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DLN: 93491183008276

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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

▶ Do not enter social security numbers on this form as it may be made public. ▶ Information about Form 990-PF and its instructions is at $\underline{www.irs.gov/form990pf}$.

For	caler	ndar year 2015, or tax y	ear beginning 01-0	01-2015	, an	d ending 1	2-31-2015	
	e of four					A Employer id	entification numb	er
ВО	ILDING F	HEALTHY LIVES FOUNDATION				30-0214078		
Num	ber and	street (or P O box number if mail is no	ot delivered to street address)) Room/suite		B Telephone nur	nber (see instructior	s)
62	5 EDEN F	PARK DRIVE SUITE 200				(513) 419-6587		
City	or town,	state or province, country, and ZIP or	foreign postal code			C If exemption	application is pendir	g, check here 🕨 🦳
CINC	CINNATI,	OH 45202						
G CI	neck all	that apply Initial return	Initial return of a f	ormer public charity		D 1. Foreign or	ganizations, check h	ere 🕨 🗀
		∏Fınal return ∏Address chango	Amended return Name change			2. Foreign or	ganizations meeting	the 85%
H Ch	neck tvi	pe of organization	· -	e foundation	—i		k here and attach co Indation status was	terminated
		947(a)(1) nonexempt charitab	le trust 「Other taxabl	e private foundation		under section	n 507(b)(1)(A), che	ck here
		t value of all assets at end on Part II, col. (c),	JAccounting method Other (specify)	Cash ✓ Accrual			ation is in a 60-mont n 507(b)(1)(B), chec	
		\$ 43,186,033	(Part I, column (d) must	be on cash basıs.)		411401 0001101		,
Pa	rt I	Analysis of Revenue a		Revenue and	<u> </u>			Disbursements
		(The total of amounts in columns (to necessarily equal the amounts in co		expenses per (a) books	(b) N	et investment income	Adjusted net (c) income	for charitable purposes
		<i>instructions))</i> Contributions, gifts, grants, et	re received (attach	(4) 20000				(d) (cash basis only)
	1	schedule)		18,924				
	2	Check F [If the foundation is	s not required to attach	10,324				
		Sch B	· · · · · · · · · · · · · · · · · · · ·					
	3	Interest on savings and tempo	orary cash investments					
	4	Dividends and interest from se	ecurities	845,867		845,867		
	5a	Gross rents						
	ь	Net rental income or (loss)						
₽	6a	Net gain or (loss) from sale of	assets not on line 10	3,055,632				
Revenue	Ь	Gross sales price for all asset 14,184,703	s on line 6a					
	7	Capital gain net income (from	Part IV, line 2)			3,056,159		
	8	Net short-term capital gain .						
	9	Income modifications						
	10a	Gross sales less returns and						
	Ь	allowances Less Cost of goods sold						<u> </u>
	c	Gross profit or (loss) (attach s	schedule)					
	11	Other income (attach schedul	e)	2,332		0		
	12	Total.Add lines 1 through 11		3,922,755		3,902,026		
	13	Compensation of officers, dire	ctors, trustees, etc	386,250		0		190,363
	14	Other employee salaries and v		250,106		0		250,106
φŞ	15	Pension plans, employee bene		104,400		0		76,681
Expenses	16a	Legal fees (attach schedule).						
Š	b	Accounting fees (attach sche		10.000				
	C	Other professional fees (attac		10,800		0		0
rati	17 18	Interest		% 38,326		0		0
¥	19	Taxes (attach schedule) (see Depreciation (attach schedule	•			0		
Administrative	20	Occupancy		23,302				
Ā	21	Travel, conferences, and meet		4,217		0		2,743
and	22	Printing and publications	-					
	23	Other expenses (attach sched	dule)	2,235,785		69,423		2,050,073
Operating	24	Total operating and administra	ative expenses.					
<u>ā</u>		Add lines 13 through 23		3,047,886		69,423		2,569,966
0	25	Contributions, gifts, grants pa	ıd	263,704				263,704
	26	Total expenses and disbursem 25	ents.Add lines 24 and	3,311,590		69,423		2,833,670
	27	Subtract line 26 from line 12		3,311,390		09,423		2,633,670
	a	Excess of revenue over expens	ses and disbursements	611,165				
	ь	Net investment income (If neg	atıve, enter -0-)			3,832,603		
	С	Adjusted net income(if negation	ve, enter - 0 -)					

Pa	rt 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	·
		should be for end-or-year amounts only (see instructions)	(a) Book Value 24,443	(b) Book Value 94,738	(c) Fair Market Value 94,738
	1	Cash—non-interest-bearing	24,443	94,738	94,738
	2	Savings and temporary cash investments			
	3	Accounts receivable 36,258	47.727	26 250	26.250
		Less allowance for doubtful accounts -	47,727	36,258	36,258
	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 🟲			
اع	8	Inventories for sale or use	950	610	610
Assets	9	Prepaid expenses and deferred charges	33,607	36,494	36,494
As	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)		38,485,871	42,710,603
	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)			
	14	Land, buildings, and equipment basis 🕨 331,360			
		Less accumulated depreciation (attach schedule) ▶ 278,242	39,433	% 53,118	53,118
	15	O ther assets (describe 🟲)	251,401	254,212	254,212
	16	Total assets(to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	38,354,018	38,961,301	43,186,033
	17	Accounts payable and accrued expenses	42,043	42,843	
	18	Grants payable	26,667	16,334	
abilities	19	Deferred revenue			
탈	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
-	22	O ther liabilities (describe 🟲)	267,100	272,751	
	23	Total liabilities(add lines 17 through 22)	335,810	331,928	
		Foundations that follow SFAS 117, check here 🕨 🔽			
á		and complete lines 24 through 26 and lines 30 and 31.			
ä	24	Unrestricted	37,808,503	38,597,582	
Balance	25	Temporarily restricted	209,705	31,791	
필	26	Permanently restricted			
Fund		Foundations that do not follow SFAS 117, check here 🕨 🦵			
5		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
Assets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
Net	30	Total net assets or fund balances(see instructions)	38,018,208	38,629,373	
	31	Total liabilities and net assets/fund balances(see instructions)	38,354,018	38,961,301	
Pa	rt 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 ac	gree	
		with end-of-year figure reported on prior year's return)	, ,,	- I I	38,018,208
2		Enter amount from Part I, line 27a		<u> </u>	611,165
3		Other increases not included in line 2 (itemize)		3	0
4		Add lines 1, 2, and 3		— 	38,629,373
5		Decreases not included in line 2 (itemize)		5	0
6		Total net assets or fund balances at end of year (line 4 minus line 5)—			38.629.373

