

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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 <u>www.irs.gov/form990pf</u>.

For	cale	ndar year 2015, or tax y	year beginning 01-0	01-2015	, a	nd ending 1	2-31-2015	
	e of four					A Employer id	entification numb	er
	ilmarth a nd	and Marion Paine Scholarship				34-1365829		
Num	ber and	street (or P O box number if mail is	not delivered to street address)	Room/suite		B Telephone nur	mber (see instruction	ns)
	95 Monre		·······			(419) 474-8611		
City	or town.	state or province, country, and ZIP of	or foreign postal code			C If exemption	application is pendir	ng, check here 🕨
	do, OH		· · · · · · · · · · · · · · · · · · ·			,		. ,
G CI	neck al	I that apply Initial return	Initial return of a fo	ormer public charity		D 1 Foreign or	ganizations, check h	ere 🕨 🗀
		Final return Address chang	A mended return			_	ganizations, check in	the 9E0/
	1. 4	·		- £ d-1		test, chec	k here and attach co Indation status was	mputation
		pe of organization					n 507(b)(1)(A), che	. —
		et value of all assets at end	JAccounting method Other (specify)	▼ Cash			ation is in a 60-mont	
		rom Part II, col. (c), \$ 749,677	(Part I, column (d) must	be on cash basıs.)		under section	n 507(b)(1)(B), che	ck nere 📕 I
	rt I	Analysis of Revenue a	and Expenses					Disbursements
		(The total of amounts in columns in necessarily equal the amounts in co	(b), (c), and (d) may not	Revenue and expenses per	(b)	Net investment income	Adjusted net (c) income	for charitable purposes
		instructions))	olumn (u) (see	(a) books	(-)		(6)	(d) (cash basis only)
	1	Contributions, gifts, grants, e	etc , received (attach					
		schedule)		50				
	2	Check 🟲 🔽 if the foundation	is not required to attach					
		Sch B						
	3	Interest on savings and temp	•	24.047		24.047		
	4	Dividends and interest from s		31,947		31,947		
	5a b	Gross rents						
ф	6a	Net gain or (loss) from sale of		12,190				
Revenue	Ь р	- , ,						
	"	Gross sales price for all asse 95,750	ets on line 6 a					
	7	Capital gain net income (fron	n Part IV, line 2)			12,190		
	8	Net short-term capital gain .						
	9	Income modifications						
	10a	Gross sales less returns and allowances						
	ь	Less Cost of goods sold .						
	c	Gross profit or (loss) (attach	schedule)					
	11	Other income (attach schedu	ıle)					-
	12	Total.Add lines 1 through 11		44,187		44,137		
	13	Compensation of officers, dir	ectors, trustees, etc					
	14	O ther employee salaries and	wages					
ě	15	Pension plans, employee ben						
Š	16a	Legal fees (attach schedule).						
Expenses	ь	Accounting fees (attach sch	edule)					
	c	Other professional fees (atta	ch schedule)	6,645		6,645		
Admını strative	17	Interest						
Str	18	Taxes (attach schedule) (see	e instructions)	1,238		93		
<u>=</u>	19	Depreciation (attach schedul	e) and depletion					
Æ	20	Occupancy						
and #	21	Travel, conferences, and mee	-					
	22	Printing and publications.		Ø 5 □ 3.445				2.445
ting	23	Other expenses (attach sche		3,145				3,145
Operating	24	Total operating and administ Add lines 13 through 23	-	11,028		6,738		3,145
Ŏ	25	Contributions, gifts, grants p		35,000		0,738		35,000
	26			33,000				33,000
		Total expenses and disburser 25	memes 24 and	46,028		6,738		38,145
	27	Subtract line 26 from line 12						
	a	Excess of revenue over expe		-1,841				
	b	Net investment income (If ne				37,399		
	С	Adjusted net income(If negat	rive, 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	·
\equiv	1	Cash—non-interest-bearing	(a) Book Value 534	(b) Book Value 4,623	(c) Fair Market Value 4,623
	2	Savings and temporary cash investments	1,040	.,,523	.,525
	3	Accounts receivable -	1,010		
	3	Less allowance for doubtful accounts -			
	4	Pledges receivable			
	4	Less allowance for doubtful accounts -			
	_	Grants receivable			
	5	<u> </u>			
	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 ▶			
ا ب	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	508,187	513,446	
	С	Investments—corporate bonds (attach schedule)	107,064	96,459	104,485
	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 🟲			
		Less accumulated depreciation (attach schedule) ▶			
	15	O ther assets (describe 🟲)			
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item I)	616,825	614,528	749,677
	17	Accounts payable and accrued expenses			
	18	Grants payable			
<u>~</u>	19	Deferred revenue			
abilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Lat	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe 🟲)			
	23	Total liabilities(add lines 17 through 22)		0	
		Foundations that follow SFAS 117, check here 🕨 🦵			
8		and complete lines 24 through 26 and lines 30 and 31.			
흥	24	Unrestricted			
Balance	25	Temporarily restricted			
힏	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			
ssets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
4	29	Retained earnings, accumulated income, endowment, or other funds	616,825	614,528	
ĕ	30	Total net assets or fund balances(see instructions)	616,825	614,528	
	31	Total liabilities and net assets/fund balances(see instructions)	616,825	614,528	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	•		
		Total net assets or fund balances at beginning of year—Part II, column	(a), line 30 (must ag	ree	
		with end-of-year figure reported on prior year's return)			616,825
2		Enter amount from Part I, line 27a			-1,841
3		Other increases not included in line 2 (itemize)		3	·
4		Add lines 1, 2, and 3		4	614,984
5		Decreases not included in line 2 (itemize)		% 5	456
6		Total net assets or fund balances at end of year (line 4 minus line 5)—P		e 30 . 6	614,528

