	l wo		1099-NEC)				d relat	
		line)	divid	stituti	Officer	Key employee	ghest	Former				orga	anizati	ons
			드	드	Đ	ş.	= E	요						
	College	<u> </u>	<u> </u>	<u> </u>			<u> </u>		91,135.		0.			0.
	Subtotal								91,133.		0.			0.
	Total from continuation sheets to Part VI								91,135.		0.			0.
	Total (add lines 1b and 1c)							<u> </u>	· · · · · · · · · · · · · · · · · · ·					0.
2	Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove	) wh	o re	eceived more than \$100,	000 of reportable				^
	compensation from the organization												V	0
													Yes	No
3	Did the organization list any former officer,	director, trust	ee, k	кеу е	empl	oye	e, or	hig	hest compensated emp	loyee on				
	line 1a? If "Yes," complete Schedule J for s											3		X
4	For any individual listed on line 1a, is the su													
	and related organizations greater than \$150	0,000? If "Yes,	" co	mple	ete S	Sche	edule	Jf	or such individual			4		X
5	Did any person listed on line 1a receive or a													
	rendered to the organization? If "Yes." con	plete Schedule	J f	or st	ıch ı	oers	on .					5		X
Sec	tion B. Independent Contractors													
1	Complete this table for your five highest co	mpensated inc	lepe	nder	nt co	ontra	acto	rs th	nat received more than \$	100,000 of comp	ensa	tion fr	om	
	the organization. Report compensation for	the calendar ye	ear e	endir	ng w	ith c	or wi	thin	the organization's tax y	ear.				
	(A)								(B)			(0	C)	
	Name and business	address	N	INC	3				Description of s	ervices	С	ompe	nsatio	n
								$\dashv$						
								$\dashv$						
								$\dashv$		+				
	Total number of independent contractors 6	ooludina hut =	5+ 15 <i></i>	nita	1 + ~ -	tha	۱: م	+~~	abovo) who received ==	oro than				
2	Total number of independent contractors (ii \$100,000 of compensation from the organic		יר ווו	mec	י נט	tnos (		ıeu	above, who received mo	DIE HIAH				

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Part VIII Statement of Revenue Check if Schedule O contains a response or note to any line in this Part VIII (B) (C) Related or exempt Unrelated Revenue excluded Total revenue from tax under function revenue business revenue sections 512 - 514 Contributions, Gifts, Grants and Other Similar Amounts 1 a Federated campaigns 1a 5,850. 20,277. 1b **b** Membership dues c Fundraising events ..... 1c d Related organizations 1d 549,290. e Government grants (contributions) 1e f All other contributions, gifts, grants, and similar amounts not included above ... 61,090 1f g Noncash contributions included in lines 1a-1f 636,507. h Total. Add lines 1a-1f **Business Code** 2 a Program Service f All other program service revenue ..... g Total. Add lines 2a-2f Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties ..... (i) Real (ii) Personal 6 a Gross rents 6b **b** Less: rental expenses ... c Rental income or (loss) d Net rental income or (loss) (i) Securities (ii) Other 7 a Gross amount from sales of assets other than inventory 7a b Less: cost or other basis Other Revenue and sales expenses c Gain or (loss) \_\_\_\_\_\_\_7c d Net gain or (loss) 8 a Gross income from fundraising events (not including \$20,277. ofcontributions reported on line 1c). See Part IV, line 18 **b** Less: direct expenses -827. -827. c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 **b** Less: direct expenses 9b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns 10a and allowances **b** Less: cost of goods sold ..... c Net income or (loss) from sales of inventory **Business Code** 11 a ANNUAL CONFERENE 1,775. 1,775. 999999 d All other revenue 1,775. e Total. Add lines 11a-11d 637,455. 1,775. -827. **12 Total revenue**. See instructions

\*\*\_\*\*\*\*

action 501(a)(2) and 501(a)(4) arganizations must complete all columns. All other arganizations must complete column (A)

	Check if Schedule O contains a respons				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	(C) Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
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,	04 405		12 222	
	trustees, and key employees	91,135.	77,743.	13,392.	
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	60 001	F0 106	10 005	
7	Other salaries and wages	68,221.	58,196.	10,025.	
8	Pension plan accruals and contributions (include				
_	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits	10 400	10 656	1 022	
10	Payroll taxes	12,488.	10,656.	1,832.	
11	Fees for services (nonemployees):				
a	Management				
b	Legal	6,361.		6,361.	
C	Accounting	43,000.		43,000.	
d	Lobbying	43,000.		43,000.	
e	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	,	7,490.	7,490.		
40	column (A), amount, list line 11g expenses on Sch 0.)	7,490.	7,490.		
12 13	Advertising and promotion	8,237.	8,237.		
14	Office expenses	3,741.	3,741.		
15		3,741.	3,741.		
16	Royalties Occupancy	19,698.	19,698.		
17	Travel	5,880.	5,880.		
18	Payments of travel or entertainment expenses	3,000.	3,0001		
10	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	16,255.	16,255.		
20	Interest				
21	Payments to affiliates	273,212.	273,212.		
22	Depreciation, depletion, and amortization	1,967.	1,967.		
23	Insurance	3,457.	-,,-	3,457.	
24	Other expenses. Itemize expenses not covered	3,23		,	
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A),				
	amount, list line 24e expenses on Schedule 0.)	2 075	2 075		
	MISCELLANEOUS DUES AND SUBSCRIPTIONS	2,875.	2,875. 2,470.		
b	DUES AND SUBSCRIPTIONS	2,470.	4,4/0.	1 202	
C	BANK FEES	1,382.		1,382.	
d	All others are an are				
e or		567,869.	488,420.	79,449.	0
<u>25</u>	Total functional expenses. Add lines 1 through 24e	301,003.	400,420.	13,443.	U
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.  Check here  if following SOP 98-2 (ASC 958-720)				
	Check here if following SOP 98-2 (ASC 958-720)				Form <b>990</b> (202