the Part VI instructions

ta See Additional Data Table c			the kınd(s) of property sold (e g , house, or common stock, 200 sh	•	How acquired P—Purchase (b) D—Donation		Date acquired (mo , day, yr)	Date sold (d) (mo , day, yr)
c d d	1a	See Addıtıonal Data T	able					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Coli (h) (b) but not less than -0-) or (0)	ь							
e (e) Gross sales pnce (f) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) a See Additional Data Table b c d d e Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 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) as of 12/31/69 (k) over col (j), if any a See Additional Data Table b b c d d e 2 Capital gain net income or (net capital loss) [If gain, also enter in Part I, line 7] 3 Net short-term capital gain or (loss) as defined in sections 12/22(s) and (b) If gain, also enter in Part I, line 7 (floss), enter -0 in Part I, line 8 (solumn (c) (see instructions) If (loss), enter -0 in Part I, line 8 (For optional use by domestic private foundations subject to the section 4940(a) 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 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 (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment Income (For optional use by domestic private foundation	С С							
(e) Gross sales price (ror allowed (ror allowed) (g) plus expense of sale (h) (e) plus (f) minus (g) a See Additional Data Table b C Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/59 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/59 (ii) FMV as of 12/31/69 (g) as of 12/31/69 (k) overcol (j), if any (iii) as of 12/31/69 (g) as of 12/31/69 (k) overcol (j), if any (iii) as See Additional Data Table b C C C C C C C C C C C C C C C C C C	d							
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b c d d Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Cains (Col. (h) gain minus (i) F M V as of 12/31/69 Adjusted basis Excess of Col. (i) (ii) F M V as of 12/31/69 (iii) as of 12/31/69 (iii) over col. (j), if any (iii) Losses (from col. (h) over col. (h), if any (iii) Losses (from col. (h) over col. (h), if any (i	(€	e) Gross sales price						
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 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 Adjusted basis Excess of col (i) (j) flany (ii) E M V as of 12/31/69 Col (k), but not less than -0-) or (loss) as for 12/31/69 (iii) as of 12/31/69 (iii) as of 12/31/69 Col (k), but not less than -0-) or (loss) as for 12/31/69 (iii) as of 12/31/69 Col (k), but not less than -0-) or (loss) as for 12/31/69 (iii) as of 12/31/69 (iii) as of 12/31/69 Col (k), but not less than -0-) or (loss) as for 12/31/69 (iii) as of 12/31/69 Col (k), but not less than -0-) or (loss) as for 12/31/69 (iii) as of 12/31/69 Col (k), but not less than -0-) or (loss) as for 12/31/69 (iii) as of 12/31/69	а	See Addıtıonal Data T	able					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 Cains (Col (h) gain minus (Ol) FM V as of 12/31/69 Adjusted basis (J) as of 12/31/69 (k) over col (J), if any (I) Col (k), but not less than -0-) or (I) cosses (from col (h)) or (II) cosses (from col (h)) or (III) cosses (from col (h)) or (I	b							
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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 Adjusted basis Excess of col (i) (i) Nover col (j), if any See Additional Data Table C d e 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 If (loss), enter -0 - in Part I, line 7 If (loss), enter -0 - in Part I, line 7 If gain, also enter in Part I, line 8 If gain, also enter in Part I, line 8 If gain, also enter in Part I, line 8 In Part I, line 7 If It line 7 In Part I, line 8 In Part	d							
(i) F M V as of 12/31/69 (j) as of 12/31/69 (k) overcol (j), if any a See Additional Data Table b c d d e 2 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 in Part I, line 8 If gain, also enter in Part I, line 7 If gain, also enter in Part I, line 8 If gain, also enter in Part I, line 8 If gain, also enter in Part I, line 7 If gloss), enter -0- in	е							
(i) FM V as of 12/31/69 (j) as of 12/31/69 (k) over col (j), if any (l) Losses (from col (h)) a See Additional Data Table	Со	mplete only for assets s	howing gain in column (h) and owi	ned by the foundation	on on 12/31/69		Gains (Col	(h) gaın mınus
b c d d	(i)	F M V as of 12/31/69				(I)		
c d d e	a	See Additional Data T	able					
d e 2 Capital gain net income or (net capital loss)	b							
2 Capital gain net income or (net capital loss) 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 7 If (loss), enter -0 - in Part I, line 7 If gain, also enter in Part I, line 8 If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0 - in Part I, line 8 If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0 - in Part I, line 8 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 (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net investment income (For optional use by domestic private foundation 4940(a) tax on net								
2 Capital gain net income or (net capital loss) 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	d							
Adjusted qualifying distributions (a) Base period years Calendar year (or tax year beginning in) 2	<u>е</u>							
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) Adjusted qualifying distributions Net value of noncharitable-use assets (col. (b) divided by col. (c)) 2014 2,807,362 46,966,402 0,059,774 2013 2,863,455 45,227,272 0,063,313 2012 2,612,707 42,007,483 0,062196 2011 2,576,889 42,868,934 0,060111 2010 2,212,220 40,120,935 0,055139 2 Totalof line 1, column (d)		Net short-term capita If gain, also enter in P	ل l gaın or (loss) as defined ın secti	If (loss), enter -0 ons 1222(5) and (6	- In Part I, line 7			3,056,159
## Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ### I Enter the appropriate amount in each column for each year, see instructions before making any entries 1 Enter the appropriate amount in each column for each year, see instructions before making any entries (a)	Part	V Qualification U	nder Section 4940(e) for	Reduced Tax o	n Net Investme		ı	
Tenter the appropriate amount in each column for each year, see instructions before making any entries Ca				section 4940(a) ta:	x on net investment	inco	me)	
(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)) 2014 2,807,362 46,966,402 0.059774 2013 2,863,455 45,227,272 0.063313 2012 2,612,707 42,007,483 0.062196 2011 2,576,889 42,868,934 0.060111 2010 2,212,220 40,120,935 0.055139 2 Totalof line 1, column (d). 2.212,220 40,120,935 0.0300533 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 0.060107 4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5. 4 44,855,715 5 Multiply line 4 by line 3. 5 2,696,142 6 Enter 1% of net investment income (1% of Part I, line 27b). 6 38,326 7 Add lines 5 and 6. 7 2,734,468						eriod	?	Γ Yes Γ No
Distribution ratio	1 E n	ter the appropriate amou	ınt ın each column for each year,	see instructions be	fore makıng any en	tries		
2013 2,863,455 45,227,272 0 063313 2012 2,612,707 42,007,483 0 062196 2011 2,576,889 42,868,934 0 060111 2010 2,212,220 40,120,935 0 055139 2 Totalof line 1, column (d). 2 0 300533 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 060107 4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5. 4 44,855,715 5 Multiply line 4 by line 3. 5 2,696,142 6 Enter 1% of net investment income (1% of Part I, line 27b). 6 38,326 7 Add lines 5 and 6. 7 2,734,468		period years Calendar		(c Net value of nonch	arıtable-use assets		Distributio	n ratio
2012 2,612,707 42,007,483 0 062196 2011 2,576,889 42,868,934 0 060111 2010 2,212,220 40,120,935 0 055139 2 Totalof line 1, column (d). 2 0 300533 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 060107 4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5. 4 44,855,715 5 Multiply line 4 by line 3. 5 2,696,142 6 Enter 1% of net investment income (1% of Part I, line 27b). 6 38,326 7 Add lines 5 and 6. 7 2,734,468			2,807,362		46,966,402		·	
2011 2,576,889 42,868,934 0 060111 2010 2,212,220 40,120,935 0 055139 2 Totalof line 1, column (d). 2 0 300533 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 060107 4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5. 4 44,855,715 5 Multiply line 4 by line 3. 5 2,696,142 6 Enter 1% of net investment income (1% of Part I, line 27b). 6 38,326 7 Add lines 5 and 6. 7 2,734,468		2013			45,227,272			0 063313
2010 2,212,220 40,120,935 0 055139 2 Totalof line 1, column (d)								
Total of line 1, column (d)								
A verage 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 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5				•	40,120,935	_		
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5 4 44,855,715 5 Multiply line 4 by line 3		A verage distribution r	ratio for the 5-year base period—c	livide the total on li				
5 Multiply line 4 by line 3. 5 2,696,142 6 Enter 1% of net investment income (1% of Part I, line 27b). 6 38,326 7 Add lines 5 and 6. 7 2,734,468	Λ	·		•				
6 Enter 1% of net investment income (1% of Part I, line 27b)				•	-			
7 Add lines 5 and 6								
	-			•	: : : · · ·			-
	8					8		2,833,670