Part 1	List and describe	the kını	d(s) of property sold (e g , r or common stock, 200 shs	real est	tate,		How acquired P—Purchase D—Donation	ט ן	rate acquired mo , day, yr)	Date sold (d) (mo , day, yr)
1 a	Publicly traded securi	ities					Р			
b										
d										
<u>-</u>										
			Depreciation allow	o d	Cost	orot	her basıs	 	Caur	l or (loss)
(e)	Gross sales price		(f) (or allowable)	eu			se of sale			(f) minus (g)
a	9	5,750			127.	•	83,56	5		12,190
							<u> </u>			<u> </u>
								+		
d										
<u>u</u>								+		
		h			<u> </u>	1	2/21/60		- (0.1	
	npiete only for assets s	nowing	gain in column (h) and own Adjusted basis	led by			f col (I)	ہ ⊢		(h) gain minus et less than -0-) or
(i)	FMV as of 12/31/69		(j) as of 12/31/69		(k) over			(1)		(from col (h))
a										12,190
d										
<u>u</u>										
			- r	Ifaa	ın, also enter ı	n Dar	+ I lino 7 ì		1	
2	Capital gain net incon		Ĺ	If (lo	ss), enter -0-	ın Pa		2		12,190
3		_	or (loss) as defined in section				١			
	If gain, also enter in P in Part I, line 8 .		ne 8, column (c) (see instr	ructions		iter -	. }	3		12,190
Part \	Qualification U	Inder	Section 4940(e) for	Reduc	ced Tax on	Net	Investme	nt In	come	
	onal use by domestic p n 4940(d)(2) applies, lo		oundations subject to the s is part blank	section	4940(a) tax (on ne	t investment	ıncom	e)	
			on 4942 tax on the distribut y under section 4940(e) D				n the base pe	eriod?		┌ Yes ┌ No
			ach column for each year, s				kıng anv ent	ries		
	(a)			T					(d)	
	period years Calendar	Adıı	(b) Isted qualifying distributions	Net	(c) value of nonchar	table-	ise assets		Distributio	n ratio
year (o	r tax year beginning in)	,		+					(col (b) divided	by col (c))
	2014			+-						
	2012			+-						
	2011			+						
	2010			+						
2		(d)						2		
3			the 5-year base period—d dation has been in existend				5, or by	3		
4			arıtable-use assets for 201					4		
5					-		—	5		
6			income (1% of Part I, line 2				 	6		
7				-			-	7		
8			from Part XII, line 4.				<u> </u>	8		
0	· · · -		r than line 7, check the box						sing a 10/2 to:	v rate See
	the Part VI instruction		than time 7, check the box	. 111 F a1	C 4 I, IIIIC I D, 6	ina ci	mpiete tilat	part u	5 mg a 1 70 ta.	A Tate Dec

	990-PF (2015) t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4	940(e)	, or 4948—s	ee pag	e 18 of	the inst	ructio		age 4
1a	Exempt operating foundations described in section 4940(d)(2), check here		•	<u> </u>					
	and enter "N/A" on line 1	'							
	Date of ruling or determination letter			\					
	(attach copy of letter if necessary—see instructions)								
b	Domestic foundations that meet the section 4940(e) requirements in Part V	, check	•	J	1				748
	here Fand enter 1% of Part I, line 27b								
С	All other domestic foundations enter 2% of line 27b Exempt foreign organiza	ations (enter 4 % of						
2	Part I, line 12, col (b) Tax under section 511 (domestic section 4947(a)(1) trusts and taxable four	ndation	s only Othe	arc					
2	enter -0-)	iluation	is only other	-13	2				
3	Add lines 1 and 2				3				748
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable fou	ndatior	ns only Oth	ers					
_	enter -0-)		`		4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, e	enter - c)	•	5				748
6	Credits/Payments	۔ م	1	750					
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a		750					
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				750
8	Enter any penalty for underpayment of estimated tax. Check here 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				10				2
11	Enter the amount of line 10 to be Credited to 2015 estimated tax	2	Refunded		11				
	t VII-A Statements Regarding Activities		!		<u> </u>			V	NI-
1a	During the tax year, did the foundation attempt to influence any national, state	e, or 100	cai legislatio	on or ai	a		1.	Yes	No
	it participate or intervene in any political campaign?			· ·			1a	\vdash	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for production (and definition)?	politica	ii purposes	(see in	structi	ons	1b		NI.
	for definition)?		nuos of any			•	10		No
	published or distributed by the foundation in connection with the activities.	allu CC	opies or arry i	ilatella	15				
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) impo			 r		•	10		
•	(1) On the foundation \blacktriangleright \$ (2) On foundation managers								
e	Enter the reimbursement (if any) paid by the foundation during the year for pol				osed				
_	on foundation managers > \$		xponarca o						
2	Has the foundation engaged in any activities that have not previously been re	ported	to the IRS?				2		No
	If "Yes," attach a detailed description of the activities.								
3	Has the foundation made any changes, not previously reported to the IRS, in i	ts aove	ernina instru	ıment.	artıcle:	s			
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conf	_	_	-			3		No
4a	Did the foundation have unrelated business gross income of \$1,000 or more of						4a		No
b	If "Yes," has it filed a tax return on Form 990-T for this year?	_					4b		No
5	Was there a liquidation, termination, dissolution, or substantial contraction du						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	945)sa	tisfied eithe	er					
	By language in the governing instrument, or								
	ullet By state legislation that effectively amends the governing instrument so the	nat no r	mandatory d	ırectıo	ns				
	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	?If "Ye:	s," complete	Part II	col. (c),			
	and Part XV.						7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered ($\!\!\!$	(see ins	structions)						
	▶ <u>OH</u>								
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 9			_	=				
	General (or designate) of each state as required by General Instruction G? $\it If$	•	·				8b		No
9	Is the foundation claiming status as a private operating foundation within the		_						
	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (s	see inst	tructions for	Part X	.1 /) ›				
10	If "Yes," complete Part XIV	" atta - "		lict	• •		9	\vdash	No
10			ı a schedüle	nsting	uieir n	aiileS	10		No
	and addresses.							oxdot	.40

Pai	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	<u> </u>	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website address ► <u>N/A</u>			
14	The books are in care of ▶Beverly Norwalk Telephone no ▶(419) 474	-8611	
	Located at \$\infty 4895 Monroe St Suite 103 Toledo OH ZIP+4 \$\infty 43623			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		▶ □	-
13	and enter the amount of tax-exempt interest received or accrued during the year	•	- ,	
				
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			
Pai	t 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
1 a	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?			
	(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) Agree 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		No
	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,			
	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		No
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
_	▶ 20 <u>, 20</u> , 20 <u>, 20</u>			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at			
	any time during the year?			
D	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		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	+-	No
ъ b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	-ru		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

