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Form

990-PF

Department of the Treasury  
Internal Revenue Service

Return of Private Foundation

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

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Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

OMB No 1545-0052

2014



Open to Public Inspection

For calendar year 2014, or tax year beginning 04-01-2014 , and ending 03-31-2015

Name of foundation THE CHELSEA HEALTH AND WELLNESS FOUNDATION		<b>A Employer identification number</b>  26-3040367	
Number and street (or P O box number if mail is not delivered to street address) 310 N MAIN STREET SUITE 203		<b>B Telephone number</b> (see instructions)  (734) 433-4599	
City or town, state or province, country, and ZIP or foreign postal code CHELSEA, MI 481181291		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>	
<b>G</b> Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
<b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) <input checked="" type="checkbox"/> \$ 51,744,638		<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
<b>J</b> Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)			

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule) . . . . .				
	2 Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments	255	255		
	4 Dividends and interest from securities. . . . .	265,214	265,214		
	5a Gross rents . . . . .	474,170	474,170		
	b Net rental income or (loss) 356,031				
	6a Net gain or (loss) from sale of assets not on line 10	778,716			
	b Gross sales price for all assets on line 6a 26,383,990				
	7 Capital gain net income (from Part IV, line 2) . . .		778,716		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances 99,031				
	b Less Cost of goods sold 56,628				
	c Gross profit or (loss) (attach schedule) . . . . .	42,403		42,403	
	11 Other income (attach schedule) . . . . .	 4,713,499	277,221	4,411,979	
	12 <b>Total.</b> Add lines 1 through 11 . . . . .	6,274,257	1,795,576	4,454,382	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	132,696	13,270	0	119,426
	14 Other employee salaries and wages . . . . .	2,819,050	97,787	2,627,319	93,944
	15 Pension plans, employee benefits . . . . .	43,640	8,285	0	35,355
	16a Legal fees (attach schedule) . . . . .	 358,365	0	900	357,465
	b Accounting fees (attach schedule) . . . . .	 44,951	0	0	44,951
	c Other professional fees (attach schedule) . . . . .	 287,906	0	272,010	16,344
	17 Interest . . . . .	320,597	0	320,597	0
	18 Taxes (attach schedule) (see instructions) . . . . .	 48,700	0	0	0
	19 Depreciation (attach schedule) and depletion . . .	979,169	0	969,160	
	20 Occupancy . . . . .	353,841	0	280,955	70,521
	21 Travel, conferences, and meetings . . . . .	22,716	389	15,328	7,567
	22 Printing and publications . . . . .	4,923	0	0	4,979
	23 Other expenses (attach schedule) . . . . .	 1,438,489	112,179	1,137,505	508,541
	24 <b>Total operating and administrative expenses.</b> Add lines 13 through 23 . . . . .	6,855,043	231,910	5,623,774	1,259,093
	25 Contributions, gifts, grants paid . . . . .	947,993			659,204
	26 <b>Total expenses and disbursements.</b> Add lines 24 and 25	7,803,036	231,910	5,623,774	1,918,297
	27 Subtract line 26 from line 12				
	a <b>Excess of revenue over expenses and disbursements</b>	-1,528,779			
	b <b>Net investment income</b> (if negative, enter -0-)		1,563,666		
	c <b>Adjusted net income</b> (if negative, enter -0-)			0	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing . . . . .	9,424	17,224	17,224
	2	Savings and temporary cash investments . . . . .	1,124,139	661,011	661,011
	3	Accounts receivable ▶ <u>76,473</u>			
		Less allowance for doubtful accounts ▶ <u>1,900</u>	31,576	74,573	74,573
	4	Pledges receivable ▶ _____			
		Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____			
		Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .	18,932	18,594	18,594
	9	Prepaid expenses and deferred charges . . . . .	184,548	182,304	182,304
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .			
	c	Investments—corporate bonds (attach schedule). . . . .			
	11	Investments—land, buildings, and equipment basis ▶ _____			
	Less accumulated depreciation (attach schedule) ▶ _____				
12	Investments—mortgage loans . . . . .				
13	Investments—other (attach schedule) . . . . .	28,179,302	27,952,665	27,952,665	
14	Land, buildings, and equipment basis ▶ <u>26,585,454</u>				
	Less accumulated depreciation (attach schedule) ▶ <u>3,747,187</u>	23,661,169	22,838,267	22,838,267	
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	53,209,090	51,744,638	51,744,638	
Liabilities	17	Accounts payable and accrued expenses . . . . .	418,973	349,655	
	18	Grants payable . . . . .	37,861	331,490	
	19	Deferred revenue . . . . .	435,279	398,194	
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule) . . . . .	11,874,104	11,408,471	
	22	Other liabilities (describe ▶ _____)	280,180	195,790	
	23	Total liabilities (add lines 17 through 22) . . . . .	13,046,397	12,683,600	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds . . . . .	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	40,162,693	39,061,038	
	30	Total net assets or fund balances (see instructions) . . . . .	40,162,693	39,061,038	
	31	Total liabilities and net assets/fund balances (see instructions) . . . . .	53,209,090	51,744,638	