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

ĽŒΙ	Excise Tax based on Investment Income (Section 4940(a), 4940(b), 49		, UI 4340—SC	e page	= 10 OL	the ins	LIUCLIO	'IIS)	
1a)					
	and enter "N/A" on line 1 Date of ruling or determination letter			l					
	(attach copy of letter if necessary—see instructions)			(
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			J	1			38	3,326
	here 🟲 🔽 and enter 1% of Part I, line 27b			•					
С	All other domestic foundations enter 2% of line 27b Exempt foreign organiza Part I, line 12, col (b)	ations 6	enter 4% of						
Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)									0
3	Add lines 1 and 2				3			31	3,326
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others									
enter -0-) Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0									0
5 6	Credits/Payments	iitei -o	'	•	5			3 (3,326
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	3	0,892					
b	Exempt foreign organizations—tax withheld at source	6b		0,032					
c	Tax paid with application for extension of time to file (Form 8868)	6c	1	7,100					
d	Backup withholding erroneously withheld	6d		,,100					
7	Total credits and payments Add lines 6a through 6d				7			4	7,992
8	Enter any penalty for underpayment of estimated tax. Check here T if Form 2				8				,
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 amoun	t over	paid	•	10				9,666
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	9,666	Refunded	•	11				0
Par	t VII-A Statements Regarding Activities								
1a	During the tax year, did the foundation attempt to influence any national, state	or loc	al legislatio	n or di	d			Yes	No
	ıt participate or intervene in any political campaign?						1a		No
b	Did it spend more than \$100 during the year (either directly or indirectly) for p	oolitica	l purposes (see In	structi	ons			
	for definition)?					•	1b		No
	If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities	and co	pies of any n	nateria	ls				
	published or distributed by the foundation in connection with the activities.								
	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) impos								
_	(1) On the foundation \$\(\begin{array}{c} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	. –		0	acad				
е	Enter the reimbursement (if any) paid by the foundation during the year for polion foundation managers \$0	iticare	xpenditure t	ax IIIIL	osea				
2	Has the foundation engaged in any activities that have not previously been rep	norted	to the IRS?				2		No
_	If "Yes," attach a detailed description of the activities.	Jorcea	to the INS	• •	• •				110
3	Has the foundation made any changes, not previously reported to the IRS, in it	ts aove	ernina instru	ment.	articles	5			
_	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a confi	=	_	-			3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more d						4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?						4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction du	ring the	e year?				5		No
	If "Yes," attach the statement required by General Instruction T.								
6	Are the requirements of section 508(e) (relating to sections 4941 through 49	45) sa	tisfied eithe	r					
	By language in the governing instrument, or								
	By state legislation that effectively amends the governing instrument so th								
_	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? and Part XV.	?If "Yes	s," complete	Part II	, col. (c),	7	Yes	
82	Enter the states to which the foundation reports or with which it is registered (:	See inc	tructions)					. 63	
Ju	► OH	JCC IIIS	, a decions)						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 99	90-PF	to the Attori	ney					
	General (or designate) of each state as required by General Instruction G? If						8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the r	meanın	g of section	4942	(3)(3)				
	or 4942(J)(5) for calendar year 2015 or the taxable year beginning in 2015 (s	ee inst	ructions for	Part X	(IV)?				
	If "Yes," complete Part XIV						9	igsquare	No
10	Did any persons become substantial contributors during the tax year? If "Yes,	" attach	a schedule	listing	their n	ames			
	and addresses.						10	1	No

Par	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 CLEVERCRAZES COM			
14	The books are in care of ▶DIANNE DUNKELMAN Telephone no ▶(513)419	-6587	
	Located at ▶625 EDEN PARK DRIVE SUITE 200 CINCINNATI OH ZIP+4 ▶45202			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		▶ □	-
	and enter the amount of tax-exempt interest received or accrued during the year		- ,	
			1	
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over	ء ا	Yes	No
	a bank, securities, or other financial account in a foreign country?	16		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			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			т
	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? Yes V No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes V No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V 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)?			
	(6) A gree to pay money or property to a government official? (Exception. 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)			
ь	If any answer is "Yes" to 1a(1)–(6), did any 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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
Ī	that were not corrected before the first day of the tax year beginning in 2015?	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))			
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d			
	and 6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years 🕨 20			
b	Are there any years listed in 2a for which the foundation is not 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 all years listed, answer "No" and attach statement—see instructions)	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20, 20, 20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation			
	or disqualified persons after 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? (Use Schedule C, Form 4720, to determine			
	if the foundation had excess business holdings in 2015.)	3b	1	
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 2015?	4b	1	No

