Short Form Return of Organization Exempt From Income Tax

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

2016

Department of the Treasury Internal Revenue Service

SCANNED MAR 0 2 2018

▶ Do not enter social security numbers on this form as it may be made public. 1

▶ Information about Form 990-EZ and its instructions is at www.irs.gov/form 990.

Open to Public Inspection

A For the 2016 calence		2016 calend	ar year, or tax year beginning December 6 , 2016, and ending	Augr	ust 31 , 20 17		
B Check if applicable		22 E	ويستون ويونون والمراجع والمراج والوالون والماكات الماكات الماكات المراجع والمراجع والمساوي الماكات والمراجع والمراجع		er identification number		
Address change			Accent Pontiac, Inc.	81-4608180			
	Name cha	алде	E Telepho	Telephone number			
Ø	Initial retu		32666 Old Post Road	248-644-2713			
H		m/terminated		F Group	Exemption		
H	Amended	return on pending	Beverly Hills, MI 48025	Numbe			
G		ting Method.			If the organization is not		
	Website				attach Schedule B		
					, 990-EZ, or 990-PF).		
_			✓ Corporation ☐ Trust ☐ Association ☐ Other		· · · · · · · · · · · · · · · · · · ·		
		•	7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total a	essets			
(Pa	art II, col	lumn (B) belov	w) are \$500,000 or more, file Form 990 instead of Form 990-EZ	•	\$ 1,500		
	art I	Revenu	e, Expenses, and Changes in Net Assets or Fund Balances (see the Ir	nstructi			
80			the organization used Schedule O to respond to any question in this Part I				
_	1		ons, gifts, grants, and similar amounts received		1 1,500		
	2		ervice revenue including government fees and contracts	🗀	2 0		
	3		up dues and assessments		3 0		
	4	Investment	t income	🗔	4 0		
	5a	Gross amo	ount from sale of assets other than inventory 5a	0			
	b		or other basis and sales expenses	0			
	C	Gain or (lo:	ss) from sale of assets other than inventory (Subtract line 5b from line 5a)	5	ic 0		
	6		nd fundraising events				
	a	Gross inc	ome from gaming (attach Schedule G if greater than	J			
e	1	\$15,000) .		o			
Revenue	b	Gross inco					
æ	}	from fundr	1				
_	Ì	sum of suc	ch gross income and contributions exceeds \$15,000) 6b	0			
	C	Less; direc	t expenses from gaming and fundraising events 6c	0			
	d	Net incom-	e or (loss) from gaming and fundraising events (add lines 6a and 6b and subti	ract			
	1	line 6c) .		. 6	id 0		
	7a	Gross sale	s of inventory, less returns and allowances . /				
	b	Less cost	of goods sold				
	C	Gross prof	of goods sold	. 7	c 0		
	8	Other reve	nue (describe in Schedule O)	[В 0		
	9	lotal reve	nue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8g	. • 9	9 1,500		
	10		a similar amounts paid (list in Schedule V)	_	0 0		
	11		aid to or for members	_	1 0		
es	12		ther compensation, and employee benefits	-	2 0		
enses	13		al fees and other payments to independent contractors リアックラー、	_	3 0		
Exp	14		y, rent, utilities, and maintenance		4 0		
	15		ublications, postage, and shipping	-	5 0		
	16			6 0			
	17	total expe	enses. Add lines 10 through 16	1	7 0		
ts	18		(deficit) for the year (Subtract line 17 from line 9)		8 1,500		
SSe	19		or fund balances at beginning of year (from line 27, column (A)) (must agree was figure reported on prior year's return)		_		
Net Assets	000	100.0			9 0		
Š	20		nges in net assets or fund balances (explain in Schedule O)		0		
	21		or fund balances at end of year. Combine lines 18 through 20) 2	1,500		
FOI	rapen	work Heduct	ion Act Notice, see the separate instructions. Cat. No 106421		Form 990-EZ (2016)		

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Michael McGuinness, Director

Nathaniel Phillips, Director

Tina Rowan, Artistic and Program Director

Joe Shively, Director

Jayne Zellers, Director

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Part	instructions for Part V) Check if the organization used Schedule O to respond to any question in this			
• _	instructions for Part v) Check if the organization used Schedule O to respond to any question in this	Pan	Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	162	√
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?			
		35a		1
c	If "Yes," to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35b		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36		1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a			
b	Did the organization file Form 1120-POL for this year?	37b		1
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?	200		1
b	If "Yes," complete Schedule L, Part II and enter the total amount involved 38b	38a		~
39	Section 501(c)(7) organizations. Enter:	1		
а	Initiation fees and capital contributions included on line 9	}		
b	Gross receipts, included on line 9, for public use of club facilities	1		
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ► ; section 4912 ► ; section 4955 ►			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40ь		1
С	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed ► Michigan			
42a		248-97		<u> </u>
b	Located at ► 1340 W. Long Lake Road, Bloomfield Hills At any time during the calendar year, did the organization have an interest in or a signature or other authority over	483	Yes	NI
Ü	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	res	No.
	If "Yes," enter the name of the foreign country: ▶			
	See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States? . If "Yes," enter the name of the foreign country: ▶	42c		1
43	Section 4947(a)(1) nonexempt charitable trusts filling Form 990-EZ in lieu of Form 1041—Check here		. •	▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year		Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		/
	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		/
	Did the organization receive any payments for indoor tanning services during the year?	44c		1
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an exploration in School 16.0		- I]
	explanation in Schedule O	44d		✓_
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a		√
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," Form 990 and Schedule R may need to be completed instead of		1	
	Form 990-EZ (see instructions)	45b		1

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,40	Did t	he organization engage, directly or in	ndirectly in political o	ampaign activities	on behalf	of or in apposit	on [Yes	No	
	to ca	indidates for public office? If "Yes," c	omplete Schedule C	, Part I	· · ·	· · · · · ·	46		1	
Part	VI	Section 501(c)(3) organizations All section 501(c)(3) organizations 50 and 51.	only					or lin	es	
		Check if the organization used Sch	nedule O to respond	to any question	in this Par	t VI	_ 	Yes		
47	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								No	
48 49a	Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E			le E	48		1			
b	If "Yes," was the related organization a section 527 organization?						49b		1	
50	Complete this table for the organization's five highest compensated employees (other than officers, directors, tremployees) who each received more than \$100,000 of compensation from the organization. If there is none, enti-									
		(b) Average (c) Reportable component (d) Health benefits, contributions to employee (e)			(e) Estimate) Estimated amount of other compensation				
None										
								-		
f		number of other employees paid over		· · · ———	0					
51 	\$100,	plete this table for the organization's ,000 of compensation from the organ	s five highest compenization. If there is no	ensated independe one, enter "None."	ent contra	ctors who each	received	more	than	
	(a)	Name and business address of each independent	ent contractor	(b) Type of service (c) Com			Compensation	ipensation		
None										
d 52	Did t	number of other independent contract the organization complete Schedul pleted Schedule A			. ►		_			
	enaltres	of perjury, I declare that I have examined this re				to the best of my kno	► ✓ Yes wledge and		it is	
	prrect, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.									
Sign Here										
		Type or print name and title Print/Type preparer's name	Preparer's signature		Date		PTIN			
Paid		I mis type preparer a name				Check self-employe	† }			
Prepa Use (- I = 1					Firm's EIN ▶				
J-36 (-···y	Firm's address ▶				Phone no				