## Form 990 (2021) Part X | Balance Sheet

2ar	tΧ	Balance Sheet					
		Check if Schedule O contains a response or n	ote to an	y line in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			9,919.	1	45,249
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net				3	20,166
	4	Accounts receivable, net				4	
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sub					
		controlled entity or family member of any of th		5			
	6	Loans and other receivables from other disqua					
		under section 4958(f)(1)), and persons describ		6			
ပ္သ	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use			2,340.	8	
₹	9	5				9	1,672
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	. 10a	28,853.			
	b	Less: accumulated depreciation	. 10b	19,806.	3,529.	10c	9,047
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line				12	
	13	Investments - program-related. See Part IV, lin	e 11			13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	1,239.	15	1,239		
	16	Total assets. Add lines 1 through 15 (must ed			17,027.	16	77,373
	17	Accounts payable and accrued expenses	1,661.	17	5,971		
	18	Grants payable		18			
	19	Deferred revenue			18,550.	19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete				21	
ا م	22	Loans and other payables to any current or for					
Liabilities		trustee, key employee, creator or founder, sub	stantial o	ontributor, or 35%			
		controlled entity or family member of any of th				22	
֡֡֞֞֡֡֞֞֞֡֡֞֞֡֡֡֡֡֡֡֡֡֡֡֡	23	Secured mortgages and notes payable to unre				23	
	24	Unsecured notes and loans payable to unrelat	ed third		15,000.	24	20,000
	25	Other liabilities (including federal income tax, p					
		parties, and other liabilities not included on lin					
		of Schedule D				25	
	26	Total liabilities. Add lines 17 through 25			35,211.	26	25,971
		Organizations that follow FASB ASC 958, cl	neck her	× X			
se		and complete lines 27, 28, 32, and 33.					
anc	27	Net assets without donor restrictions	-18,184.	27	51,402		
Ба	28	Net assets with donor restrictions				28	
<u>ا</u> و		Organizations that do not follow FASB ASC					
고		and complete lines 29 through 33.					
, o	29	Capital stock or trust principal, or current fund			29		
Sets	30	Paid-in or capital surplus, or land, building, or				30	
As	31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			-18,184.	32	51,402
_	33	Total liabilities and net assets/fund balances			17,027.	33	77,373

Form **990** (2021)

Pa	rt 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			<u>55.</u>	
2	Total expenses (must equal Part IX, column (A), line 25)	2	56'	7,8	<u>69.</u>	
3						
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4					
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9			0.	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	5:	1,4	02.	
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				Yes	No	
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.				
2a	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?		2b	X		
	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:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	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?		2c	X		
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle Audit			1	
	Act and OMB Circular A-133?		3a		X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ed audit			1	
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		3b			
			Form	990	(2021)	

### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021
Open to Public

Inspection

MICHIGAN CASA, INC.

Employer identification number

\*\*-\*\*\*\*\*

Pá	art I	Reason for Public (	Charity Status.	(All organizations must o	omplete th	nis part.) S	ee instructions.		
The	The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)								
1	$\sqcap$	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).							
2	一	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)							
3	一	A hospital or a cooperative		•		)(b)(1)(A)(ii	ii).		
4	一	A medical research organiz					-	the hospital's name.	
·		city, and state:	ŗ					,	
5		An organization operated for	or the benefit of a col	llege or university owned	or operat	ed by a go	vernmental unit describe	ed in	
_		section 170(b)(1)(A)(iv). (0		,		, ,			
6		A federal, state, or local go		nental unit described in	section 17	70(b)(1)(A)	(v).		
7	П	An organization that norma	ŭ				• •	oublic described in	
		section 170(b)(1)(A)(vi). (C	•	a. part or no capport	o a go		ann an mann and gamaran i		
8		A community trust describe	•	(1)(A)(vi). (Complete Par	: II )				
9	П	An agricultural research org				ed in coniu	inction with a land-grant	college	
Ī		or university or a non-land-g				_	-	-	
		university:	grant conlege or agno	artaro (000 morraotiono).	21101 110 1	namo, only	, and state of the conlege	, 01	
10	X	An organization that norma	Ilv receives (1) more	than 33 1/3% of its supp	ort from c	ontribution	ns, membership fees, and	d gross receipts from	
		activities related to its exen							
		income and unrelated busin		•				-	
		See section 509(a)(2). (Co					, 3	,	
11		An organization organized	•	vely to test for public sa	fetv. See	section 50	09(a)(4).		
12		An organization organized a	•	•	•			purposes of one or	
		more publicly supported or	•	•	•		•		
		lines 12a through 12d that	~						
á	a 🗆	Type I. A supporting orga	* *			-		giving	
		the supported organization	· · · · · · · · · · · · · · · · · · ·		•	-			
		organization. You must o	complete Part IV, Se	ections A and B.					
k	, <u> </u>	Type II. A supporting org	anization supervised	or controlled in connect	ion with its	s supporte	ed organization(s), by hav	ving	
		control or management o	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manage the supp	ported	
		organization(s). You mus	t complete Part IV,	Sections A and C.					
(	; [	Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functionally integrate	ed with,	
		its supported organization	n(s) (see instructions)	). You must complete i	Part IV, Se	ections A,	D, and E.		
c	t	Type III non-functionally	<b>/ integrated.</b> A supp	orting organization oper	ated in co	nnection w	vith its supported organiz	zation(s)	
		that is not functionally int	egrated. The organiz	ation generally must sat	isfy a distr	ibution rec	quirement and an attentiv	/eness	
		requirement (see instruct	ions). <b>You must con</b>	nplete Part IV, Sections	A and D,	and Part	V.		
6	• 🗆	Check this box if the orga	anization received a v	written determination fro	m the IRS	that it is a	Type I, Type II, Type III		
		functionally integrated, or	r Type III non-function	nally integrated supporti	ng organiz	ation.			
1	Ente	er the number of supported o	organizations						
		vide the following information			(iv) lo the erge	nization listed			
	(	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	in your governi	anization listed ing document?	(v) Amount of monetary	(vi) Amount of other	
		organization		above (see instructions))	Yes	No	support (see instructions)	support (see instructions)	
<u>Tot</u>	al						I	i	