Forn	n 990-PF (2015)									Page 6
Pa	rt VIII-B Statements Rega	rdi	ng Activities for	Wh	ich Form 4720	May	Be Required (Cont	inue	d)	
5a	During the year did the foundatio	n pay	or incur any amoun	t to						
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?									
	(2) Influence the outcome of any specific public election (see section 4955), or to carry									
	on, directly or indirectly, any					•				
	(3) Provide a grant to an individu						「 Yes ✓	' No		
	(4) Provide a grant to an organiza							-		
	in section 4945(d)(4)(A)? (s						Yes	' No		
	(5) Provide for any purpose other		- '				E v 5			
	educational purposes, or for t							NO		
D	If any answer is "Yes" to 5a(1)-								5b	
	Regulations section 53 4945 or								3D	
_	Organizations relying on a currer If the answer is "Yes" to question									
C	tax because it maintained expend							- No		
	If "Yes," attach the statement requ					•	res	NO		
6a	Did the foundation, during the year					nron	nume on			
Va	a personal benefit contract?			-				- No		
Ь							· · ·		6b	No
	If "Yes" to 6b, file Form 8870.	11, pc	ry premiums, unceer	, 01 1	nunceciy, on a perso	Jiidi i	senent contract.	•	OB	110
7a	At any time during the tax year, v	vas t	he foundation a part	v to a	nrohibited tax shel	ter ti	ransaction? TYes F	No		
	If yes, did the foundation receive						· · ·		7b	
							n Managers, Highly			ees.
	and Contractors									
_1	List all officers, directors, trustee	s, fo	undation managers a	nd t	heir compensation (see i	nstructions).			
			Title, and average	(c)	Compensation(If		(d) Contributions to	_	Expense ac	ccount
	(a) Name and address	 	hours per week		not paid, enter	eı	mployee benefit plans		other allow	•
		(b)	devoted to position		-0-)	and	deferred compensation	, ,		
See	Addıtıonal Data Table									
2	Compensation of five highest-paid	l em	oloyees (other than	those	e included on line 1-	-see	instructions). If none, er	ter"l	NONE."	
	(a)		Title, and aver	age			Contributions to			
Na	me and address of each employee	oaıd	hours per we		(c) Compensation	on	employee benefit plans and deferred		Expense ac other allov	
	more than \$50,000		(b) devoted to pos	ition			(d) compensation	(-,		
KAT	HERINE KATRAK		ANALYTICS		94	,049	19,137			0
	EDEN PARK DRIVE SUITE 200		MANAGER 40 00							
	CINNATI,OH 45202									
WIL	DA D SHAFFER		SR DIR FINANCE 40 00		78	,733	8,661			0
	EDEN PARK DRIVE SUITE 200 CINNATI,OH 45202									
	·		DIRECTOR OF		FF	105	12 200			0
	OMAS A MANNER		DIRECTOR OF FINANCE		55	,105	13,389			U
	EDEN PARK DRIVE SUITE 200 CINNATI,OH 45202		40 00							
	, .									
			1							
			1							
Total	al number of other ampleyees and		L #F0.000		l		<u> </u>			

D- 1 1/777	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees,	
Part VIII	and Contractors (continued)	

3 Five highest-paid independent contractors for professional serv	vices (see instructions). If none, enter "NONE".	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
CUSTOMIZED COMMUNICATIONS	PRODUCE AND PRINT MATERIALS TO	1,224,624
3407 AVENUE E EAST	DISTRIBUTE IN TEACHER FREE STORES	
ARLINGTON,TX 76011		
TURNSTYLE CREATIVE LLC	WEBSITE MAINTANACE & ACTIVITY	191,800
910 PLUM ST CINCINNATI,OH 45202	DEVELO PMENT	
DALE LAMSONINC	GRAPHIC DESIGN FOR WEBSITE AND	127,626
651 E PASEO EL MIRANDO PALM SPRINGS,CA 92262	PRINTED MATERIALS FOR DISTRIBUTION	
I SYSTEMS	COMPUTER (IT) CONSULTANT & COMPUTER	76,234
7905 BLACKHAWK COURT SUITE B WEST CHESTER,OH 45069	EQUIPMENT PURCHASES	
	-	
Total number of others receiving over \$50,000 for professional serv	ices	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year Incli organizations and other beneficiaries served, conferences convened, research pape		Expenses
1MATERIALS FOCUSED ON SCIENCE, TECHNOLOGY, ENGIN NUTRITION, FITNESS, SELF-ESTEEM, ANTI-BULLYING, ANI THROUGH THE ARTS		2,569,966
2CONTRIBUTIONS AND SPONSORSHIPS		263,704
3		·
4		
Part IX-B Summary of Program-Related Investme	nts (see instructions)	
Describe the two largest program-related investments made by the foundation	during the tax year on lines 1 and 2	A mount
1 N/A		0
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		0

Part X Minimum Investment Return

Pa	(All domestic foundations must complete this part. Foreign foundations, see instruction	s.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
	purposes		
а	Average monthly fair market value of securities	1a	44,314,239
b	Average of monthly cash balances	1b	1,224,558
c	Fair market value of all other assets (see instructions)	1 c	0
d	Total (add lines 1a, b, and c)	1d	45,538,797
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	45,538,797
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ 0 of line 3 (for greater amount, see		
	ınstructions)	4	683,082
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	44,855,715
6	Minimum investment return. Enter 5% of line 5	6	2,242,786
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cei check here ► □ and do not complete this part.)	rtaın f	oreign organizations
1	Mınımum ınvestment return from Part X, line 6	1	2,242,786
2a	Tax on investment income for 2015 from Part VI, line 5 2a 38,326		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
С	Add lines 2a and 2b	2c	38,326
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2,204,460
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	2,204,460
6	Deduction from distributable amount (see instructions)	6	0
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	2,204,460
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	2,833,670
	Program-related investments—total from Part IX-B	1b	0
2	A mounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc ,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	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	2,833,670
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	ıncome Enter 1% of Part I, line 27b (see instructions)	5	38,326
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	2,795,344
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth the section 4940(e) reduction of tax in those years	er the	foundation qualifies for

P	art XIII Undistributed Income (see in	nstructions)			
		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line	7			2,204,460
2	Undistributed income, if any, as of the end of 201	.5			
а	Enter amount for 2014 only			0	
b	Total for prior years 20, 20, 20		0		
	Excess distributions carryover, if any, to 2015				
а	From 2010				
b	From 2011 262,	493			
c	From 2012 559,	463			
d	From 2013 662,	679			
е	From 2014	826			
f	Total of lines 3a through e	2,005,4	161		
4	Qualifying distributions for 2015 from Part				
	XII, line 4 🕨 \$				
а	Applied to 2014, but not more than line 2a			0	
b	Applied to undistributed income of prior years		0		
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)		0		
d	Applied to 2015 distributable amount				2,204,460
	Remaining amount distributed out of corpus	629,2	210		
	Excess distributions carryover applied to 2015		0		0
	(If an amount appears in column (d), the				
_	same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,634,0	571		
	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				
u	—see instructions		0		
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see			0	
_	instructions			0	
T	Undistributed income for 2016 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	' I	0		
_	be required - see instructions)	•			
8	Excess distributions carryover from 2010 not		0		
٥	applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2016.	•			
9	Subtract lines 7 and 8 from line 6a	2,634,0	571		
10	Analysis of line 9				
	Excess from 2011	493			
	Excess from 2012 559,	463			
	Excess from 2013	679			
d	Excess from 2014	826			
е	Excess from 2015 629,	210			