Part III Analysis of Changes in Net Assets or Fund Balances		
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return) . . . . .	1 40,162,693
2	Enter amount from Part I, line 27a . . . . .	2 -1,528,779
3	Other increases not included in line 2 (itemize) ▶  _____	3 726,326
4	Add lines 1, 2, and 3 . . . . .	4 39,360,240
5	Decreases not included in line 2 (itemize) ▶  _____	5 299,202
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .	6 39,061,038

Part IV

Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 a	PUBLICLY TRADED SECURITIES	P		
b	FROM K-1 CFI INSTITUTIONAL HIGH QUALITY BOND FUND LLC	P		
c	FROM K-1 CF STRATEGIC SOLUTIONS GLOBAL EQUITY FUND	P		
d	FROM K-1 CFI INSTITUTIONAL HIGH QUALITY BOND FUND LLC	P		
e	FROM K-1 CF STRATEGIC SOLUTIONS GLOBAL EQUITY FUND	P		

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 25,329,949		25,584,500	-254,551
b		16,728	-16,728
c 330,989			330,989
d		4,046	-4,046
e 723,052			723,052

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			-254,551
b			-16,728
c			330,989
d			-4,046
e			723,052

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	778,716
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)  If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 . . . . . }		3	

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2013	15,860,549	31,385,034	0 505354
2012	1,769,220	30,639,829	0 057742
2011	1,297,445	30,267,005	0 042867
2010	1,225,970	29,372,688	0 041738
2009	715,319	24,565,306	0 029119

2 Total of line 1, column (d). . . . .	2	0 676820
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years . . . . .	3	0 135364
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5. . . . .	4	30,616,055
5 Multiply line 4 by line 3. . . . .	5	4,144,312
6 Enter 1% of net investment income (1% of Part I, line 27b). . . . .	6	15,637
7 Add lines 5 and 6. . . . .	7	4,159,949
8 Enter qualifying distributions from Part XII, line 4. . . . .	8	2,074,568

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See  
the Part VI instructions

Part VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a		Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1			
b		Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .		1	31,273
c		All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)			
2		Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2	0
3		Add lines 1 and 2. . . . .		3	31,273
4		Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		4	0
5		Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- . . . . .		5	31,273
6		Credits/Payments			
a		2014 estimated tax payments and 2013 overpayment credited to 2014	6a	43,829	
b		Exempt foreign organizations—tax withheld at source . . . . .	6b		
c		Tax paid with application for extension of time to file (Form 8868) . . . . .	6c		
d		Backup withholding erroneously withheld . . . . .	6d		
7		Total credits and payments. Add lines 6a through 6d. . . . .		7	43,829
8		Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached		8	243
9		Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed . . . . .		9	
10		Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid. . . . .		10	12,313
11		Enter the amount of line 10 to be Credited to 2015 estimated tax  12,313 Refunded		11	0

Part VII-AStatements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	1a	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>	1b		No
c	Did the foundation file Form 1120-POL for this year? . . . . .	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation  \$ 0 (2) On foundation managers  \$ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers  \$ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities.</i>	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	4a	Yes	
b	If "Yes," has it filed a tax return on Form 990-T for this year? . . . . .	4b	Yes	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T.</i>	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV.</i> . . . . .	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)  MI			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation.</i> . . . . .	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . . .	9		No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i> . . . . .	10		No

Part VII-A

Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
Website address ▶ WWW 5HEALTHYTOWNS ORG				
14	The books are in care of ▶ ANN SINELLI Telephone no ▶ (734) 433-4599			
Located at ▶ 310 N MAIN STREET SUITE 203 CHelsea MI ZIP +4 ▶ 48118				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ▶ <input type="checkbox"/>			
and enter the amount of tax-exempt interest received or accrued during the year . . . . . ▶		15		
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No
See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country ▶				

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly)			
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days ). . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1b		No
Organizations relying on a current notice regarding disaster assistance check here. . . . . ▶ <input type="checkbox"/>				
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2014? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If "Yes," list the years ▶ 20____, 20____, 20____, 20____				
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions ). . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2b		
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? ( <i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2014.</i> ) . . . . . <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?	5b		
	Organizations relying on a current notice regarding disaster assistance check here.			
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?			
	If "Yes," attach the statement required by Regulations section 53.4945–5(d).			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No
	If "Yes" to 6b, file Form 8870.			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?			
	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MATT PEGOUSKIE	PROGRAM MANAGER	56,871	5,610	0
310 N MAIN STREET SUITE 203	40 00			
CHELSEA, MI 48118				
Total number of other employees paid over \$50,000.				0