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

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	<b>(a)</b> 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
6	Public support. Subtract line 5 from line 4.						
	tion B. Total Support			I.			
Cale	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Amounts from line 4	(=) == ::	(,	(-,	(-,	(-,	(-)
	Gross income from interest,						
_	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
9	Net income from unrelated business						-
•	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						
	Gross receipts from related activities,	etc (see instruction	nns)			12	
	<b>First 5 years.</b> If the Form 990 is for th	•		fourth or fifth tax			
	organization, check this box and <b>stop</b>				•	* * * *	
Sec	tion C. Computation of Publi						<u>,                                     </u>
	Public support percentage for 2021 (li			column (f))		14	%
15	Public support percentage from 2020	Schedule A, Part	II, line 14			15	%
	33 1/3% support test - 2021. If the c					ore, check this box	
	stop here. The organization qualifies	as a publicly supp	orted organization				
b	33 1/3% support test - 2020. If the o		-				
	and <b>stop here.</b> The organization quali						
17a	10% -facts-and-circumstances test						
	and if the organization meets the facts						
	meets the facts-and-circumstances te				•		▶ □
b	10% -facts-and-circumstances test	-	-		-		
_	more, and if the organization meets th	· ·				•	
	organization meets the facts-and-circu				-		ightharpoonup
18	<b>Private foundation.</b> If the organization		-		· · · · · ·		
			, 10	, , , , , , . , . , . , . ,	,		Form 990) 2021

## Schedule A (Form 990) 2021 MICHIGAN CASA, INC. Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

Sec	qualify under the tests listed be ction A. Public Support	elow, please comp	lete Part II.)				
	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
	Gifts, grants, contributions, and	(4) 2011	(2) 2010	(0) 2010	(4) 2020	(0) 2021	(i) rotal
-	membership fees received. (Do not						
	include any "unusual grants.")	123,950.	115,679.	237,740.	172,079.	636,507.	1285955.
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	26,756.	39,661.	33,994.	,		100,411.
2	Gross receipts from activities that	20,7300	33,001	3373310			100,111
3	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	150,706.	155,340.	271,734.	172,079.	636,507.	1386366.
78	Amounts included on lines 1, 2, and 3 received from disqualified persons	5,000.	11,500.	50,147.	40,000.	35,000.	141,647.
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the	20,000.	10,000.	11,000.	68,421.		109,421.
,	amount on line 13 for the year  Add lines 7a and 7b	25,000.	21,500.	61,147.		35,000.	251,068.
	Public support. (Subtract line 7c from line 6.)	23,000:	21,300.	01,147.	100,421.	33,000.	1135298.
Sec	etion B. Total Support						11332301
Cale	ndar year (or fiscal year beginning in)	(a) 2017	<b>(b)</b> 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6	150,706.	155,340.	271,734.	172,079.	636,507.	1386366.
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b  Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	5,807.	1,671.			1,775.	9,253.
13	Total support. (Add lines 9, 10c, 11, and 12.)	156,513.	157,011.	271,734.	172,079.	638,282.	1395619.
14	First 5 years. If the Form 990 is for the	ne organization's fir	rst, second, third, t	ourth, or fifth tax y	ear as a section 50	01(c)(3) organizatio	n,
	check this box and stop here						
Sec	ction C. Computation of Publi	c Support Per	centage				
15	Public support percentage for 2021 (I	ine 8, column (f), d	ivided by line 13, c	olumn (f))		15	81.35 %
	Public support percentage from 2020					16	70.26 %
Sec	ction D. Computation of Inves	tment Income	Percentage				
17	Investment income percentage for 20	<b>)21</b> (line 10c, colun	nn (f), divided by lii	ne 13, column (f))		17	.00 %
18	Investment income percentage from	<b>2020</b> Schedule A,	Part III, line 17			18	%
19a	33 1/3% support tests - 2021. If the	organization did n	ot check the box o	on line 14, and line	15 is more than 3	3 1/3%, and line 17	
t	more than 33 1/3%, check this box ar 33 1/3% support tests - 2020. If the						<b>▶</b> X
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization						

\*\*\_\*\*\*

### Part IV | Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

### Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in **Part VI** how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7?