	Private Operating Foundat	•			19)	
1a	If the foundation has received a ruling or determ					
	foundation, and the ruling is effective for 2015,					
	Check box to indicate whether the organization		ting foundation de		1 4942(j)(3) or	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for each	(a) 2015	(b) 2014	(c) 2013	(d) 2012	
	year listed					
b 8	35% 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					
а	"Assets" alternative test—enter					
	(1) Value of all assets		1			
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3		1			
-	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					
Pa	rt XV Supplementary Information (C			e organizatio	n had \$5,000 o	r more in
	assets at any time during the	<u>year—see ins</u>	tructions.)			
L a	Information Regarding Foundation Managers: List any managers of the foundation who have co	ontributed more th	nan 2% of the tota	ıl contributions rec	eived by the found	lation
	before the close of any tax year (but only if they					ideloli
b	List any managers of the foundation who own 10				large portion of th	е
	ownership of a partnership or other entity) of wh	ich the loundation	inas a 10% or gre	eaterinterest		
	Total Control Control Control City	Cabalanak	:t- B			
2	Information Regarding Contribution, Grant, Gift					
	Check here ► ✓ If the foundation only makes counsolicited requests for funds. If the foundation					
	other conditions, complete items 2a, b, c, and d		its, etc. (see ilisti)	actions) to marvia	dais of organizatio	iis uiidei
а	The name, address, and telephone number or e	mail address of th	e nerson to whom	annlications shou	ld he addressed	
u	The name, address, and telephone number of el	man address of th	e person to whom	applications shou	ia be addressed	
b	The form in which applications should be submi	tted and informat	ion and materials t	they should includ	e	
C	Any submission deadlines					
_	A					
d	Any restrictions or limitations on awards, such factors	as by geographic	aı areas, charitabl	e neias, kinds of ii	nstitutions, or othe	Γ

Part XV Supplementary Information(continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year See Additional Data Table 263,704 **b** Approved for future payment

Part XVI-A Analysis of Income-Produc	ing Activitie	S			T
Enter gross amounts unless otherwise indicated		siness income	Excluded by section	<u> </u>	(e) Related or exempt function income
1 Program service revenue	(a) Business code	(b) A mount	(c) Exclusion code	(d) A mount	(See Instructions)
a					
b					
c d					
e					
f					
g Fees and contracts from government agencies2 Membership dues and assessments					
Interest on savings and temporary cash investments					
4 Dividends and interest from securities			14	845,867	
Net rental income or (loss) from real estate a Debt-financed property					
b Not debt-financed property					
5 Net rental income or (loss) from personal property					
7 Other investment income.					
Gain or (loss) from sales of assets other than					
inventory			18	3,056,159	-527
O Ret income or (loss) from special events O Gross profit or (loss) from sales of inventory					
1 Other revenue a MISCELLANEOUS			01	2,332	
b			1		
d					
e					
2 Subtotal Add columns (b), (d), and (e) 3 Total.Add line 12, columns (b), (d), and (e)				3,904,358 13	-527 3,903,831
(See worksheet in line 13 instructions to verify	calculations)				
Part XVI-B Relationship of Activities to Explain below how each activity for what the following the first term of the following the first term of the following term of the foll	ıch ıncome ıs rej	oorted in column ((e) of Part XVI-A c	ontributed importa	
the accomplishment of the foundation' instructions)	s exempt purpos	es (other than by	providing funds for	rsuch purposes) (See
FIXED ASSET DISPOSAL					

Part X\		Information Re Noncharitable					nsa	ictions and F	Relationships	With			
	organ	ızatıon dırectly or ıı	ndırectly e	engage	ın any of	the following						Yes	No
		c) of the Code (othe	er than sec	ction 50)1(c)(3)	organizations	s) or	in section 527,	relating to politic	:al		103	140
organiz								ć					
		n the reporting four									4-74		NI-
										• •	1a(1)		No
• •		sets					•				1a(2)		No
b Other													
		assets to a noncha									1b(1)		No
		es of assets from a									1b(2)		No
		facilities, equipme									1b(3)		No
(4) Re	eimburs	sement arrangemen	ts								1b(4)		No
(5) Lo	ans or	loan guarantees.									1b(5)		No
(6) Per	forman	ce of services or m	embershı	or fun	draising :	solicitations.	•				1b(6)		No
c Sharing	g of fac	ılıtıes, equipment, i	mailing lis	ts, othe	erassets	, or paid emp	loye	es			1c		No
of the o	goods, transad	to any of the above other assets, or section or sharing arrand	rvices giv angement	en by tl , show i	he report n column	ıng foundatıo	n If e of t	the foundation range in the goods, other	eceived less tha	n fair marko ces receivo	et value ed	!	nts
	-												
	+												
							_						
	+												
describ	oed in s ," com	tion directly or indii section 501(c) of the plete the following s a) Name of organization	ie Code (d schedule		an sectio		orır	section 527?.		ption of relati	. □Y € onship	es 🔽	No
								+					
tl	he best nformat	enalties of perjury, of my knowledge a tion of which prepar	nd belief,	ıt ıs tru	ie, correc	t, and comple	ete l	Declaration of pi		an taxpaye		sed on	all
Here	*** 	ature of officer or to	rustee			2016-06- Date	30	-) ***** Title		below	he prepa		
		acure or officer or c								(see ı	nstr)? 🗸	Yes 1	10
		nt/Type preparer's GREGORY A DEYHI		Prepa	rer's Sıgı	nature		Date	Check if self- employed ▶	PTIN	00341	594	
Paid Prepare Use	er ME	m's name ► LLOTT & MELLOT	ΓPLL				1		Firm's EIN ► 3	1-606329	8		
Only	31	n's address ► 2 WALNUT STREE ⁻ 452024025	Γ - SUITE	2500	CINCINI	NATI,			Phone no (51)	3)241-294	10		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 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)
89686 SHS LORD ABBETT SHORT DURATION INCM 1 LLDXY	Р		
17489 SHS ALIANZ GI NFJ SMALL CAP VALUE FD INST PSVIX	Р		
61373 SHS ALIANZ GI NFJ SMALL CAP VALUE FD INST PSVIX	Р		
6325 SHS SPDR S&P DIVIDEND ETF SDY	Р		
14658 SHS FPA CRESCENT FUND INST CL SHARES FPC1Z	Р		
5000 SHS ISHARES 1-3 YEAR CREDIT BOND ETF CSJ	Р		
12973 SHS AMERICAN FD WUROPZCIFIC GWTH FD CL F1 AEGFX	Р		
15440 SHS DODGE & COX INTL STOCK FUND DODFX	Р		
9473 SHS HARBOR INTERNATIONAL FUND INST CL HAINX	Р		
5053 SHS PARAMETRIC TAX MGD EMRG MKTS INST EITEX	Р		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
399,950		415,791	-15,841
499,950		484,505	15,445
1,599,950		1,700,282	-100,332
501,611		342,703	158,908
499,950		405,417	94,533
526,032		520,792	5,240
600,000		470,926	129,074
599,950		468,490	131,460
599,950		482,409	117,541
197,564		198,266	-702