Pai	Statements Rega	rding Activities for	· Wr	nich Form 4720	May	Be Required (<i>Cont</i>	tinue	ed)		
5a	During the year did the foundatio	n pay or incurany amoun	t to							
	(1) Carry on propaganda, or othe	rwise attempt to influenc	e leg	ııslatıon (sectıon 49	45(e))?	√ No			
	(2) Influence the outcome of any	specific public election ((see	section 4955), or to	carı	ry				
	on, directly or indirectly, any	voter registration drive?				T Yes 🖟	√ No			
	(3) Provide a grant to an individu	al for travel, study, or otl	ners	ımılar purposes?		┌ Yes रि	√ No			
	(4) Provide a grant to an organiza	ped								
	in section 4945(d)(4)(A)? (s	T Yes	√ No							
	(5) Provide for any purpose other	than religious, charitabl	e, sc	ientific, literary, or						
	educational purposes, or for t	he prevention of cruelty	to ch	ıldren or anımals?.		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	√ No			
b	If any answer is "Yes" to 5a(1)-(5), did any of the transac								
	Regulations section 53 4945 or	n a current notice regard	ling d	disaster assistance	(see	instructions)?		5b		No
	Organizations relying on a currer	t notice regarding disast	eras	ssistance check her	e		_			
С	If the answer is "Yes" to question									
	tax because it maintained expend	liture responsibility for th	he gr	ant?		T Yes [√ No			
	If "Yes," attach the statement requ									
6a	Did the foundation, during the yea	ar, receive any funds, dire	ectly	or indirectly, to pay	prer	niums on				
	a personal benefit contract?						- No			
b	Did the foundation, during the yea	ar, pay premiums, directl	y orı	ndirectly, on a perso	onall	benefit contract?		6b		No
	If "Yes" to 6b, file Form 8870.									
7a	At any time during the tax year, v	vas the foundation a part	y to a	a prohibited tax shel	ter tı	ransaction? \(Yes \)	√ No			
b	If yes, did the foundation receive	•	-	•				7b		No
	Information Abou	t Officers, Director						l Emp	loyee	s,
	and Contractors	·		<u>, </u>						
1	List all officers, directors, trustee	s, foundation managers a	nd t	heir compensation (see i	nstructions).				
		Title, and average	(c)	Compensation(If		(d) Contributions to		Evnens		unt
	(a) Name and address	hours per week		not paid, enter	e	mployee benefit plans		•	e accou Illowanc	
		(b) devoted to position		-0-)		deferred compensation	L`´			
See	Additional Data Table									
		1								
2	Compensation of five highest-paid	l employees (other than	thos	e included on line 1–	-see	instructions). If none, e	nter "	NONE.	,	
	(a)	Title, and aver	.2.00			Contributions to				
Nar	me and address of each employee		_	(c) Compensation	n	employee benefit			se acco	
	more than \$50,000	(b) devoted to pos	ition			plans and deferred (d) compensation	(e)	otnera	allowand	es
NON	IE									
										
							1			
		 								
							-			
.	I mumb an a fact	<u> </u>				<u> </u>	-			
LOTA	I number of other employees paid of	vers50000.	_		_		1			

Part VIII Information About Officers, Directors, Truste and Contractors (continued)		
3 Five highest-paid independent contractors for professional services (IE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
otal number of others receiving over \$50,000 for professional services.		•
Part IX-A Summary of Direct Charitable Activities		
ist the foundation's four largest direct charitable activities during the tax year. Include rele	evant statistical information such as the numbe	r of
rganizations and other beneficiaries served, conferences convened, research papers produ	uced, etc	Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during t	the tax year on lines 1 and 2	A mount
1		
2		
All other program-related investments See instructions		
3		
-		
otal. Add lines 1 through 3		<u>▶</u>

Form 990-PF (2015) Part X Minimum Investment Return

ΓŒ	(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	A verage monthly fair market value of securities	1a	772,426
b	A verage of monthly cash balances	1b	5,077
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	777,503
e	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	
3	Subtract line 2 from line 1d	3	777,503
4	Cash deemed held for charitable activities $$ Enter 1 $$ 1/2 $$ $\!$ of line 3 (for greater amount, see		
	ınstructions)	4	11,663
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	765,840
6	Minimum investment return. Enter 5% of line 5	6	38,292
Pai	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and cer	rtaın f	oreign organizations
	check here ► and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	38,292
2a	Tax on investment income for 2015 from Part VI, line 5 2a 748		
b	Income tax for 2015 (This does not include the tax from Part VI) 2b		
c	Add lines 2a and 2b	2c	748
3	Distributable amount before adjustments Subtract line 2c from line 1	3	37,544
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	37,544
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amountas adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	37,544
Dar	t XII Qualifying Distributions (see instructions)		
	<u> </u>		
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	38,145
b	Program-related investments—total from Part IX-B	1b	
2	Amounts 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)	За	
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	38,145
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	38,145
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth	er the	foundation qualifies for

P	art XIIII Undistributed Income (see insti	ructions)			
		(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1	Distributable amount for 2015 from Part XI, line 7				37,544
2	Undistributed income, if any, as of the end of 2015				
а	Enter amount for 2014 only			34,113	
b	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2015				
а	From 2010				
b	From 2011				
	From 2012				
d	From 2013				
е	From 2014				
f	Total of lines 3a through e				
4	Qualifying distributions for 2015 from Part				
	XII, line 4 🕨 \$ 38,145				
а	Applied to 2014, but not more than line 2a			34,113	
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)		0		
d	Applied to 2015 distributable amount				4,032
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2015				
	(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				
	Prior years' undistributed income Subtract				
	line 4b from line 2b				
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				
d	Subtract line 6c from line 6b Taxable amount				
	—see instructions				
е	Undistributed income for 2014 Subtract line				
	4a from line 2a Taxable amount—see				
	instructions				
f	Undistributed income for 2016 Subtract				
	lines 4d and 5 from line 1 This amount must be distributed in 2015				33,512
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)				
8	Excess distributions carryover from 2010 not				
_	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
	Excess from 2011				
	Excess from 2012				
	Excess from 2013				
	Excess from 2014				
	Excess from 2015				

	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

Form 990-PF (2015)

Part XV Supplementary Information(continued)