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
SCHIFF HARDIN LLP	ATTORNEY FEES	429,685
350 S MAIN STREET SUITE 210 ANN ARBOR, MI 48104		
COMMONFUND	INVESTMENT FEES	52,529
15 OLD DANBURY ROAD WILTON, CT 06897		
Total number of others receiving over \$ 50,000 for professional services. . . . .		0

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 OVERSIGHT OF THE CHELSEA, DEXTER, MANCHESTER & STOCKBRIDGE WELLNESS CENTERS WHICH SERVE APPROXIMATELY 6,500 SERVICE AREA RESIDENTS. THE WELLNESS CENTERS ARE MEDICALLY INTEGRATED WELLNESS FACILITIES THAT INCLUDE ORTHOPEDIC AND PHYSICAL THERAPY SERVICES OPEN TO THE PUBLIC, THERAPY POOLS AND WORKOUT EQUIPMENT. THEY ALSO PROVIDE FREE CLASSES TO DEVELOPMENTALLY DISABLED ADULTS AND OTHER COMMUNITY MEMBERS PLUS FEE BASED CLASSES TO ANYONE IN THE COMMUNITY. HEALTH LECTURES ARE FREE FOR THE COMMUNITY. CHELSEA WELLNESS CENTER IS THE FIRST CERTIFIED MEDICAL INTEGRATION CENTER IN MI.	5,623,774
2 ESTABLISHED FIVE COMMUNITIES WELLNESS COALITIONS. OUR TECHNICAL SUPPORT INCLUDES IDENTIFYING LOCAL/STATE & NATIONAL RESOURCES, IDENTIFYING PREVENTION BEST PRACTICES, PLANNING & FUNDING ACTIVITIES & MEETINGS, ARCHIVING DOCUMENTS, DEVELOPING MARKETING & EDUCATIONAL MATERIAL, PUBLICITY, EDUCATING ON THE ROLE OF COALITIONS & PROJECT DEVELOPMENT, HOSTING WORKSHOPS, PROBLEM SOLVING AND GENERAL SUPPORT OF VOLUNTEERS (COALITION MEMBERS). FUNDS ARE AVAILABLE FOR COMPREHENSIVE WELLNESS PLANS IN EACH OF THE FIVE COMMUNITIES IN THE SERVICE AREA.	139,011
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b>	
<b>2</b>	
All other program-related investments See instructions	
<b>3</b>	
<b>Total.</b> Add lines 1 through 3 . . . . .	0



Part X

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities. . . . .	1a	28,073,602
b	Average of monthly cash balances. . . . .	1b	317,020
c	Fair market value of all other assets (see instructions). . . . .	1c	2,691,667
d	Total (add lines 1a, b, and c). . . . .	1d	31,082,289
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	0
3	Subtract line 2 from line 1d. . . . .	3	31,082,289
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	466,234
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	30,616,055
6	Minimum investment return. Enter 5% of line 5. . . . .	6	1,530,803

Part XI

Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6. . . . .	1	1,530,803
2a	Tax on investment income for 2014 from Part VI, line 5. . . . .	2a	31,273
b	Income tax for 2014 (This does not include the tax from Part VI ). . . . .	2b	3,495
c	Add lines 2a and 2b. . . . .	2c	34,768
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	1,496,035
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	29,207
5	Add lines 3 and 4. . . . .	5	1,525,242
6	Deduction from distributable amount (see instructions). . . . .	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	1,525,242

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	1a	1,918,297
b	Program-related investments—total from Part IX-B. . . . .	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	156,271
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	2,074,568
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4. . . . .	6	2,074,568
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years			

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				1,525,242
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only. . . . .			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2014				
a From 2009. . . . .				
b From 2010. . . . .				
c From 2011. . . . .				
d From 2012. . . . .				
e From 2013. . . . .	13,639,331			
f Total of lines 3a through e. . . . .	13,639,331			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ \$ 2,074,568				
a Applied to 2013, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
c Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
d Applied to 2014 distributable amount. . . . .				1,525,242
e Remaining amount distributed out of corpus	549,326			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	14,188,657			
b Prior years' undistributed income Subtract line 4b from line 2b. . . . .		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . .		0		
d Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
e Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
f Undistributed income for 2014 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015 . . . . .				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions). . . . .	0			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions). . . .	0			
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a . . . . .	14,188,657			
10 Analysis of line 9				
a Excess from 2010. . . .				
b Excess from 2011. . . .				
c Excess from 2012. . . .				
d Excess from 2013. . . .	13,639,331			
e Excess from 2014. . . .	549,326			

Part XIV

Private Operating Foundations (see instructions and Part VII-A, question 9)

1a

If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling. . . . .