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Complete only for assets show	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	A djusted basıs (j) as of 12/31/69	Excess of col (1) (k) over col (j), if any	col (k), but not less than -0-) or (I) Losses (from col (h))			
			-15,841			
			15,445			
			-100,332			
			158,908			
			94,533			
			5,240			
			129,074			
			131,460			
			117,541			
			-702			

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 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)
6200 SHS SPDR S&P MIDCAP 400 ETF MDY	Р		
9175 SHS SPDR S&P 500 ETF SPY	Р		
4800 SHS ISHARES TR COHEN & STEER REIT ETF CF	Р		
12785 SHS POWERSHARES S&P 500 LOW VOLAT ETF SPLV	Р		
7000 SHS ISHARES MSCI EAFE ETF EFA	Р		
3775 SHS ISHARES S&P MID CAP 400 VALUE ETF IJJ	Р		
6925 SHS ISHARES MSCI EAFE MIN VOLAT ETF EFAV	Р		
4975 SHS ISHARES S&P 500 VALUE ETF IVE	Р		
2500 SHS SPDR S&P MIDCAP 400 ETF MDY	Р		
4130 SHS ISHARES CORE S&P SMALL CAP ETF IJR	Р		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
1,603,100		788,427	814,673
1,807,902		805,733	1,002,169
488,817		425,993	62,824
480,462		448,108	32,354
452,412		468,064	-15,652
466,242		455,185	11,057
425,550		466,250	-40,700
461,170		386,854	74,316
631,913		690,276	-58,363
448,815		461,971	-13,156

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I

Gains (Col (h) gain minus	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
col (k), but not less than -0-) or (I) Losses (from col (h))	Excess of col (1) (k) over col (j), if any	Adjusted basis (j) as of 12/31/69	(i) F M V as of 12/31/69		
814,673					
1,002,169			-		
62,824					
32,354			-		
-15,652					
11,057					
-40,700					
74,316					
-58,363					
-13,156					

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr)	(d) Date sold (mo , day, yr)			
1437 SHS LAZARD ENG MKTS EQUITY	Р					
CAPITAL GAINS DIVIDENDS	Р					
orm 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h						

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)			
199,950		242,102	-42,152			
693,463			693,463			
Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I						

•			
Complete only for assets show	ving gain in column (h) and owned b	by the foundation on 12/31/69	Gains (Col (h) gain minus
(i) F M V as of 12/31/69	A djusted basıs (j) as of 12/31/69	Excess of col (1) (k) over col (j), if any	col (k), but not less than -0-) or (l) Losses (from col (h))
			-42,152
			693,463

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

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
DIANNE DUNKELMAN	PRESIDENT	386,250	48,950	3,100
625 EDEN PARK DRIVE SUITE 200 CINCINNATI,OH 45202	40 00			
PATRICIA SMITSON	DIRECTOR	0	0	0
625 EDEN PARK DRIVE SUITE 200 CINCINNATI,OH 45202	1 00			
LORRENCE KELLAR	SECRETARY/TREASURER	0	0	0
625 EDEN PARK DRIVE SUITE 200 CINCINNATI,OH 45202	2 00			
GUY M HILD	DIRECTOR	0	0	0
625 EDEN PARK DRIVE SUITE 200 CINCINNATI,OH 45202	1 00			
SANDRA LOBERT	DIRECTOR	0	0	0
625 EDEN PARK DRIVE SUITE 200 CINCINNATI.OH 45202	1 00			

Recipient Name and address (home or business) a Paid during the year 4C FOR CHILDREN 2100 SHERMAN AVE 300 CINCINNATI, OH 45212	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year 4C FOR CHILDREN 2100 SHERMAN AVE 300		recipient		
4C FOR CHILDREN 2100 SHERMAN AVE 300			1	
2100 SHERMAN AVE 300				
		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	350
AMERICAN RED CROSS 2111 DANA AVENUE CINCINNATI,OH 45207		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	10,000
ART WORKS 20 E CENTRAL AVENUE CINCINNATI,OH 45202		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	500
ARTSWAVE 20 EAST CENTRAL PARKWAY SUITE 200 CINCINNATI,OH 45202		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	2,750
ASSOCIATION OF FUNDRAISING PO BOX 31206 CINCINNATI,OH 45231		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	600
BETHESDA FOUNDATION 10500 MONTGOMERY ROAD CINCINNATI,OH 45242		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	100
BOYS & GIRLS CLUB OF THE EASTERN PANHANDLE PO BOX 1184 MARTINSBURG, WV 25401		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	500
BREAST CANCER ORG 7 EAST LANCASTER AVE 3RD FLOOR ARDMORE,PA 19903		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	700
CARROLL COUNTY MIDDLE SCHOOL 21ST CENTURY LIGHTHOUSECCMS 408 5TH STREET CARROLLTON,KY 41008		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	200
CENTER FOR INDEPENDENT LIVING OPTIONS (CILO) 2031 AUBURN AVE CINCINNATI,OH 45219		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	200
CENTRAL CLINIC 311 ALBERT SABIN WAY CINCINNATI,OH 45229		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	3,000
CENTRAL MIDDLE SCHOOL 13200 PEARL ROAD STRONGSVILLE,OH 44136		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	1,667
CET 1223 CENTRAL PARKWAY CINCINNATI,OH 45214		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	9,600
CINCINNATI ART & ANTIQUES FESTIVAL 5729 DRAGON WAY SUITE 11A CINCINNATI,OH 45227		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	75
CINCINNATI ART MUSEUM 953 EDEN PARK DRIVE CINCINNATI,OH 45202		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	1,500