Part XV Supplementary Information(continued)										
3 Grants and Contributions Paid	${f I}$ During the Year or ${f Ap}_{f I}$	proved for F	uture Payment							
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	A mount						
Name and address (home or business)	or substantial contributor	recipient	Contribution							
a Paid during the year U of Michigan School of Dentistry 515 E Jefferson St 2011 Ann Arbor, MI 48109	none	PC	Scholarships	17,500						
Ohio State University Sch of Dentis 190 N Oval Mall Columbus, OH 43210	none	PC	Scholarships	8,750						
Howard University College of Dentis 600 W Street NW Washington, DC 20059	none	PC	Scholarship	8,750						
Total			▶ 3a	35,000						
b Approved for future payment										
			h at	 						

Part XVI-A Analysis of Income-Produc	ing Activitie	s			Page 1 2
Enter gross amounts unless otherwise indicated		ısıness income	Excluded by section	<u> </u>	(e) Related or exemp 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					
g Fees and contracts from government agencies					
Membership dues and assessmentsInterest on savings and temporary cash investments					
4 Dividends and interest from securities 5 Net rental income or (loss) from real estate			14	31,947	
a Debt-financed propertyb Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
Net income or (loss) from special events			18	12,190	
O Gross profit or (loss) from sales of inventory L Other revenue a					
b					
c d					
e 2 Subtotal Add columns (b), (d), and (e)				44,137	
3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify			:	13	44,137
Part XVI-B Relationship of Activities to					
Explain below how each activity for whether the accomplishment of the foundation's instructions)					
+					

Part	XVI	Information Re Noncharitable					sactions a	and Re	elationships	With			
		organization directly or ii	ndırectly	engage	ın any of th	ne following wi						V	N-
		501(c) of the Code (othe	r than se	ction 50	01(c)(3) or	ganızatıons) (or in section	527, re	lating to politic	al		Yes	No
_		tions?	dation to		hawtahla ay	vamnt arannı	intion of						
		s from the reporting four h									1a(1)		No
		erassets									1a(1)		No
• • •		ansactions									14(2)		NO
		es of assets to a noncha	ritable ev	emnt or	raanization						1h(1)		No
		chases of assets from a									1b(2)		No
		tal of facilities, equipme									1b(3)		No
		mbursement arrangemen									1b(4)		No
		ns or loan guarantees.									1b(5)		No
		rmance of services or m									1b(6)		No
		of facilities, equipment, i									—		No
d If th	he an	swer to any of the above	ıs "Yes,"	comple	ete the follo	owing schedul	e Column (I	b) shoul	ld always show	the fair ma	rket va	lue	
		ods, other assets, or se ansaction or sharing arra											
III a		ansaction or snaring and		, 5110 1	iii colulliii (u) the value t		, other a	ssets, or service	es receive	au		
(a) Line	: No	(b) Amount involved	(c) Name	of nonch	narıtable exen	npt organization	(d) Desc	cription of	transfers, transact	ions, and sha	ring arra	ngemer	its
		undation directly or indi d in section 501(c) of th									. □Ye		No
		complete the following s	•	Jener en	an section	301(0)(3)) 01	III Section 5	<i>527</i> •			.,	.5 ,	110
	,	(a) Name of organization			(b)	Type of organiz	ation		(c) Descrip	tion of relati	onship		
		der penalties of perjury,											
		e best of my knowledge a ormation of which prepar				and complete	Declaratio	n of pre	parer (other tha	n taxpaye	r) is bas	sed on	all
Sign		ormation of which prepar	ci nas an	y KIIOWI	cuge					May t	he IRS dı	scuss th	IS
Here	l k				_	2016-03-24	\			return with t	he prepai	rer show	/n
	.	Signature of officer or to	rustee			Date	Tit	tle		below			
				Ι			Tosta	Τ,	Charle of calf	PTIN	ristr) / J*	resi r	10
		Print/Type preparer's Louise A Jackson	name	Prepa	rer's Sıgna	ture	Date		Check if self- employed •		010653	350	
		Louise A Jacksoil							•				
Paid		Firm's name 🕨		ı				I	Firm's EIN 🕨	1			
Prepa	areı												
Use		Firm's address 🕨											
Only		PO Box 10032 Toledo	o, OH 43	69900	32			-	Phone no (419)241-600	0 0		

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	Expense account, (e) other allowances
Marianna Baker	Trustee	0		
4895 Monroe St Suite 103 Toledo, OH 43623	0 25			
Ned Hein	Trustee & Chrm	0		
4895 Monroe St Suite 103 Toledo, OH 43623	0 50			
Nancy Hartzell	Trustee	0		
4895 Monroe St Suite 103 Toledo, OH 43623	0 25			
Mıchael Kastner	Trustee	0		
4895 Monroe St Suite 103 Toledo, OH 43623	0 25			
Kevin Knierim	Trustee	0		
4895 Monroe St Suite 103 Toledo, OH 43623	0 25			
Matt Maley	Trustee	0		
4895 Monroe St Suite 103 Toledo, OH 43623	0 25			
Andrew Westmeyer	Trustee	0		
4895 Monroe St Suite 103 Toledo, OH 43623	0 25			
Gail Argentine	Trustee	0		
4895 Monroe St Suite 103 Toledo, OH 43623	0 25			
Beverly Norwalk	соо	0		
4895 Monroe St Suite 103 Toledo, OH 43623	0 50			

TY 2015 Explanation of Non-Filing with Attorney General Statement

Name: Willmarth and Marion Paine Scholarship

Fund

EIN: 34-1365829

Software ID: 15000324

Software Version: 2015v2.0

Statement: State Atty General requires filing of its own financial reporting form

rather than copy of IRS return.

efile GRAPHIC print - DO NOT PROCESS | As Filed Data - DLN: 93491084003046

TY 2015 Other Decreases Schedule

Name: Willmarth and Marion Paine Scholarship

Fund

EIN: 34-1365829

Software ID: 15000324

Description	Amount
Corporate adjustments	456

TY 2015 Other Expenses Schedule

Name: Willmarth and Marion Paine Scholarship

Fund

EIN: 34-1365829

Software ID: 15000324

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Bank Fees	5			5
Dues	325			325
O hıo Atty Genl fee	200			200
Tax return preparation fee	2,615			2,615