b

Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

☐ 4942(j)(3) or ☐ 4942(j)(5)

2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .	Tax year	Prior 3 years			(e) Total
		(a) 2014	(b) 2013	(c) 2012	(d) 2011	
b	85% of line 2a . . . . .					
c	Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
d	Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c . . . . .					
3	Complete 3a, b, or c for the alternative test relied upon					
a	"Assets" alternative test—enter (1) Value of all assets . . . . . (2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
c	"Support" alternative test—enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . . (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . . (3) Largest amount of support from an exempt organization (4) Gross investment income					

Part XV

Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1

Information Regarding Foundation Managers:

a

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )

b

List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a

The name, address, and telephone number or e-mail address of the person to whom applications should be addressed  
AMY HEYDLAUFF  
310 N MAIN STREET SUITE 203  
CHELSEA, MI 48118  
(734) 433-4599

b

The form in which applications should be submitted and information and materials they should include  
ELECTRONIC SUBMISSION THROUGH THE "GRANTS" TAB ON WEBSITE ALL INFORMATION RELATED TO GRANT APPLICATION IS POSTED ON WEBSITE APPLICANTS WILL BE REQUIRED TO PROVIDE PROOF OF NON-PROFIT STATUS, RESPONSIBLE CONTACT, DEMONSTRATED NEED, PURPOSE, MISSION, BUDGET, METHOD OF MEASUREMENT, AND SUSTAINABILITY PLAN

c

Any submission deadlines  
APPROXIMATELY THE FIRST OF FEBRUARY, APRIL, JUNE, AUGUST, OCTOBER & DECEMBER

d

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors  
GRANTS ARE LIMITED TO NON-PROFITS IN THE ORGANIZATION'S SERVICE AREA, INCLUDING CHELSEA, DEXTER, GRASS LAKE, MANCHESTER, AND STOCKBRIDGE THE ORGANIZATION ONLY GRANTS TO NON-PROFITS RELATED TO THE ORGANIZATION'S VISION (EAT BETTER, MOVE MORE, AVOID UNHEALTHY SUBSTANCES, AND CONNECT WITH OTHERS IN HEALTHY WAYS)

Part XV

Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total . . . . .			3a	659,204
b Approved for future payment PROGRAMS TO EDUCATE ALL CYCLISTS 32 N WASHINGTON STE 1 YPSILANTI, MI 48197	NONE	PC	PEAC DEXTER BIKE SAFETY	4,000
CHELSEA COMMUNITY HOSPITAL 775 S MAIN STREET CHELSEA, MI 48118	NONE	PC	SJMHS RENTAL PAYMENTS	331,490
Total . . . . .			3b	335,490

Enter gross amounts unless otherwise indicated

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2014)

<b>1</b> Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			<b>Yes</b>	<b>No</b>
<b>a</b> Transfers from the reporting foundation to a noncharitable exempt organization of				
<b>(1)</b> Cash. . . . .		<b>1a(1)</b>		<b>No</b>
<b>(2)</b> Other assets. . . . .		<b>1a(2)</b>		<b>No</b>
<b>b</b> Other transactions				
<b>(1)</b> Sales of assets to a noncharitable exempt organization. . . . .		<b>1b(1)</b>		<b>No</b>
<b>(2)</b> Purchases of assets from a noncharitable exempt organization. . . . .		<b>1b(2)</b>		<b>No</b>
<b>(3)</b> Rental of facilities, equipment, or other assets. . . . .		<b>1b(3)</b>		<b>No</b>
<b>(4)</b> Reimbursement arrangements. . . . .		<b>1b(4)</b>		<b>No</b>
<b>(5)</b> Loans or loan guarantees. . . . .		<b>1b(5)</b>		<b>No</b>
<b>(6)</b> Performance of services or membership or fundraising solicitations. . . . .		<b>1b(6)</b>		<b>No</b>
<b>c</b> Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . .		<b>1c</b>		<b>No</b>
<b>d</b> If the answer to any of the above is "Yes," complete the following schedule. Column <b>(b)</b> should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column <b>(d)</b> the value of the goods, other assets, or services received				

[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . ☐ Yes ☒ No

b If "Yes," complete the following schedule		
(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.