Name and address (home or business)	show any relationship to any foundation manager	status of recipient	contribution	A mount
	or substantial contributor	тестрієні		
a Paid during the year				
CINCINNATI ASSOCIATION FOR THE BLIND AND VISUALLY IMPAIRED 2045 GILBERT AVENUE CINCINNATI,OH 45202		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	7,500
CINCINNATI BALLET 1555 CENTRAL PARKWAY CINCINNATI,OH 45214		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	31,000
CINCINNATI CHRISTIAN SCHOOLS 7350 DIXIE HIGHWAY FAIRFIELD,OH 45014		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	2,167
CINCINNATI FLOWER SHOW 900 ADAMS LANDING SUITE 13200 CINCINNATI,OH 45202		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	194
CINCINNATI HUMAN RELATIONS COMMISSION 801 PLUM STREET CITY HALL ROOM 158 CINCINNATI,OH 45002		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	750
CINCINNATI MUSEUM CENTER 1301 WESTERN AVE CINCINNATI,OH 45203		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	1,500
CINCINNATI PARKS FOUNDATION 950 EDEN PARK DRIVE CINCINNATI,OH 45202		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	450
CINCINNATI PLAYHOUSE IN THE PARK 962 MT ADAMS CIRCLE CINCINNATI,OH 45202		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	100
CINCINNATI PUBLIC SCHOOLS 2651 BURNET AVENUE CINCINNATI,OH 45219		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	4,250
CINCINNATI REGIONAL CHAMBER 3 E 4TH STREET CINCINNATI,OH 45202		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	1,650
CINCINNATI SHAKESPEARE CO 719 RACE STREET CINCINNATI,OH 45202		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	100
CINCINNATI SYMPHONY ORCHESTRA 1241 ELM STREET CINCINNATI,OH 45202		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	4,945
CINCINNATI ZOO & BOTANICAL GARDEN 3400 VINE STREET CINCINNATI,OH 452201399		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	250
CLEVELAND CLINIC FOUNDATION 9500 EUCLID AVENUE CLEVELAND,OH 44195		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	75,000
COMMUNITY SHARES 103 WM HOWARD TAFT ROAD CINCINNATI,OH 45219		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	100

TOTHE 3 - GIE	into una contributions	raia baring .	the real of Approved for	atare rayment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CONTEMPORARY ARTS CENTER 44 EAST 6TH STREET CINCINNATI,OH 45202		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	5,000
DEKALB PATH ACADEMY 3007 HERMANCE DRIVE ATLANTA,GA 30319		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	1,000
EAGLE INTERMEDIATE SCHOOL 700 EAGLE SCHOOL ROAD MARTINSBURG,WV 25404		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	2,000
EDEN GROVE ACADEMY 6277 COLLEGEVUE PL CINCINNATI,OH 45224		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	1,167
EDUCATION MATTERS & COMMUNITY SHARES 2104 SAINT MICHAEL STREET CINCINNATI,OH 45204		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	750
EYE OF THE ARTISTS FOUNDATION 1860 WYNNEWOOD LANE CINCINNATI,OH 45237		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	100
FAIRMOUNT ELEMENTARY SCHOOL 11401 BEVERLY PARK RD EVERETT, WA 98204		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	1,000
FERNSIDE BLUE OUT 4360 COOPER ROAD SUITE 100 CINCINNATI,OH 45242		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	250
GLASGOW MIDDLE SCHOOL 105 SCOTTIE DRIVE GLASGOW,KY 42141		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	100
GLENN COUNTY OFFICE OF EDUCATION 676 EAST WALKER STREET ORLAND,CA 95963		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	500
GLOBAL BRIGHT LIGHT FOUNDATION PO BOX 3415 NAPLES,FL 34106			GENERAL CHARITABLE PURPOSE	100
HOSPICE OF CINCINNATI 10500 MONTGOMERY ROAD CINCINNATI,OH 45242		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	1,400
HUBERT BANCROFT ELEMENTARY SCHOOL START AFTER-SCHOOL PROGRAM 2929 BELMAR ST SACRAMENTO,CA 95826		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	2,000
JOHN PAUL II CATHOLIC SCHOOL 9375 WINTON ROAD CINCINNATI,OH 45231		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	1,000
JUNIOR ACHIEVEMENT 644 LINN ST SUITE 1024 CINCINNATI,OH 45203		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	9,600
Total			▶ 3a	263,704

Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	A mount
Name and address (home or business)	or substantial contributor			
a Paid during the year				
KIDS CAMP YOUTH CENTER 4316 PECK ROAD EL MONTE,CA 91732		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	1,000
LA'S BEST 711 E 14TH PLACE LOS ANGELES,CA 90021		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	1,800
LEAGUE OF WOMEN VOTERS CINCINNATI AREA EDUCATION FUND 103 WM HOWARD TAFT ROAD CINCINNATI,OH 45219		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	100
LIGHTHOUSE YOUTH SERVICES 401 E MCMILLAN ST CINCINNATI,OH 45206		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	200
LOS ANGELES CONSERVATION CORPS AFTER-SCHOOL PROGRAM 605 W OLYMPIC BLVD LOS ANGELES,CA 90015		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	5,200
MOELLER BASEBALL PROGRAM 9001 MONTGOMERY ROAD CINCINNATI,OH 45242		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	225
MONGER PTO MONGER SCHOOL 1100 E HIVELY ELKHART,IN 46517		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	500
MOST VALUABLE KIDS INC 7530 FERNWOOD DRIVE CINCINNATI,OH 45237		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	1,000
MOUNTAIN RIDGE INTERMEDIATE 2691 GARRAFDSTOWN ROAD GARRARDSTON, WV 25420		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	1,000
MUSICNOW PO BOX 43144 CINCINNATI,OH 45243		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	500
NORTH AMERICAN MENOPAUSE SOCIETY FOUNDATION 5900 LANDERBROOK DRIVE CLEVELAND,OH 44124		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	1,000
NORTHERN KANE EDUCATIONAL CORP 900 WESTERN BLVD HAMPSHIRE,IL 60140		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	1,000
PARAMOUNT CITY OF STAR AFTERSCHOOL PROGRAM 15300 DOWNEY AVENUE PARAMOUNT,CA 90723		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	400
PEOPLE OF COLOR WELLNESS ALLIANCE (POCWA) 3333 BURNET AVE ML 9004 CINCINNATI,OH 45229		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	100
POMONA UNIFIED SCHOOL DISTRICT 1460 E HOLT AVE SUITE 132 POMONA,CA 91767		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	500

If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	A mount
or substantial contributor	recipient		
	PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	3,900
	PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	100
	PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	100
	PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	300
	PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	2,500
	PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	1,000
	PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	350
	PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	100
	PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	700
	PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	1,200
	PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	100
	PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	40,500
	PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	3,250
	PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	1,000
	PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	75
	show any relationship to any foundation manager	show any relationship to any foundation manager or substantial contributor PUBLIC CHARITY PUBLIC CHARITY	Show any relationship to any foundation manager or substantial contributor PUBLIC CHARITY GENERAL CHARITABLE PURPOSE PUBLIC GENERAL CHARITABLE CHARITABLE PURPOSE PUBLIC GENERAL CHARITABLE PURPOSE

				•
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	A mount
a Paid during the year				
YWCA OF CINCINNATI 898 WALNUT STREET CINCINNATI,OH 45202		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	5,161
ZONTA SERVICE FUND PO BOX 428546 CINCINNATI,OH 45242		PUBLIC CHARITY	GENERAL CHARITABLE PURPOSE	1,178
Total			▶ 3a	263,704