TY 2015 Other Professional Fees Schedule

Name: Willmarth and Marion Paine Scholarship

Fund

EIN: 34-1365829

Software ID: 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Inv mgr fees	6,645	6,645	0	0

TY 2015 Taxes Schedule

Name: Willmarth and Marion Paine Scholarship

Fund

EIN: 34-1365829

Software ID: 15000324

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
2015 estimated excise taxes	750			
Excise taxes balance due for 2014	395			
Foreign tax w/h	93	93		

WILLMARTH & MARION PAINE SCHOLARSHIP FUND

3480362

TOLEDO, OHIO EIN 34-1365829 2015 FORM 990-PF - PART II - SUMMARY OF ATTACHED ACCOUNT STATEMENTS

	•	12/31/2015 BOOK VALUES	OOK VALUES			12/31/2015 FA	12/31/2015 FAIR MARKET VALUES	ALUES
	· 	Helms Fund	Paine Fund			Helms Fund	Paine Fund	
	Chkg 400	0 018981 1234	Chkg 400 018981 123400 018982 123	TOTAL	Chkg 40	Chkg 400 018981 123400 018982 123	00 018982 123	TOTAL
1 Cash - noninterest bearing	197	739	3,687	4,623	197	739	3,687	4,623
2 Savings & temporary cash investment								
10b Investments - Corporate Stock								
Common Stock		0	189,672	189,672		0	292,678	292,678
Exchanged-traded & closed end funds		32,145	57,932	90,077		39,706	70,863	110,569
Other Mutual Funds		42,370	191,327	233,697		45,600	191,722	237,322
Total Investments		74,515	438,931	513,446		85,306	555,263	640,569
10c Investments - Corporate Bonds		0	96,459	96,459		0	104,293	104,293
COLUMN TOTALS	197	75,254	539,077	614,528	197	86,045	663,243	749,485
s in Net Assets or Fund	Balances			, ,				
1 Total net assets BOY				678,019				
2 Enter amt from Part I, line 27a				(1,841)				
3 Other increase not in line 2								
4 Add lines 1, 2 and 3				614,984				
5 Decreases not included in line 2: corporate a	adjustments	S		(456)				
6 Total assets EOY				614,528				

Page 7 of 22

CLIENT STATEMENT | For the Period December 1-31, 2015

Portfolio Management Active Assets Account 400-018981-123

TOLEDO DENTAL SOCIETY RW HELMS SCHOLARSHIP FUND

Investment Advisory Account

INTERESTED PARTY COPY

Investment Objectives † Capital Appreciation, Income Account Detail

I Inform us if your investment objectives, as defined in the Expanded Disclosures, change

HOLDINGS

This section reflects positions purchased/sold on a trade date basis. "Market Value" and "Unrealized Gam/(Loss)" may not reflect the value that could be obtained in the market. Fixed Income securities are sorted which of principal or capital gains which could overstate such estimates, and d) for securities that have a defined maturity date within the next 12 months, is reflected only through maturity date. Actual contingent income feature (e.g., Range Accrual Notes or Contingent Income Notes) are estimates and assume specified accrual conditions are met during the relevant period and payment in full of all contingent by maturity or pre-refunding date, and alphabetically within date. Estimated Annual Income a) is calculated on a pre-tax basis, b) does not include any reduction for applicable non-US withholding taxes, c) may nnterest. For Floating Rate Securities, the accrued interest, annual income and current yield are estimates based on the current floating coupon rate and may not reflect historic rates within the accrual period or yield may be lower or higher than the estimates. Current yield reflects the income generated by an investment, and does not reflect changes in its price. Structured Investments, identified on the Position Description Details line as "Asset Class" Struct liny," may appear in various statement product categories. When displayed, the accrued interest, annual income and current yield for those with a

CASH, BANK DEPOSIT PROGRAM AND MONEY MARKET FUNDS

Cash, Bank Deposit Program, and Money Market Funds are generally displayed on a settlement date basis. You have the right to instruct us to Inquidate your balance(s) or shares of any money market rund balance(s) at any time and have the proceeds of such Inquidation remitted to you. Estimated Annual Income, Accrued Interest, and APY% will only be displayed for fully settled positions

Bank Deposits are held at Morgan Stanley Bank, N A. andjor Morgan Stanley Private Bank, National Association, affiliates of Morgan Stanley Smith Barney LLC and each a national bank and FDIC member

EXCHANGE-TRADED & CLOSED-END FUNDS

Global Investment Manager Analysis (GIMA) status codes (FL, AL or NL), may be shown for certain exchange-traded funds and are not guarantees of performance. Refer to "GIMA Status in Investment Advisory Programs" in the June or December statement for a description of these status codes

							Unrealized		Current
Security Description	Trade Date	Quantity	Unit Cost	Share Price	Total Cost	Market Value	Gain/(Loss)	Est Ann Income	% plai
ISHARES COHEN&STEERS REIT ETF (ICF)	2/11/11	7 000	\$69 830	\$99 240	\$488 81	\$694 68	\$205 87 LT		
	6/3/14	4 000	87 610	99 240	350 44	396 96	46 52 LT		
	Total	11 000			839 25	1,091 64	252 39 LT	36 00	36 00 3 29
GIMA Status AL. Next Dividend Payable 03/2016 Asset Class Alt	Class Alt				,		1	1	
ISHARES CORE U S AGGREGATE (AGG) GIMA Status AL. Next Dividend Payable 01/2016. Asset Class FI & Pref	10/26/07 Slass FI & Pref	54 000	100 770	108 010	5 441 58	5,832 54	390 96 LT	134 00	2 29
ISHARES MICRO-CAP ETF (IWC)	2/11/11	20 000	51 360	72 100	1.027 20	1,442.00	414 80 LT	22 00	1 52
Next Dividend Payable 03/2016, Asset Class Equities		1	;			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1