<b>Sign Here</b>	*****	2015-08-13	*****	May the IRS discuss this return with the preparer shown below (see instr )? <input checked="" type="checkbox"/> <b>Yes</b> <input type="checkbox"/> <b>No</b>
	Signature of officer or trustee	Date	Title	

<b>Paid Preparer Use Only</b>	Print/Type preparer's name LYNNE HUISMANN	Preparer's Signature	Date	Check if self-employed <input checked="" type="checkbox"/>	PTIN P00053811
	Firm's name <input checked="" type="checkbox"/> PLANTE & MORAN PLLC			Firm's EIN <input checked="" type="checkbox"/> 38-1357951	
	Firm's address <input checked="" type="checkbox"/> 2601 CAMBRIDGE CT SUITE 500 AUBURN HILLS, MI 48326			Phone no (248) 375-7100	

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation


(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
AMY HEYDLAUFF	CHEIF EXECUTIVE OFFICER 40 00	115,877	16,820	0
310 N MAIN STREET SUITE 203 CHELSEA,MI 48118				
JUDY NOLD	BOARD MEMBER 3 00	0	0	0
310 N MAIN STREET SUITE 203 CHELSEA,MI 48118				
JEFF HARDCASTLE	PAST CHAIR 6 00	0	0	0
310 N MAIN STREET SUITE 203 CHELSEA,MI 48118				
ALISON POLLARD	BOARD MEMBER 4 00	0	0	0
310 N MAIN STREET SUITE 203 CHELSEA,MI 48118				
SCOTT BROSHAR	TREASURER 7 00	0	0	0
310 N MAIN STREET SUITE 203 CHELSEA,MI 48118				
LARRY COBLER	CHAIR 3 00	0	0	0
310 N MAIN STREET SUITE 203 CHELSEA,MI 48118				
RANDALL T FORSCH	BOARD MEMBER 5 00	0	0	0
310 N MAIN STREET SUITE 203 CHELSEA,MI 48118				
NANCY GRAEBNER	BOARD MEMBER 2 00	0	0	0
310 N MAIN STREET SUITE 203 CHELSEA,MI 48118				
SUSAN KHEDER	BOARD MEMBER 3 00	0	0	0
310 N MAIN STREET SUITE 203 CHELSEA,MI 48118				
KARI NEWMAN	BOARD MEMBER 4 00	0	0	0
310 N MAIN STREET SUITE 203 CHELSEA,MI 48118				
KEVIN DOMBKOWSKI	SECRETARY 4 00	0	0	0
310 N MAIN STREET SUITE 203 CHELSEA,MI 48118				
ANNE KITTENDORF	BOARD MEMBER 4 00	0	0	0
310 N MAIN STREET SUITE 203 CHELSEA,MI 48118				
TOM MANN	BOARD MEMBER 7 00	0	0	0
310 N MAIN STREET SUITE 203 CHELSEA,MI 48118				
ROBERT STEPHENS	BOARD MEMBER 3 00	0	0	0
310 N MAIN STREET SUITE 203 CHELSEA,MI 48118				
JEFF WALLACE	BOARD MEMBER 4 00	0	0	0
310 N MAIN STREET SUITE 203 CHELSEA,MI 48118				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment


Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
CHELSEA SCHOOL DISTRICT 500 WASHINGTON STREET CHELSEA, MI 48118	NONE	PC	BULLDOG FIT	2,398
CHELSEA SCHOOL DISTRICT 500 WASHINGTON STREET CHELSEA, MI 48118	NONE	PC	MONITOR BASEBALL	250
CHELSEA WELLNESS CENTER 14800 E OLD US 12 CHELSEA, MI 48118	NONE	PC	NEED BASED SCHOLARSHIPS	10,000
ARTRAIN INC 1100 N MAIN STREET STE 106 ANN ARBOR, MI 48104	NONE	PC	MR B'S JOYBOX EXPRESS	500
CHELSEA COMMUNITY HOSPITAL 775 S MAIN STREET CHELSEA, MI 48118	NONE	PC	HEART & SOLE YEAR 3	5,714
CHELSEA COMMUNITY HOSPITAL 775 S MAIN STREET CHELSEA, MI 48118	NONE	PC	FARMERS MARKET HEALTH INITIATIVE	24,083
CHELSEA COMMUNITY HOSPITAL 775 S MAIN STREET CHELSEA, MI 48118	NONE	PC	HEART & SOLE 3	187
CHELSEA COMMUNITY HOSPITAL 775 S MAIN STREET CHELSEA, MI 48118	NONE	PC	WALKING PROGRAM	2,529
CHELSEA COMMUNITY HOSPITAL 775 S MAIN STREET CHELSEA, MI 48118	NONE	PC	SRSLY	16,383
CHELSEA SCHOOL DISTRICT 500 WASHINGTON STREET CHELSEA, MI 48118	NONE	PC	WILD ABOUT SUMMER - CAMP GABIKA	10,914
CHELSEA SCHOOL DISTRICT 500 WASHINGTON STREET CHELSEA, MI 48118	NONE	PC	WILD ABOUT SUMMER - CAMP GABIKA	1,213
MONITOR BASEBALL CLUB OF CHELSEA 130 S EAST CHELSEA, MI 48118	NONE	PC	SHADE AND SEATING	500
RUN FOR THE ROLLS 2013-14 6045 QUEEN OAKS DRIVE CHELSEA, MI 48118	NONE	PC	RUN FOR THE ROLLS YR 3	1,301
CHELSEA DISTRICT LIBRARY 221 SOUTH MAIN CHELSEA, MI 48118	NONE	PC	2014 CHELSEA COMMUNITY READ	5,782
BALLET CHELSEA-YDT PO BOX 591 CHELSEA, MI 48118	NONE	PC	ON THE MOVE	8,191
<b>Total . . . . .</b>  <b>3a</b>				659,204




Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
ST LOUIS CENTER 16195 OLD US 12 CHELSEA,MI 48118	NONE	PC	20TH ANNUAL GOLF & GLORY	500
CHELSEA COMMUNITY KITCHEN 305 S MAIN ST STE 100 CHELSEA,MI 48118	NONE	PC	FOOD EDUCATION SERIES	5,703
VILLAGE OF DEXTER 8140 MAIN STREET DEXTER,MI 48130	NONE	PC	WELLNESS WALKS	999
DEXTER COOPERATIVE NURSERY SCHOOL 7643 WHURON RIVER DRIVE DEXTER,MI 48130	NONE	PC	BALANCE BIKES	500
DEXTER COMMUNITY SCHOOLS 7714 ANN ARBOR STREET DEXTER,MI 48130	NONE	PC	BIKE RACKS	1,800
DEXTER COMMUNITY SCHOOLS 7714 ANN ARBOR STREET DEXTER,MI 48130	NONE	PC	KIDS HEALTHY COOKING CLASSES	3,000
LEGACY LAND CONSERVANCY 1100 N MAIN STREET ANN ARBOR,MI 48104	NONE	PC	DEXTER FAMILY REC BROCHURES	500
DEXTER DISTRICT LIBRARY 3255 ALPINE STREET DEXTER,MI 48130	NONE	PC	5H COMMUNITY READ	4,000
JACKSON DISTRICT LIBRARY - GL BRANCH PO BOX 335 GRASS LAKE,MI 49240	NONE	PC	COOKING CLASSES	4,000
JACKSON DISTRICT LIBRARY - GL BRANCH PO BOX 335 GRASS LAKE,MI 49240	NONE	PC	5H READ	3,500
GRASS LAKE COMMUNITY SCHOOLS 899 S UNION STREET GRASS LAKE,MI 49240	NONE	PC	TENNIS	500
VILLAGE OF GRASS LAKE 119 NORTH LAKE GRASS LAKE,MI 49240	NONE	PC	RED BARREL	2,915
LEGACY LAND CONSERVANCY 1100 N MAIN STREET STRE ANN ARBOR,MI 48104	NONE	PC	GRASS LAKE FAMILY REC BROCHURE	500
CHELSEA SENIOR CENTER 512 E WASHINGTON STREET CHELSEA,MI 48118	NONE	PC	GL SENIOR CENTER ACTIVITIES	5,000
MANCHESTER SENIOR CITIZENS COUNCIL 921 CITY STREET PO BOX 31 MANCHESTER,MI 48158	NONE	PC	SENIOR HEALTHY LUNCHES	500
<b>Total . . . . .</b>  <b>3a</b>				659,204

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
MANCHESTER COMMUNITY SCHOOLS FOUND PO BOX 755 MANCHESTER, MI 48158	NONE	PC	AFTER PROM	500
MANCHESTER COMMUNITY FAIR PO BOX 63 MANCHESTER, MI 48158	NONE	PC	SENIOR CITIZENS ACTIVITIES	500
MANCHESTER COMMUNITY SCHOOLS 710 E MAIN STREET MANCHESTER, MI 48158	NONE	PC	YOUTH FOOTBALL	10,000
MANCHESTER COMMUNITY SCHOOLS 710 E MAIN STREET MANCHESTER, MI 48158	NONE	PC	MANCHESTER VOICES	18,500
MANCHESTER COMMUNITY SCHOOLS 710 E MAIN STREET MANCHESTER, MI 48158	NONE	PC	FUEL UP TO PLAY 60	2,000
MANCHESTER COMMUNITY SCHOOLS 710 E MAIN STREET MANCHESTER, MI 48158	NONE	PC	SUMMER SWIM	5,000
VILLAGE OF MANCHESTER 912 CITY RD MANCHESTER, MI 48158	NONE	PC	MANCHESTER FARMERS MARKET	8,000
MANCHESTER COMMUNITY RESOURCE CENTER 410 CITY RD CHELSEA, MI 48118	NONE	PC	STREET FAIR	5,000
MANCHESTER COMMUNITY RESOURCE CENTER 410 CITY RD CHELSEA, MI 48118	NONE	PC	COMPOSTING	1,200
MANCHESTER COMMUNITY SCHOOLS 710 E MAIN STREET MANCHESTER, MI 48158	NONE	PC	PROJECT TNT	530
MANCHESTER COMMUNITY SCHOOLS 710 E MAIN STREET MANCHESTER, MI 48158	NONE	PC	PROJECT SUCCESS	5,000
MANCHESTER COMMUNITY SCHOOLS 710 E MAIN STREET MANCHESTER, MI 48158	NONE	PC	SR2S	10,000
LEGACY LAND CONSERVANCY 1100 N MAIN STREET ANN ARBOR, MI 48104	NONE	PC	MANCHESTER FAMILY REC BROCHURE	500
STOCKBRIDGE COMMUNITY SCHOOLS 305 W ELIZABETH STREET STOCKBRIDGE, MI 49285	NONE	PC	COUNSELILNG SUPPORT	21,000
STOCKBRIDGE COMMUNITY SCHOOLS 305 W ELIZABETH STREET STOCKBRIDGE, MI 49285	NONE	PC	SOCCER GOALS	500
<b>Total . . . . .</b>  <b>3a</b>				659,204