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

TY 2015 Depreciation Schedule

Name: BUILDING HEALTHY LIVES FOUNDATION

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
OFFICE FURNITURE	2009-01-01	9,765	9,765	SL	10 000000000000	0	0		
OFFICE FURNITURE	2009-01-01	85,053	76,146	SL	10 000000000000	1,524	0		
LEASEHOLD IMPROVEMENTS	2009-01-01	53,765	31,347	SL	3 000000000000	2,242	0		
IT EQUIPMENT AND SOFTWARE	2009-01-01	182,777	142,982	SL	3 000000000000	14,236	0		

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TY 2015 Gain/Loss from Sale of Other Assets Schedule

Name: BUILDING HEALTHY LIVES FOUNDATION

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
FIXED ASSETS		PURCHASED				54,204		0	-527	53,677

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TY 2015 Investments Corporate Stock Schedule

Name: BUILDING HEALTHY LIVES FOUNDATION

Name of Stock	End of Year Book Value	End of Year Fair Market Value
INVESTMENTS	38,485,871	42,710,603

TY 2015 Land, Etc. Schedule

Name: BUILDING HEALTHY LIVES FOUNDATION

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
OFFICE FURNITURE	9,765	9,765	0	
OFFICE FURNITURE	85,053	77,670	7,383	
LEASEHOLD IMPROVEMENTS	53,765	33,589	20,176	
IT EQUIPMENT AND SOFTWARE	182,777	157,218	25,559	

TY 2015 Other Assets Schedule

Name: BUILDING HEALTHY LIVES FOUNDATION

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
DEFERRED CHARGE	21,667	11,667	11,667
TRADEMARK	71,788	84,267	84,267
UNCONDITIONAL PROMISES TO GIVE	157,946	158,278	158,278

TY 2015 Other Expenses Schedule

Name: BUILDING HEALTHY LIVES FOUNDATION

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE SUPPLIES	47,135	0		26,329
INSURANCE	8,502	0		4,562
INVESTMENT MANAGEMENT FEES	69,423	69,423		0
MISCELLANEOUS	17,748	0		7,069
CHILDRENS PROJECT	1,895,911	0		1,895,911
PAYROLL TAXES	35,330	0		0
POSTAGE AND SHIPPING	375	0		232
OFFICE EQUIPMENT MAINTENACE AND REPAIR	35,462	0		19,028
FUNDRAISING COST	4,654	0		0
FUNDRAISING SALARY	18,862	0		0
FUNDRAISING BENEFITS	5,441	0		0
CHILDRENS PROJECTS - SALARIES	73,993	0		73,993
CHILDRENS PROJECTS - BENEFITS & PAYROLL TAXES	22,949	0		22,949

TY 2015 Other Income Schedule

Name: BUILDING HEALTHY LIVES FOUNDATION

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income	
MISCELLANEOUS	2,332		2,332	



TY 2015 Other Liabilities Schedule

Name: BUILDING HEALTHY LIVES FOUNDATION

Description	Beginning of Year - Book Value	End of Year - Book Value	
DEFERRED COMPENSATION	267,100	272,751	

TY 2015 Other Professional Fees Schedule

Name: BUILDING HEALTHY LIVES FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL SERVICES	10,800	0		0

TY 2015 Taxes Schedule

Name: BUILDING HEALTHY LIVES FOUNDATION

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAX	38,326	0		0

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LN. 93491163006276

OMB No 1545-0047

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF.
► Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

2015

Employer identification number

BUILDING HEALTHY L	IVES FOUNDATION				
30-0214078		30-0214078			
Organization type (check one)					
Filers of:	Section:				
Form 990 or 990-EZ	□ 501(c)() (enter number) organization				
		ation			
	□ 527 political organization				
Form 990-PF	√ 501(c)(3) exempt private foundation				
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation				
	□ 501(c)(3) taxable private foundation				
	on is covered by the General Rule or a Special Rule . 1(c)(7), (8), or (10) organization can check boxes for both the General Rule and	a Special Rule See instructions			
General Rule					
	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contribution from any one contributor. Complete Parts I and II. See instructions for determining				
Special Rules					
under sections 5 received from an	ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3% siog(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), flay one contributor, during the year, total contributions of the greater of (1) \$5,000 or (ii) Form 990-EZ, line 1 Complete Parts I and II	Part II, line 13, 16a, or 16b, and that			
during the year, t	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rectotal contributions of more than \$1,000 <i>exclusively</i> for religious, charitable, scien n of cruelty to children or animals. Complete Parts I, II, and III				
during the year, of this box is check purpose Do not	ion described in section $501(c)(7)$, (8) , or (10) filing Form 990 or 990-EZ that recontributions $exclusively$ for religious, charitable, etc., purposes, but no such coited, enter here the total contributions that were received during the year for an ecomplete any of the parts unless the General Rule applies to this organization below, etc., contributions totaling \$5,000 or more during the year	ontributions totaled more than \$1,000 lf exclusively religious, charitable, etc, because it received nonexclusively			

990-EZ, or 990-PF)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990,

Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its

Name of organization
BUILDING HEALTHY LIVES FOUNDATION

Employer identification number 30-0214078

Part I	Contributors (see instructions) Use duplicate copies of Part I if a	additional space is needed		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
1	CUSTOMIZED COMMUNICATIONS INC 3407 AVENUE EAST		Person Payroll	ন ন
	ARLINGTON, TX76011	\$ 5,000	Noncash (Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person Payroll	Г Г
		\$	Noncash (Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Г
		\$	Payroll Noncash	,
			(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
			Person	Γ
		\$	Payroll	Γ
			Noncash (Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
	_		Person	Г _
		\$	Payroll Noncash	
			(Complete Part II f	or noncash
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution
	_		Person	Γ
		\$	Payroll	Г -
			Noncash (Complete Part II f contributions)	or noncash

Name of organization BUILDING HEALTHY LIVES FOUNDATION		Employer identification number	
BUILDING HEALI	HY LIVES FOUNDATION	30-0214078	
Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed	•	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

e of organization _DING HEALTHY L	IVES FOUNDATION	Em	ployer identification number	
		30-0214078		
total more line entry. I of \$1,000 or	than \$1,000 for the year from any or	ne contributor. Complete colum II, enter the total of <i>exclusively</i> r mation once. See instructions.) I	d in section 501(c)(7), (8), or (10) that ns (a) through (e) and the following eligious, charitable, etc., contributions \$	
(a) from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
. =				
_	Transferee's name, address, and	(e) Transfer of gift	elationship of transferor to transferee	
(a) from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
. =				
	Transferee's name, address, and	(e) Transfer of gift	elationship of transferor to transferee	
(a) from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
. =		() T = 5 = 5		
_	Transferee's name, address, and	(e) Transfer of gift IZIP4 Re	elationship of transferor to transferee	
(a) .from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
. =				
	Transferee's name, address, and	(e) Transfer of gift	elationship of transferor to transferee	
				