CLIENT STATEMENT | For the Period December 1-31, 2015

Page 8 of 22

Account Detail		Portfolio Manag	ement Active	Portfolio Management Active Assets Account 400-018981-123	TOLEDO DENTAL SOCIETY RW HELMS SCHOLARSHIF	TOLEDO DENTAL SOCIETY RW HELMS SCHOLARSHIP FUND			
					INTERESTED PARTY COPY	PARTY COPY			
Security Description	Trade Date	Quantity	Unit Cost	Share Price	Total Cost	Market Value	Unrealized Gain/(Loss)	Est Ann Income	Current Yield %
ISHARES RUSSELL 1000 GRW ETF (IWF)	10/26/07	94 000	62 658	99 480	5 889 85	9,351 12	3,461 27 LT		
	2/11/11	2 000	60 740	99 480	121 48	198 96	77 48 LT		
	7/8/13	3 000	74 330	99 480	222 99	298 44	75 45 LT		
	Total	000 66			6 234 32	9,848.52	3,614 20 LT	135 00	137
GIMA Status AL. Next Dividend Payable 03/2016, Asset Class Equities	ss Equities								
ISHARES RUSSELL 1000 VALUE ETF (IWD)	10/26/07	63 000	84 778	97 860	5 341 01	6,165 18	824 I7 LT		1
	9/24/09	18 000	55 030	97 860	990 54	1,761 48	770 94 LT		
	6/3/10	2 000	57 700	97 860	288 50	489 30	200 80 LT		
	2/11/11	2 000	68 360	97 860	341 80	489 30	147 50 LT		
	7/8/13	2 000	85 040	098 26	170 08	195 72	25 64 LT		
	Total	93 000			7.131 93	9,100 98	1 969 05 LT	225 00	2 47
GIMA Status AL, Next Dividend Payable 03/2016, Asset Class, Equities	ss. Equities	1	1 1 1 1 1 1	1					
ISHARES RUSSELL 2000 ETF (IWM)	9/13/05	9 000	67 429	112 620	404 57	675 72	271 15 LT 2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	! ! !
	10/26/07	3 000	81 050	112 620	243 15	337 86	94 71 LT		
	2/11/11	4 000	81 650	112 620	326 60	450 48	123 88 LT		
	Total	13 000			97432	1,464 06	489 74 LT	23 00	1 57
GIMA Status AL. Next Dividend Payable 03/2016, Asset Class Equifies	ss Equities	1	1	,					
ISHARES RUSSELL MID-CAP ETF (IWR)	10/26/07	10 000	108 310	160 180	1 083 10	1,60180	518 70 LT	25 00	1 56
GIMA Status AL, Next Dividend Payable 03/2016, Asset Class Equities	ss Equities	1	1		1	1	1	1	1
VANGUARD INTL EQUITY INDEX FD (VEU)	2/18/15	20 000	49 147	43 410	982 94	868 20	(114 74) ST		
	4/22/15	39 000	51 167	43 410	1 995 52	1 692 99	(302 53) ST		
	9/24/15	11 000	42 217	43 410	464 39	477 51	13 12 ST		
	Total	70 000			3 442 85	3,038 70	(404 15) ST	00 06	2 96
GIMA Status AL, Next Dividend Payable 03/2016, Asset Class Equities	ss Equities	11 11 11 11 11 11 11 11 11 11 11 11 11	1						
VANGUARD REIT ETF (VNQ) GIMA Status AL, Next Dividend Payable 03/2016, Asset Class Alt	6/3/14 ss <i>Att</i>	13 000	74 044	79 730	962 57	1,036.49	73 92 LT R	41 00	3 95
VANGUARD TOTAL BOND MARKET (BND) GIMA Status AL. Next Dividend Payable 01/2016 Asset Class FI & Pref	4/17/09 ss FI& Pref	000 9	77 040	80 760	5.007 60	5,249 40	541 80 רב	130 00	2 47
	Percentage				Total	Markot Volus	Unrealized	omeer! and to	Current
	OI HOIGHIES				10.00 10.00	Marker value	Odill/(LUSS)	Est Allit Illcollie	ov Diali
EXCHANGE-TRADED & CLOSED-END FUNDS	46 15%				\$32,144 72	\$39,706 13	\$7,965 56 LT (404 15) ST	\$861 00	2.17%



CLIENT STATEMENT | For the Period December 1-31, 2015

Account Detail

Portfolio Management Active Assets Account 400-018981-123

TOLEDO DENTAL SOCIETY RW HELMS SCHOLARSHIP FUND

INTERESTED PARTY COPY

"Total Purchases vs. Market Value" is provided to assist you in comparing your "Total Purchases," excluding reinvested distributions, with the current value of the mutual fund positions in your account. **MUTUAL FUNDS**

"Cumulative Cash Distributions" when shown, may reflect distributions on shares no longer neld in the account It may not reflect all distributions received in cash, due to but not limited to investments made prior to addition of this information on statements, securities transfers, timing of recent distributions, and certain adjustments made in your account

purposes only and does not reflect your total unrealized gain or loss nor should it be used for tax purposes Global Investment Manager Analysis (GIMA) status codes (FL, AL or NL), may be shown for certain mutual funds and are not guarantees of performance. Refer to "GIMA Status in Investment Advisory Programs" in the June or December statement for a description of these codes Net Value Increase (Decrease) reflects the difference between your total purchases, and the sum of the current value of the fund s shares, and cash distributions shown. This calculation is for informational

							Unrealized		Current
Security Description	Trade Date	Quantity	Unit Cost	Share Price	Total Cost	Market Value	Gain/(Loss)	Est Ann Income	Yield %
AB GLOBAL BOND ADV (ANAYX)	9/24/09	164 886	\$7 840	\$8 150	\$1,292 71	\$1 343 81	\$51 10 LT		
	6/16/11	202 000	8 450	8 150	1 706 90	1 646 29	(60 61) LT		
	Purchases	366 886			2 999 61	2,990.10	(9 51) LT		
Long Term Reinvestments		87 099			732 28	709 85	(22 45) LT		
Short Term Renivestments		9 288	,		78 10	75 69	(2 41) ST		
	Total	463 273			3 809 99	3,775 67	(31 94) LT (2 41) ST	00 /3	2 30
Total Purchases vs Market Value Completive Cash Distributions					2 999 61	3 775 67			
Net Value Increase/(Decrease)						851 39			
GIMA Status AL, Dividend Cash Capital Gains Reinvest, Asset Class FI & Pref	set Class FI & Pref								
AMERICAN BD FD OF AMERICA F2 (ABNFX)	6/16/11	260 692	12 410	12,590	3 235 19	3 282 11	46 92 LT		
	Purchases	260 692			3 235 19	3.282 11	46 92 LT		
Long Term Reinvestments		27 861			352 83	350 77	(2 06) LT		
		5 140			65 98	64 71	(127) ST		
	Total	293 693			3 654 00	3,697.59	44 86 LT	81 00	2 19
Total Durchases ve Market Value					3 235 19	2, 697.59	10 (17 1)		
Cumulative Cash Distributions					0	14 35			
Net Value Increase/(Decrease)						476 75			
Dividend Cash, Capital Gains Reinvest Asset Class FI & Pref	ef								
AMERICAN EUROPACIFIC GRW F2 (AEPFX)	3/14/08	27 975	45 748	45 250	1 279 79	1 265 86	17 (13 93) 11		
	6/3/10	12 910	34 761	45 250	448 76	584 17	135 41 LT		
	Purchases	40 885			1 728 55	1,850 03	121 48 LT		
Long Term Reinvestments		10 372			358 46	469 33	110 87 LT		
Short Term Reinvestments		0 662			30 24	29 95	(0 29) ST		
	Total	51 919			2 117 25	2,349 33	232 35 LT (0 29) ST	48 00	2 04