  If "Yes." complete Part I of Schedule L (Form 990).
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes." provide detail in **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.
  - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

	Yes	No
1		
•		
2		
3a		
3b		
30		
_		
3c		
4a		
4b		
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Has the organization accepted a gift or contribution from any of the following persons?  a A person who directly or indirectly controls, either acces or together with personal described on lines 11b and 11c blow, if you governing body or authorised controlled on line 11a above?  b A family member of a porson described on line 11a above?  c A 35% controlled entity of a person described on line 11a above?  c A 35% controlled entity of a person described on line 11a to or 11b above? If yes' (a line 11a, 11b, or 11c, provide described provided in the 11a or 11b above? If yes' (a line 11a, 11b, or 11c, provide described provided in 11b or 11b above? If yes' (a line 11a, 11b, or 11c, provide described provided in 11b or 11b above? If yes' (a line 11a, 11b, or 11c, provide described provided	Pai	T IV   Supporting Organizations (continued)			
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11b alone, the governing body of a supported organization?  b A Amily member of a person described on line 11a above?  c A 35% controlled writty of a person described on line 11a above?  c A 35% controlled writty of a person described on line 11a above?  1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization of organization have the power to regularly appoint or elect at least a majority of the organization of organization have the power to regularly appoint or elect at least a majority of the organization of organization have the power to regularly appoint or elect at least a majority of the organization of organization or the supported organization orga				Yes	No
11a blow, the governing body of a supported organization? b A family member of a person described on line 11a on 11b above? If "Yes" to line 11a, 11b, or 11c, provide  a 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide  a 1b Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to require yaporit or elect at least a majority of the organizations for one or more supported organizations have the power to require yaporit or elect at least a majority of the organizations of effectively operated, supervised, or controlled the organization as activities. If the organization had more than one supported supported organization of the transfer organization of the transfer organization of the transfer organization organization and the supported organization organiz	11	Has the organization accepted a gift or contribution from any of the following persons?			
b A Astive controlled entity of a person described on line 11a above? If "Yes" to line 11a, 11b, or 11c, provide deal in Pert VI.  Section B. Type I Supporting Organizations  Did the growing body, members of the governing body, officers acting in their official capacity, or membership of one or not supported organization three than the expense of the governing body and the complete organization of the provision of the proposes of the supported organization? If "Yes," explain in Part VI have providing such benefit carred out the proposes of the supported organization of the provision of the provision of the proposes of the supported organization of the provision	а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
b A Astive controlled entity of a person described on line 11a above? If "Yes" to line 11a, 11b, or 11c, provide deal in Pert VI.  Section B. Type I Supporting Organizations  Did the growing body, members of the governing body, officers acting in their official capacity, or membership of one or not supported organization three than the expense of the governing body and the complete organization of the provision of the proposes of the supported organization? If "Yes," explain in Part VI have providing such benefit carred out the proposes of the supported organization of the provision of the provision of the proposes of the supported organization of the provision		11c below, the governing body of a supported organization?	11a		i
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide setatic in Part VI.  Section B. Type I Supporting Organizations  1 Did the governing body, members of the governing body, officers acting in their difficial capacity, or membership of one or more supported organizations have the prevent or populary appoint or elect at least a majority of the organization officers, effectively operated, supervised, or controlled the organization setativities if the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were effected organization and water conditions or restrictions, if any, applied to such powers during the tax year.  2 Did the organization operate for the benefit of any supported organization share than the supported organization of the trust of the purposes of the supported organization by that operated, supervised, or controlled the supporting organization.  Section C. Type II Supporting Organizations  1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization's II *No.* describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled the interport of management of the supporting organization was vested in the same persons that controlled or management of the supporting organization was vested in the same persons that controlled or management of the supporting organization was vested in the same persons that controlled or management of the supporting organization was vested in the same persons that controlled or management of the supported organizations.  1 Did the organization provide to each of its supported organization, and (ii) copies of the organization's provided organization or the query of the Care State of the supported organization or the controlled organization or the control	b		11b		
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1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organization have the power to regularly appoint or elect at least a majority of the cognization (secretic poyerated. Supervised, or controlled the organization searches at all times during the tax year? If "\n\0," describe in Part VI how the supported organization (secretic poyerated. Supervised, or controlled the organization searches how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organization of what conditions or restrictions, if any, applied to such powers during the tax year.  2 Did the organization operate for the benefit of any supported organization other than the supported organization of the tax year organization (s) that operated, supported organization (s) that operated, supported organization (s) that operated, supported organization of the proposes of the supported organization of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organizations.  1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization or unangement of the supporting Organization's supported organization or unangement of the supporting Organization's supported organization or unangement of the supporting organization was wested in the same persons that controlled or managed the supported organization's governing documents in reflect on the date of notification, and (iii) copies of the organization's governing documents in reflect on the date of notification, to the extent not previously provided?  2 Were any of the organization's officers, directors, or trustees either (ii) appointed or elected by the supported organization's governing documents in reflect on the date of notification, to the variant not provide to the				Vas	No
more supported organizations have the power to regularly appoint or elect at least a majority of the organization's offices, directors, or trustees at all times during the tax year? If No, describe in Part VI have the supported organization's effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove offices, directors, or trustees ware allocated among the supported organization operate for the benefit of any supported organization had more than one supported organization's described or the benefit of any supported organization and that the supported organization's than the supported organization's supervised, or controlled the supporting organization.  1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting Organization was vested in the same persons (that controlled or managed the supported organization) was vested in the same persons (that controlled or managed the supported organization) was vested in the same persons (that controlled or managed the supported organization) was vested in the same persons (that controlled or managed the supported organization) is tax year. (i) a written notice describing the type and amount of support provided during the prior tax year. (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (ii) opies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?  2 Were any of the organization of the electronic place of the supported organization's investment policies and in directing the use of the organization's and organization's investment policies and in directing the use of the organization's and or	4	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or		163	140
directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organizations activities. If the organization are than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organization of what conditions or restrictions, if any, applied to such powers during the tax year.  2. Did the organization operate for the benefit of any supported organization other than the supported organization of the tax year.  Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supported organization of the variety of the directors or trustees of each of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization's supported organization's understand of the supported organization's supported organization's understand or management of the supporting organization was vested in the same persons that controlled or managed the supported organization's supported organization's understand organization's tax year, (i) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided organization's organization's organization's organization's organization's described on line 2, above, did the organization's supported organization's provided on in the governing body of a supported organization's understand or	•				
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significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.  Section E. Type III Functionally Integrated Supporting Organizations  1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).  a The organization satisfied the Activities Test. Complete line 2 below.  b The organization is the parent of each of its supported organizations. Complete line 3 below.  c The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).  2 Activities Test. Answer lines 2a and 2b below.  a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organization, and how the organization determined that these activities described on line 2a, above, constitute activities that, but for the organization determined these activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  3 Parent of Supported Organizations. Answer lines 3a and 3b below.  a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.  b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			2		
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Section E. Type III Functionally Integrated Supporting Organizations  1		significant voice in the organization's investment policies and in directing the use of the organization's			
Section E. Type III Functionally Integrated Supporting Organizations  1		income or assets at all times during the tax year? If "Yes " describe in <b>Part VI</b> the role the organization's			
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<ul> <li>a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.</li> <li>b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each</li> </ul>	3				
trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.  b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each					
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each	_		3a		
	b	·			
			3b		