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
STOCKBRIDGE COMMUNITY SCHOOLS 305 WELIZABETH STREET STOCKBRIDGE, MI 49285	NONE	PC	OPEN AIR MARKET	5,961
STOCKBRIDGE COMMUNITY SCHOOLS 305 WELIZABETH STREET STOCKBRIDGE, MI 49285	NONE	PC	BASEBALL FIELD	10,700
STOCKBRIDGE COMMUNITY SCHOOLS 305 WELIZABETH STREET STOCKBRIDGE, MI 49285	NONE	PC	COMMUNITY GREENHOUSE	15,000
STOCKBRIDGE COMMUNITY SCHOOLS 305 WELIZABETH STREET STOCKBRIDGE, MI 49285	NONE	PC	COMMUNITY PATHWAY	2,685
STOCKBRIDGE COMMUNITY SCHOOLS 305 WELIZABETH STREET STOCKBRIDGE, MI 49285	NONE	PC	HEALTHY SNACKS	500
STOCKBRIDGE HIGH SCHOOL 416 N CLINTON STOCKBRIDGE, MI 49285	NONE	PC	5K TRAINING	500
FRIENDS OF THE STOCKBRIDGE LIBRARY PO BOX 802 STOCKBRIDGE, MI 49285	NONE	PC	5H COMMUNITY READ	4,225
CHELSEA COMMUNITY HOSPITAL 775 S MAIN STREET CHELSEA, MI 48118	NONE	PC	SRSLY STOCKBRIDGE	24,268
LEGACY LAND CONSERVANCY 1100 N MAIN STREET ANN ARBOR, MI 48104	NONE	PC	STOCKBRIDGE FAMILY REC BROCHURE	500
WASHTENAW PUBLIC HEALTH 555 TOWNER ST PO BOX 0915 YPSILANTI, MI 48197	NONE	PC	DISCRETIONARY FUNDING AND BRSFF	36,785
CHELSEA COMMUNITY HOSPITAL 775 S MAIN STREET CHELSEA, MI 48118	NONE	PC	SJMHS RENTAL PAYMENTS	337,148
GRASS LAKE CHARTER TOWNSHIP 373 LAKESIDE DRIVE GRASS LAKE, MI 49240	NONE	PC	FARMERS MARKET HEALTH INITIATIVE	4,840
GRASS LAKE COMMUNITY SCHOOLS 899 S UNION STREET GRASS LAKE, MI 49240	NONE	PC	FIT FAMILIES PROGRAM	1,000
JACKSON DISTRICT LIBRARY - GL BRANCH PO BOX 335 GRASS LAKE, MI 49240	NONE	PC	2014 COMMUNITY READ	3,000
<b>Total . . . . .</b>  <b>3a</b>				659,204

## TY 2014 Accounting Fees Schedule

**Name:** THE CHELSEA HEALTH AND WELLNESS FOUNDATION

**EIN:** 26-3040367

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	44,951	0	0	44,951

**TY 2014 Investments - Other Schedule****Name:** THE CHELSEA HEALTH AND WELLNESS FOUNDATION**EIN:** 26-3040367

Category / Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
STRATEGIC SOLUTIONS GLOBAL EQUITY, LLC	FMV	0	0
CFI HIGH QUALITY BOND FUND	FMV	0	0
SSGA TUCKERMAN US REIT INDEX NL QP	FMV	0	0
CFI MULTI-STRATEGY COMMODITIES SERIES	FMV	0	0
SSGA S&P GLOBAL LARGE MID CAP NATURAL RESERVE	FMV	0	0
CFI REAL RETURN BOND FUND	FMV	0	0
SSG GLOBAL HEDGED EQUITY	FMV	0	0
SSG DIVERSIFYING COMPANY	FMV	0	0
SSG RELATIVE VALUE & EVENT DRIVEN SERIES	FMV	4,833,568	4,833,568
RUSSELL INSTL FDS MULTI ASSET CORE PLUS FD	FMV	19,225,457	19,225,457
RUSSELL INSTL FDS LLC CORE BD FD	FMV	3,893,640	3,893,640