CLIENT STATEMENT | For the Period December 1-31, 2015

Page 10 of 22

Account Detail		Portfolio Manag	ement Active 4(Portfolio Management Active Assets Account 400-018981-123	TOLEDO DEN RW HELMS S	TOLEDO DENTAL SOCIETY RW HELMS SCHOLARSHIP FUND	0		
					INTERESTED PARTY COPY	PARTY COPY			
Security Description	Trade Date	Quantity	Unit Cost	Share Price	Total Cost	Market Value	Unrealized Gain/(Loss)	Current Est Ann Income Yield %	せゃ
Total Purchases vs Market Value Cumulative Cash Distributions Net Value Increase/(Decrease)					1,728 55	2 349 33 47 35 668 13		i	
Dividend Cash, Capital Gains Reinvest, Asset Class Equities									
AMERICAN GW FD OF AMERICA F2 (GFFFX)	3/14/08	174 203	30 851	41 210	5,374.32	7 178 91	1,804 59 LT		,
	2/11/11	5 919	31 860	41 210	188 58	243 92	55 34 LT		
	7/8/13	5 985	39 228	41 210	234 78	246 64	11 86 LT		
	12/10/15	44 248	45 200	41 210	2 000 00	1 823 46	(176 54) ST		
	Purchases	230 355			7.797 68	9,492 93	1,871 79 LT		
							(176 54) ST		
Long Term Reinvestments		47 945			1 859 82	1 975 81	115 99 LT		
Short Term Reinvestments		23 001			943 72	947 87	4 15 ST		
	Total	301 301			10 601 22	12,416 61	1,987 78 LT	111 00 0 89	39
Total Purchases vs Market Value					7 797 68	12,416 61			
Cumulative Cash Distributions						103 05			
Net Value Increase/(Decrease) Dividend Cash, Capital Gains Reinvest, Asset Class- Equities						4,721 98			
AMERICAN SMALL CAP WORLD F2 (SMCFX)	6/3/10	13 534	32 156	44 060	435 20	596 30	161 10 LT	1	k †
	2/11/11	11 808	39 228	44 960	463 20	520 26	57 06 LT		
	Purchases	25 342			898 40	1,116.56	218 16 LT		
Long Term Reinvestments		5 146			232 58	226 73	(5 85)		
Short Term Reinvestments		1 974			86 31	86 97	0 66 ST		
	Total	32 462			1,217 29	1,430 28	212 31 LT	ļ	ı
Total Durchages us Market Value					00 000	1 420 28	15 gg n		
Net Value Increase/(Decrease)					030 40	531.88			
Dividend Cash Capital Gains Reinvest, Asset Class Equities	1								
DOUBLELINE TOTAL RETURN ! (DBLTX)	10/31/14	455 789	10 970	10 780	5,000 01	4,913 41	(86 60) 17		; !
	Purchases	455 789			5 000 01	4,91341	(86 60) 11		
Long Term Reinvestments		1 583			17 43	17 06	(0.37) LT		
Short Term Reinvestments		16 002			175 55	172 50	(3 05) ST		
	Total	473 374			5,192 99	5,102 97	(86 97) LT (3 05) ST	212 00 4 15	5

Page 11 of 22

CLIENT STATEMENT | For the Period December 1-31, 2015

Current 0 75 5 49 Est Ann Income Yield % 7 00 135 00 12 32 LT (22 13) ST (271 66) LT (7 55) ST 12 56 LT (5 39) LT (0 24) LT 7 55) ST 191 90 LT (22 85) LT (22 13) ST (22 13) ST (206 64) LT (258 78) LT (12 88) LT 191 90 LT (52 14) LT Unrealized Gain/(Loss) TOLEDO DENTAL SOCIETY RW HELMS SCHOLARSHIP FUND 33 38 136 34 551 45 1 796 76 447 86 Market Value 94 61 277 87 923.93 5 24 2,244.62 2.458 12 929 17 (433)11487 98 63 2,458 12 25 92 (1936)1 067 50 160 82 929.17 1,067.50 INTERESTED PARTY COPY Total Cost 5,000 01 533 50 100 00 300 00 5 48 933 50 2 003 40 933 50 938 98 500 00 2 503 40 127 75 2 503 40 106 18 2 737 33 875 60 875 60 183 67 Portfolio Management Active Assets Account 400-018981-123 7 130 7 130 Share Price 20 280 Unit Cost 7 950 7 960 1069011 680 11 930 16 634 Quantity 49 905 25 147 83 614 252 000 8 562 0 474 84 088 62 814 314814 16 111 13 833 52 638 7 930 Purchases Trade Date Purchases Purchases 12/19/14 12/15/11 6/16/11 4/22/15 8/13/13 6/3/14 Total Total Dividend Cash Capital Gains Reinvest Asset Class FI & Pref Dividend Cash Capital Gains Reinvest, Asset Class FI & Pref Dividend Cash, Capital Gains Reinvest, Asset Class All **Fotal Purchases vs Market Value** Total Purchases vs Market Value Total Purchases vs Market Value Cumulative Cash Distributions Net Value Increase/(Decrease) Net Value Increase/(Decrease) **Cumulative Cash Distributions** Net Value Increase/(Decrease) HATTERAS ALPHA HEDGED STR INST (ALPIX) Short Term Reinvestments Long Term Reinvestments Long Term Reinvestments Long Term Reinvestments INVESCO FLOATING RATE Y (AFRYX) Account Detail IVY MID CAP GROWTH I (IYMIX) Security Description