Pa	t V Type III Non-Functionally Integrated 509(a)(3) Supporti	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on N	Nov. 20, 1970 ( <i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu	st complete s	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
_3	Other gross income (see instructions)	3		
_4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
_1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	Check here if the current year is the organization's first as a non-function	ally integrate	d Type III supporting orga	nization (see
	instructions).			·

Schedule A (Form 990) 2021

Par	Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)							
Secti	Section D - Distributions Current Year							
1	Amounts paid to supported organizations to accomplish exe	mpt purposes	1					
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported						
	organizations, in excess of income from activity		2					
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3					
4	Amounts paid to acquire exempt-use assets		4					
_5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)	5					
_6	Other distributions (describe in Part VI). See instructions.		6					
_7_	Total annual distributions. Add lines 1 through 6.		7					
8	Distributions to attentive supported organizations to which the	ne organization is responsive						
	(provide details in Part VI). See instructions.		8					
9	Distributable amount for 2021 from Section C, line 6		9					
10	Line 8 amount divided by line 9 amount		10					
		(i)	(ii)	(iii)				
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2021	Distributable Amount for 2021				
1	Distributable amount for 2021 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2021 (reason-							
	able cause required - explain in Part VI). See instructions.							
3	Excess distributions carryover, if any, to 2021							
a	From 2016							
b	From 2017							
c	From 2018							
<u>d</u>	From 2019							
<u>e</u>	From 2020							
f	Total of lines 3a through 3e							
g	Applied to underdistributions of prior years							
<u>h</u>	Applied to 2021 distributable amount							
<u>i</u>	Carryover from 2016 not applied (see instructions)							
<u>j</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.							
4	Distributions for 2021 from Section D,							
	line 7: \$							
<u>a</u>	Applied to underdistributions of prior years							
<u> </u>	Applied to 2021 distributable amount							
<u> </u>	Remainder. Subtract lines 4a and 4b from line 4.							
5	Remaining underdistributions for years prior to 2021, if							
	any. Subtract lines 3g and 4a from line 2. For result greater							
	than zero, explain in Part VI. See instructions.							
6	Remaining underdistributions for 2021. Subtract lines 3h							
	and 4b from line 1. For result greater than zero, explain in							
	Part VI. See instructions.							
7	Excess distributions carryover to 2022. Add lines 3j							
	and 4c.							
_8_	Breakdown of line 7:							
	Excess from 2017							
	Excess from 2018							
	Excess from 2019							
<u>a</u>	Excess from 2020  Excess from 2021							

Schedule A (Form 990) 2021

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### Schedule A

# Payments from Disqualified Persons Included on Part III, Line 7a

2021

\*\* Do Not File \*\*

\*\*\* Not Open to Public Inspection \*\*\*

Payer's Name	2017 Amount	2018 Amount	2019 Amount	2020 Amount	2021 Amount
DAN BABIN	5,000.	5,500.	0.	0.	0.
KATHLEEN BRACH	0.	6,000.	5,500.	0.	0.
ROB AND JENNIFER JAMULA	0.	0.	44,647.	5,000.	0.
BRADLEY AND JENNIFER TAYLOR	0.	0.	0.	25,000.	0.
BRIAN AND LYNN GARDNER	0.	0.	0.	10,000.	30,000.
SHELLY VANDEWEGE	0.	0.	0.	0.	5,000.
Total to Schedule A, Part III, Line 7a	5,000.	11,500.	50,147.	40,000.	35,000.

\*\*\_\*\*\*

### Schedule A

# Excess Payments from Non-Disqualified Persons Included on Part III, Line 7b

2021

\*\* Do Not File \*\*

\*\*\* Not Open to Public Inspection \*\*\*

Payer's Name	2017 Amount	2018 Amount	2019 Amount	2020 Amount	2021 Amount
BIMBO BAKERIES	15,000.	0.	0.	0.	0.
EATON CORP	5,000.	5,000.	6,000.	5,000.	0.
MEIJER	0.	5,000.	5,000.	0.	0.
NATIONAL CASA	0.	0.	0.	63,421.	0.
Total to Schedule A, Part III, Line 7b	20,000.	10,000.	11,000.	68,421.	