**TY 2014 Land, Etc. Schedule****Name:** THE CHELSEA HEALTH AND WELLNESS FOUNDATION**EIN:** 26-3040367

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
LAND	3,101,000	0	3,101,000	3,101,000
BUILDINGS	21,039,367	2,714,489	18,324,878	18,324,878
BUILDING IMPROVEMENTS	510,521	115,785	394,736	394,736
MOVABLE EQUIPMENT	1,053,766	460,206	593,560	593,560
IT EQUIPMENT	368,865	219,874	148,991	148,991
IT SOFTWARE	37,216	32,413	4,803	4,803
FURNITURE AND FIXTURES	474,719	204,420	270,299	270,299

**TY 2014 Legal Fees Schedule**

**Name:** THE CHELSEA HEALTH AND WELLNESS FOUNDATION

**EIN:** 26-3040367

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	358,365	0	900	357,465

**TY 2014 Other Decreases Schedule****Name:** THE CHELSEA HEALTH AND WELLNESS FOUNDATION**EIN:** 26-3040367

Description	Amount
GAIN FROM K-1 CFI HIGH QUALITY BOND FUND	69,975
GAIN FROM K-1 CF STRATEGIC SOLUTIONS GLOBAL EQUITY LLC	229,227



## TY 2014 Other Expenses Schedule

**Name:** THE CHELSEA HEALTH AND WELLNESS FOUNDATION

**EIN:** 26-3040367

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADVERTISING	207,256	0	192,447	14,809
TELEPHONE	33,946	0	30,218	3,728
INSURANCE	55,061	0	0	55,495
POSTAGE AND SHIPPING	16,346	0	16,114	281
UTILITIES	441,828	2,568	377,471	23,113
SUBSCRIPTIONS AND PUBLICATIONS	32,149	0	638	31,263
LICENSES	47,060	0	47,060	0
COUPONS	6,996	0	6,996	0
EQUIPMENT LEASING	29,616	0	29,616	0
BAD DEBT	16,469	0	16,469	0
REPAIRS & MAINTENANCE	91,113	0	76,127	0
MISCELLANEOUS	115,100	0	159,711	4,842
SUPPLIES	187,483	0	184,638	2,081
INVESTMENT FEES	52,529	52,529	0	0
EXCESS OPERATING EXP OVER REVENUE - CASH BASIS	0	0	0	324,484
COALITION PROJECT EXPENSE	48,455	0	0	48,445
RENTAL EXPENSE - SUPPLIES	852	852		0
RENTAL EXPENSE - REPAIRS & MAINTENANCE	14,986	14,986		0
RENTAL EXPENSE - UTILITIES	41,244	41,244		0

**TY 2014 Other Income Schedule****Name:** THE CHELSEA HEALTH AND WELLNESS FOUNDATION**EIN:** 26-3040367

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
K-1 DIV/INT HIGH QUALITY BOND FUND	77,623	77,623	
K-1 DIV/INT CF STRATEGIC SOLUTIONS GLOBAL EQUITY FUND	333,890	333,890	
MEMBERSHIP FEES	4,383,944		4,383,944
MISCELLANEOUS INCOME	28,035		28,035
K-1 OTHER INCOME HIGH QUALITY BOND FUND	-7,648	-7,648	0
K-1 OTHER INCOME CF STRATEGIC SOLUTIONS FLOBAL EQUITY LLC	-104,845	-129,144	0
MISCELLANEOUS INCOME	2,500	2,500	0

TY 2014 Other Increases Schedule

**Name:** THE CHELSEA HEALTH AND WELLNESS FOUNDATION

**EIN:** 26-3040367

Description	Amount
UNREALIZED GAIN ON SECURITIES	726,326

**TY 2014 Other Liabilities Schedule****Name:** THE CHELSEA HEALTH AND WELLNESS FOUNDATION**EIN:** 26-3040367

Description	Beginning of Year - Book Value	End of Year - Book Value
ACCRUED WAGES	25,577	25,171
OTHER ACCRUED LIABILITIES	254,603	170,619

**TY 2014 Other Professional Fees Schedule****Name:** THE CHELSEA HEALTH AND WELLNESS FOUNDATION**EIN:** 26-3040367

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MANAGEMENT FEES	164,837	0	164,837	0
OUTSIDE CONTRACT SERVICES	123,069	0	107,173	16,344

# TY 2014 Taxes Schedule

**Name:** THE CHELSEA HEALTH AND WELLNESS FOUNDATION

**EIN:** 26-3040367

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAXES	48,700	0	0	0