875 60

GIMA Status FL, Dividend Cash, Capital Gains Reinvest, Asset Class Equities

Total Purchases vs Market Value

Short Term Reinvestments

Net Value Increase/(Decrease)

0 05 ST

130 66

130 61

6 443

Total

Page 12 of 22

Morgan Stanley

TOLEDO DENTAL SOCIETY
RW HELMS SCHOLARSHIP FUND

Portfolio Management Active Assets Account 400-018981-123

CLIENT STATEMENT | For the Period December 1-31, 2015

Account Detail

					INTERESTED PARTY COPY	PARTY COPY		
Security Description	Trade Date	Quantity	Unit Cost	Share Price	Total Cost	Market Value	Unrealized Gain/(Loss)	Current Est Ann Income Yield %
T ROWE PRICE EQI-INC (PRFDX)	10/28/10	132 597	22 044	28 460	2 922 94	3,773,71	850 77 LT	
	2/11/11	119 093	25 110	28 460	2.990 40	3,389 39	398 99 LT	
	7/8/13	7 955	30 522	28 460	242 80	226 40	(16 40) LT	
	9/24/15	17 427	28 691	28 460	499 99	495 97	(4 02) ST	
	Purchases	277 072			6,656 13	7,885 47	1,233 36 LT	
							(4 02) ST	
Long Term Reinvestments		44 364			1,335 40	1 262 60	(72 80) LT	
Short Term Renvestments		21 961			626 33	625 01	(1 32) ST	
	Total	343 397			8 617 86	9,773 08	1,160 56 LT (5 34) ST	216 00 2 21
Total Purchases vs Market Value					6 656 13	9 773 08		
Cumulative Cash Distributions						61 97		
Net Value Increase/(Decrease) Dwdend Cash <i>Cantal Gans Benwest Asset Class Fourtes</i>						3,1/8 92		
THORNBURG INTL VALUE I (TGVIX)	6/3/10	67 451	23 810	24 720	1 606 00	1 667 38	61 38 LT	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	Purchases	67 451			1 606 00	1,667 38	61 38 LT	
Long Term Reinvestments		11 535			322 01	285 14	(36 87) LT	
Short Term Reinvestments		14 375			365 79	355 34	(10 45) ST	
	Total	93 361			2 293 80	2,307 88	24 51 LT (10 45) ST	32 00 1 38
Total Purchases vs Market Value Cumulative Cash Distributions Net Value Increase/(Decrease)					1 606 00	2 307 88 1 71 703 59		
GIMA Status AL Dividend Cash, Capital Gains Remvest, Asset Class- Equities	Jass-Equities		1	1		;	1	
	Percentage of Holdings				Total Cost	Market Value	Unrealized Gain/(Loss)	Current Est Ann Income Yield %
MUTUAL FUNDS	23 00%				\$42,370 59	\$45,599 68	\$3,453.17 LT \$(224.17) ST	\$929.00 2 04%



Page 13 of 22

Account Detail

CLIENT STATEMENT | For the Period December 1-31, 2015

TOLEDO DENTAL SOCIETY
RW HELMS SCHOLARSHIP FUND Portfolio Management Active Assets Account 400-018981-123

INTERESTED PARTY COPY

	Percentage of Holdings	Total Cost	Market Value	Unrealized Gain/(Loss)	Est Ann Income Current Accrued Interest Yield %	Current Yield %
TOTAL MARKET VALUE		\$74,515 31	\$86,04512	\$11,418 73 LT \$(628 32) ST	\$1.790.00	2.08%
TOTAL VALUE (includes accrued interest)	100 00%		\$86,045 12			

0

You, or a third party, have provided the transaction details for this position
 The cost basis for this tax lot was adjusted due to a reclassification of income
 Unrealized Gain/(Loss) totals only reflect positions that have both cost basis and market value information available. Cash, MMF, Deposits and positions stating 'Please Provide' are not included.

ALLOCATION OF ASSETS

)))							
			Fixed Income &		Annuibes &	Structured	
	Cash	Equibes	Preferred Securities	Alternatives	Insurance	Investments	Other
Cash BDP MMFs	\$73931	1	l		1	I	I
ETFS & CEFS	1	\$26 496 06	\$11 081 94	\$2 128 13	I	I	I
Mutual Funds	_	29 636 16	15 034 35	929 17	Ι	!	١
TOTAL ALLOCATION OF ASSETS	\$739.31	\$56,132.22	\$26,116.29	\$3,057.30	l	I	1

ACTIVITY

CASH FLOW ACTIVITY BY DATE

Transaction	Transaction Settlement	ıt t					
Date	Date	Activity Type	Description	Comments	Quantity	Price	Credits/(Debits)
11/30	11/30	Dividend	DOUBLELINE TOTAL RETURN !				\$1616
			DIV PAYMENT				
11/30	11/30	Dividena	INVESSO F_DATING RATE Y				1435
			DIV PAVMENT				
11/30	11/30	Dividena	AMERICAN BD FD OF AMERICA F2				7.31
			DIV PAYMENT				
11/30	11/30	Dividend	AB GLOBAL BONC ADV				ເວີ ວ
			DIV PAYMENT				
12.7	12.7	Dividend	SHARES CORE U.S. AGGREGATE				16.67
127	12.7	Dividend	VANGUARD TOTAL BOND MARKET				30.85
12/9	12/9	Short Term Capital Gain	AB GLOBAL BOND ADV				2 SC
12/9	12/9	Dividend Reinvestment	AB GLOSAL BOND ADV	REINVESTMENT	0 306	\$ 1800	(2.50)
12/10	12/10	Long Term Capital Gain	IVY MID CAP 3ROWTH I				111 88
12/10	12/15	Soid	LAZARD ENERGING MKTS EQ I		73 426	13 8500	10.695
12/10	12/15	Sold	VANGUARD FTSE EMERGING WARKETS	RKETS ACTED AS AGENT	000.18	32 6728	1 012 84