\*\_\*\*\*\*

### Schedule A

# Identification of Excess Support Payments Included on Part III, Line 7b, column (e)

2021

\*\* Do Not File \*\*

\*\*\* Not Open to Public Inspection \*\*\*

Payer's Name	Amount Received in 2021	2021 Excess Payments
NATIONAL CASA	1,293.	0.
Total Excess Payments to Schedule A. Part III. Line 7b. column (e)		

### SCHEDULE C (Form 990)

### **Political Campaign and Lobbying Activities**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

● Section 501(c)(4), (5), or (6) organizations: Complete Part III.						
Nan	ne of organization			Empl	oyer identification number	
	MICHIGA	N CASA, INC.			**_****	
Pa	art I-A Complete if the org	anization is exempt und	er section 501(c)	or is a section 527 or	ganization.	
2	Provide a description of the organiz Political campaign activity expendit Volunteer hours for political campai	ures		<b>&gt;</b> \$		
Pa	art I-B Complete if the org	anization is exempt und	er section 501(c)(	3).		
1	Enter the amount of any excise tax				_	
	Enter the amount of any excise tax					
	If the organization incurred a section					
48	a Was a correction made?				Yes No	
<u>k</u>	If "Yes," describe in Part IV.					
_	·	anization is exempt und		<u> </u>	<u>)(3).</u>	
	Enter the amount directly expended					
2	Enter the amount of the filing organ		•			
_	exempt function activities					
3	Total exempt function expenditures		,			
4	line 17b  Did the filing organization file <b>Form</b>				Yes No	
5	Enter the names, addresses and en					
J	made payments. For each organiza	• •	•	•	• •	
	contributions received that were pro	·			•	
	political action committee (PAC). If	additional space is needed, prov	vide information in Part	IV.		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0	

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990) 2021

LHA

132041 11-03-21

Schedule C (Form 990) 2021

(150% of line 2d, column (e))

f Grassroots lobbying expenditures

## Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

the lobbying activity.	i i		(b)	
	Yes	Yes No Amount		
1 During the year, did the filing organization attempt to influence foreign, national, state, or				
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of:				
a Volunteers?		X		
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X			
c Media advertisements?		X		
d Mailings to members, legislators, or the public?		X		
e Publications, or published or broadcast statements?		Х		
f Grants to other organizations for lobbying purposes?		X		
g Direct contact with legislators, their staffs, government officials, or a legislative body?			4	3,000
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X		
i Other activities?		Х		
j Total. Add lines 1c through 1i			4.	3,000
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X		
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?art III-A Complete if the organization is exempt under section 501(c)(4), sec	 Hisp E01/s\/	<u> </u>	otion	
	tion 50 i (c)(	o), or se	Ction	
501(c)(6).			Vac	No.
501(c)(6).			Yes	No
501(c)(6).  Were substantially all (90% or more) dues received nondeductible by members?			Yes	No
Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere	n the prior year	2 ? 3 5), or se	ction	
Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B  Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."	n the prior year tion 501(c)( ed "No" OR	2 ? 3 5), or se (b) Part	ction	
Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members	n the prior year tion 501(c)( ed "No" OR	2 ? 3 5), or se (b) Part	ction	
Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenditures)	n the prior year tion 501(c)( ed "No" OR	2 ? 3 5), or se (b) Part	ction	
Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of potential expenses for which the section 527(f) tax was paid).	n the prior year tion 501(c)( ed "No" OR	2 3 5), or se (b) Part	ction	
Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).  a Current year	n the prior year tion 501(c)( ed "No" OR	2 3 5), or se (b) Part	ction	
Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year	n the prior year tion 501(c)( ed "No" OR	2 3 5), or se (b) Part	ction	
Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), sec 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of poexpenses for which the section 527(f) tax was paid).  a Current year  b Carryover from last year  c Total	n the prior year tion 501(c)( ed "No" OR	2 3 5), or se (b) Part 1 2a 2b 2c	ction	
Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of posterior year by Carryover from last year control of the co	n the prior year etion 501(c)( ed "No" OR	2 3 5), or se (b) Part 1 2a 2b 2c	ction	
Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of posterior year by Carryover from last year control of the desired amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues of londices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the desired amount on line 3, what portion of the desired amount on line 3, what portion of the desired amount on line 3, what portion of the desired amount on line 3, what portion of the desired amount on line 3, what portion of the desired amount on line 3, what portion of the desired amount on line 3, what portion of the desired amount on line 3, what portion of the desired amount on line 3, what portion of the desired amount on line 3, what portion of the desired amount on line 3, what portion of the desired amount on line 3.	n the prior year etion 501(c)(ced "No" OR blitical	2 3 5), or se (b) Part 1 2a 2b 2c	ction	
Were substantially all (90% or more) dues received nondeductible by members?  Did the organization make only in-house lobbying expenditures of \$2,000 or less?  Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members  Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polymenses for which the section 527(f) tax was paid).  Current year  Carryover from last year  Carryover from last year  Total  Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues  If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	n the prior year stion 501(c)(ed "No" OR  Diffical  excess d political	2 3 5), or see (b) Part  2a 2b 2c 3	ction	
Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from art III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."  Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of polymenses for which the section 527(f) tax was paid).  Current year Carryover from last year	n the prior year stion 501(c)(ed "No" OR  Diffical  excess d political	2 3 5), or see (b) Part  2a 2b 2c 3	ction	

### **SCHEDULE D** (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► 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.

OMB No. 1545-0047

Inspection

Name of the organization

MICHIGAN CASA, INC.

**Employer identification number** \*\*\_\*\*\*\*

Pai	TI Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		unds or Ad	counts. Complete if the
	Organization driented (150 or) or other observations	(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 w	riting that the assets held in dono	or advised fund	ds
	are the organization's property, subject to the organization's e	exclusive legal control?		Yes No
6	Did the organization inform all grantees, donors, and donor ac			
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other pu	ırpose conferr	ing
Pai	t II Conservation Easements. Complete if the org	anization answered "Yes" on Forn	n 990, Part IV,	line 7.
1	Purpose(s) of conservation easements held by the organizatio	n (check all that apply).		
	Preservation of land for public use (for example, recreat	ion or education) Preserva	ation of a histo	orically important land area
	Protection of natural habitat	Preserva	ation of a certi	fied historic structure
	Preservation of open space			
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the	e form of a co	
	day of the tax year.			Held at the End of the Tax Year
а	Total number of conservation easements			2a
				2b
	Number of conservation easements on a certified historic stru			2c
d	Number of conservation easements included in (c) acquired at	•		
_	listed in the National Register			2d
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated	by the organi	zation during the tax
_	year >			
4	Number of states where property subject to conservation ease	· · · · · · · · · · · · · · · · · · ·		
5	Does the organization have a written policy regarding the period		· ·	Yes No
6	violations, and enforcement of the conservation easements it			
6	Staff and volunteer hours devoted to monitoring, inspecting, h	landling of violations, and emorcin	ig conservatio	in easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ing of violations, and enforcing co	neonyation oa	coments during the year
′	\$\\$\$ \$\$ \$\$	ing of violations, and emorcing co	i isei valioi i ea	sements during the year
8	Does each conservation easement reported on line 2(d) above	satisfy the requirements of section	on 170(h)(4)(R)	(i)
Ü	and section 170(h)(4)(B)(ii)?	•		
9	In Part XIII, describe how the organization reports conservatio			
•	balance sheet, and include, if applicable, the text of the footnot		•	
	organization's accounting for conservation easements.	oto to the organization o imanolar t		
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures,	or Other S	imilar 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	3, not to report in its revenue state	ment and bala	ance sheet works
	of art, historical treasures, or other similar assets held for publ	lic exhibition, education, or researc	ch in furtherar	nce of public
	service, provide in Part XIII the text of the footnote to its finance	cial statements that describes the	se items.	·
b	If the organization elected, as permitted under FASB ASC 958	3, to report in its revenue statemer	nt and balance	sheet works of
	art, historical treasures, or other similar assets held for public	exhibition, education, or research	in furtherance	e of public service,
	provide the following amounts relating to these items:			
	(i) Revenue included on Form 990, Part VIII, line 1			<b>&gt;</b> \$
				L 4
2	If the organization received or held works of art, historical trea	sures, or other similar assets for fi	inancial gain, <sub>l</sub>	
	the following amounts required to be reported under FASB AS	SC 958 relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1			<b>&gt;</b> \$
	Assets included in Form 990, Part X			
	For Paperwork Reduction Act Notice, see the Instructions			Schedule D (Form 990) 2021

132051 10-28-21

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>b</b> Buildings						
c Leasehold improvements						
<b>d</b> Equipment		8,908.	2,395.	6,513.		
e Other		19,945.	17,411.	2,534.		
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (R), line 10c.)						

Schedule D (Form 990) 2021

Schedule D (Form 990) 2021 MICHIGAN CA	SA, INC.	**	_***** Page 3
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	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (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 900 Part Y line 13	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	d of year market value
	(b) Book value	(c) Method of Valuation. Cost of end	1-01-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
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)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	1E \		
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	. I.J.)		1
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	0111 01111 000, 1 411 14, 11110	110 01 111. 000 1 0111 000, 1 are X, 1110 20	(b) Book value
			(b) Dook value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			l

Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) 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 FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2021

(9)

Sche	dule D (Form 990) 2021 MICHIGAN CASA, INC.			**_	*****	Page 4
Par	t XI Reconciliation of Revenue per Audited Financial Statemen	ts Wi	th Revenue per Re	turn.		
	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	637	,455.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a				
b	Donated services and use of facilities	2b				
С	Recoveries of prior year grants	2c				

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12 5

Other (Describe in Part XIII.) Add lines 4a and 4b 4c 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. 567,869. 1 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: **a** Donated services and use of facilities 2a 2b **b** Prior year adjustments Other (Describe in Part XIII.) Add lines 2a through 2d 2e 567,869 Subtract line 2e from line 1 3 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 Other (Describe in Part XIII.) c Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18.) Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

### PART X, LINE 2:

d Other (Describe in Part XIII.) Add lines 2a through 2d

Subtract line 2e from line 1

Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b

THE ORGANIZATION IS A NOT-FOR-PROFIT ORGANIZATIONS THAT IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. THE ORGANIZATION EVALUATES TAX POSITIONS TAKEN ON ITS FEDERAL EXEMPT ORGANIZATION BUSINESS INCOME TAX RETURNS IN ACCORDANCE WITH GENERALLY ACCEPTED ACCOUNTING PRINCIPLES WHICH REQUIRE THAT TAX POSITIONS TAKEN BE MORE-LIKELY-THAN-NOT TO BE SUSTAINED. MANAGEMENT BELIEVES THAT THE ORGANIZATION HAS NO SIGNIFICANT UNRECOGNIZED TAX BENEFITS UNDER THESE CRITERIA. PENALTIES AND INTEREST, IF ANY, ASSESSED BY INCOME TAXING AUTHORITIES ARE INCLUDED IN OPERATING EXPENSES. THE ORGANIZATION'S FEDERAL EXEMPT ORGANIZATION BUSINESS INCOME TAX RETURNS ARE GENERALLY SUBJECT TO EXAMINATION BY TAXING AUTHORITIES FOR THREE YEARS AFTER THEY WERE FILED.

Schedule D (Form 990) 2021

637,455.

3

Schedule D (Form 990) 2021	MICHIGAN CASA,	INC.	**_****	Page 5
Schedule D (Form 990) 2021 Part XIII   Supplemental In	formation (continued)			. age e
. a. t /till   Cappioiniontal in	(continuea)			

## SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

### **Supplemental Information Regarding Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

➤ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization  MICHIGA	N CASA, INC.					**_***	ntification number ***
	Complete if the organization answe	red "Y	es" or	r Form 990, Part IV, li	ne 1	7. Form 990-EZ	filers are not
1 Indicate whether the organization rais a	ed funds through any of the following e Solicitat f Solicitat g Special or oral agreement with any individual art VII) or entity in connection with providuals or entities (fundraisers) pursua	tion of tion of fundra (includ	non-g gover aising of ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?		Yes	
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have cr or con contribu	ustody itrol of	(iv) Gross receipts from activity	to (c	Amount paid or retained by) fundraiser ted in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No				
Total			<b>•</b>				
3 List all states in which the organizatio or licensing.	n is registered or licensed to solicit o	ontrib	utions	or has been notified	it is e	exempt from re	gistration

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990) 2021

Pa	111	of fundraising events. Complete if the of fundraising event contributions and groups.	•				-
		or idinaraling event contributions and gro	(a) Event #1	(b) Event #2		Other events	
			APPEAL	(b) Event #2	1	NONE	(d) Total events
						NONE	(add col. (a) through
			EVENTS	, , ,			col. <b>(c)</b> )
e			(event type)	(event type	) (to	tal number)	
Revenue	1	Gross receipts	20,277.				20,277.
Re	•	Gloss receipts	20,217				20,277
	2	Less: Contributions	20,277.				20,277.
	3	Gross income (line 1 minus line 2)					
	4	Cash prizes					
	_	Managah mina					
S	5	Noncash prizes					
Direct Expenses	6	Rent/facility costs					
xbe	Ü	Tional admity doors					
ot E	7	Food and beverages					
Jire	•						
	8	Entertainment					
	9	Other direct expenses					827.
	10	Direct expense summary. Add lines 4 through				<b></b>	827.
	11	Net income summary. Subtract line 10 from li	. ,				-827.
Pa							•
		\$15,000 on Form 990-EZ, line 6a.					
-			(a) Pingo	(b) Pull tabs/ins	stant (a) C	ther gaming	(d) Total gaming (add
Revenue			(a) Bingo	bingo/progressive	bingo (C)	uner gaming	col. (a) through col. (c))
eve							
Ř	1	Gross revenue					
S	2	Cash prizes					
nse							
Direct Expenses	3	Noncash prizes					
χE							
)irec	4	Rent/facility costs					
	5	Other direct expenses					
	_		Yes %	Yes	_	es %	
	6	Volunteer labor	L No	L No	N	0	
	_	D:	5: ( )			_	
	7	Direct expense summary. Add lines 2 through	1 5 in column (a)			<b>&gt;</b>	
	٥	Net gaming income summary. Subtract line 7	from line 1 column (d)			_	
	0	Net garning income summary. Subtract line r	nom line 1, column (a)				ı
9	Ent	ter the state(s) in which the organization condu	icts gaming activities.				
		he organization licensed to conduct gaming a	_	states?			Yes No
		No," explain:					
-							
10a	We	ere any of the organization's gaming licenses re	evoked, suspended, or te	rminated during t	he tax year?		Yes No
		Yes," explain:					
		L-21_21				Cala	dule G (Form 990) 2021

Schedule G (Form 990) 2021 MICHIGAN CASA, INC.	_ * * * * * *	Page 3
11 Does the organization conduct gaming activities with nonmembers?	. Yes	No
12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed		
to administer charitable gaming?	Yes	No
13 Indicate the percentage of gaming activity conducted in:		
a The organization's facility	13a	%
<b>b</b> An outside facility		%
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
Name ▶		
Address >		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	Yes	No
h If IIVes II automble agreement of agreement and account to the agreement of the first to the agreement of		
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount		
of gaming revenue retained by the third party  \$		
c If "Yes," enter name and address of the third party:		
Name		
Address		
16 Gaming manager information:		
u <b>N</b>		
Name ▶		
Consider management and the Constitution of th		
Gaming manager compensation  \$		
Description of comings amounted A		
Description of services provided		
Director/officer Employee Independent contractor		
bliector/officer Employee Independent contractor		
47 Mandatan distributions		
17 Mandatory distributions:		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to	Yes	
retain the state gaming license?	L res	No No
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		
organization's own exempt activities during the tax year ► \$  Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and	Dort III. linns C	) Oh 10h
	art III, IIIles s	, 90, 100,
15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		

Schedule G	(Form 990)	MICHIGAN CASA,	INC.	**_****	Page 4
Part IV	(Form 990) Supplemental Infor	mation (continued)			J
	• • • • • • • • • • • • • • • • • • • •	(continued)			

### **SCHEDULE O** (Form 990)

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 Form 990-EZ.

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

OMB No. 1545-0047 Inspection

Department of the Treasury Internal Revenue Service Name of the organization

MICHIGAN CASA, INC.

**Employer identification number** \*\*\_\*\*\*

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
AND SUPPORTING THE DEVELOPMENT OF QUALITY CASA PROGRAMS THROUGHOUT THE
STATE OF MICHIGAN.
FORM 990, PART VI, SECTION B, LINE 11B:
THE 990 IS REVIEWED BY THE EXECUTIVE DIRECTOR PRIOR TO FILING.
FORM 990, PART VI, SECTION B, LINE 15A:
THE ORGANIZATION USED RESEARCH OF OTHER LIKE ORGANIZATIONS AND CONSULTED
WITH NATIONAL CASA IN DETERMINING EXECUTIVE DIRECTOR WAGES.
FORM 990, PART VI, SECTION C, LINE 19:
THE ORGANIZATION MAKES THEIR GOVERNING DOCUMENTS AVAILABLE VIA THEIR
WEBSITE AND UPON REQUEST.