

Form 990-PF

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 www.irs.gov/form990pf.

2015

Open to Public
Inspection

For calendar year 2015, or tax year beginning 04-01-2015 , and ending 03-31-2016

Name of foundation THE CHELSEA HEALTH AND WELLNESS FOUNDATION		A Employer identification number 26-3040367	
Number and street (or P O box number if mail is not delivered to street address) 14800 E OLD US 12		B Telephone number (see instructions) (734) 433-4599	
C If exemption application is pending, check here <input checked="" type="checkbox"/>			
D 1. Foreign organizations, check here <input checked="" type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input checked="" type="checkbox"/>			
E If private foundation status was terminated under section 507(b)(1)(A), check here <input checked="" type="checkbox"/>			
F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input checked="" type="checkbox"/>			
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input checked="" type="checkbox"/> Address change <input type="checkbox"/> Name change		H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation	
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 47,100,107		J Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) <i>(Part I, column (d) must be on cash basis.)</i>	

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	267	267		
	4 Dividends and interest from securities	499,891	499,891		
	5a Gross rents	339,599	339,599		
	b Net rental income or (loss) <u>256,729</u>				
	6a Net gain or (loss) from sale of assets not on line 10	35,541			
	b Gross sales price for all assets on line 6a <u>26,776,351</u>				
	7 Capital gain net income (from Part IV, line 2)		2,198,919		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances <u>104,547</u>				
b Less Cost of goods sold <u>63,876</u>					
c Gross profit or (loss) (attach schedule) <u>40,671</u>	40,671	40,671			
11 Other income (attach schedule)	4,395,963	-29,041	4,420,664		
12 Total Add lines 1 through 11	5,311,932	3,009,635	4,461,335		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	194,745	76,718	0	118,027
	14 Other employee salaries and wages	2,849,561	46,886	2,689,514	113,161
	15 Pension plans, employee benefits	44,141	9,095	0	35,046
	16a Legal fees (attach schedule) <u>1,152,097</u>	1,152,097	0	450	1,151,647
	b Accounting fees (attach schedule) <u>53,885</u>	53,885	0	0	53,885
	c Other professional fees (attach schedule) <u>432,475</u>	432,475	0	332,640	144,893
	17 Interest <u>311,971</u>	311,971	0	311,971	0
	18 Taxes (attach schedule) (see instructions) <u>5,721</u>	5,721	0	0	0
	19 Depreciation (attach schedule) and depletion <u>969,032</u>	969,032	0	249,911	
	20 Occupancy <u>352,809</u>	352,809	0	25,122	327,645
	21 Travel, conferences, and meetings. <u>23,874</u>	23,874	0	11,306	12,718
	22 Printing and publications. <u>1,704</u>	1,704	0	0	1,704
	23 Other expenses (attach schedule) <u>1,558,726</u>	1,558,726	231,120	1,127,784	295,910
	24 Total operating and administrative expenses. Add lines 13 through 23	7,950,741	363,819	4,748,698	2,254,636
25 Contributions, gifts, grants paid <u>339,187</u>	339,187			463,707	
26 Total expenses and disbursements. Add lines 24 and 25	8,289,928	363,819	4,748,698	2,718,343	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	-2,977,996				
b Net investment income (if negative, enter -0-)		2,645,816			
c Adjusted net income(if negative, enter -0-)		0			

Assets	Part II Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		
		End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash—non-interest-bearing	17,224	6,458	6,458
2	Savings and temporary cash investments	661,011	446,897	446,897
3	Accounts receivable ► 45,511			
	Less allowance for doubtful accounts ► 1,834	74,573	43,677	43,677
4	Pledges receivable ►			
	Less allowance for doubtful accounts ►			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
7	Other notes and loans receivable (attach schedule) ►			
	Less allowance for doubtful accounts ►			
8	Inventories for sale or use	18,594	21,465	21,465
9	Prepaid expenses and deferred charges	182,304	4,631	4,631
10a	Investments—U S and state government obligations (attach schedule)			
b	Investments—corporate stock (attach schedule)			
c	Investments—corporate bonds (attach schedule)			
11	Investments—land, buildings, and equipment basis ►			
	Less accumulated depreciation (attach schedule) ►			
12	Investments—mortgage loans			
13	Investments—other (attach schedule)	27,952,665	24,544,087	24,544,087
14	Land, buildings, and equipment basis ► 26,650,614			
	Less accumulated depreciation (attach schedule) ► 4,617,722	22,838,267	22,032,892	22,032,892
15	Other assets (describe ►)			
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	51,744,638	47,100,107	47,100,107
17	Accounts payable and accrued expenses	349,655	515,018	
18	Grants payable	331,490	220,915	
19	Deferred revenue	398,194	382,119	
20	Loans from officers, directors, trustees, and other disqualified persons			
21	Mortgages and other notes payable (attach schedule)	11,408,471	10,895,086	
22	Other liabilities (describe ►)	195,790	226,073	
23	Total liabilities (add lines 17 through 22)	12,683,600	12,239,211	
Liabilities	Foundations that follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
24	Unrestricted			
25	Temporarily restricted			
26	Permanently restricted			
Net Assets or Fund Balances	Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 31.			
27	Capital stock, trust principal, or current funds	0	0	
28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
29	Retained earnings, accumulated income, endowment, or other funds	39,061,038	34,860,896	
30	Total net assets or fund balances (see instructions)	39,061,038	34,860,896	
31	Total liabilities and net assets/fund balances (see instructions)	51,744,638	47,100,107	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	39,061,038
2	Enter amount from Part I, line 27a	2	-2,977,996
3	Other increases not included in line 2 (itemize) ►	3	0
4	Add lines 1, 2, and 3	4	36,083,042
5	Decreases not included in line 2 (itemize) ►	5	1,222,146
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	34,860,896

Part IV Capital Gains and Losses for Tax on Investment Income

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 (b) P—Purchase D—Donation	Date acquired (c) (mo, day, yr)	Date sold (d) (mo, day, yr)
1a See Additional Data Table				
b				
c				
d				
e				
(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)	
a See Additional Data Table				
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) FMV as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any		
a See Additional Data Table				
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		2	2,198,919
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)				
If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8				3

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

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?
If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

Yes No

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	2,074,568	30,616,055	0 067761
2013	15,860,549	31,385,034	0 505354
2012	1,769,220	30,639,829	0 057742
2011	1,297,445	30,267,005	0 042867
2010	1,225,970	29,372,688	0 041738
2 Total of line 1, column (d).			2 0 715462
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 143092
4 Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.			4 27,031,264
5 Multiply line 4 by line 3.			5 3,867,958
6 Enter 1% of net investment income (1% of Part I, line 27b).			6 26,458
7 Add lines 5 and 6.			7 3,894,416
8 Enter qualifying distributions from Part XII, line 4.			8 2,885,243

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1	1	52,916
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 here <input type="checkbox"/> and enter 1% of Part I, line 27b	2	0
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	3	52,916
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	0
3	Add lines 1 and 2.	5	52,916
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		
6	Credits/Payments		
a	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	60,313
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	60,313
8	Enter any penalty for underpayment of estimated tax Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	419
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	6,978
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ►	11	0

Part VII-A Statements Regarding Activities

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	<input type="checkbox"/>	Yes	No
1b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?	<input type="checkbox"/>	Yes	No
	<i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.</i>			
1c	Did the foundation file Form 1120-POL for this year?	<input type="checkbox"/>	Yes	No
1d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ► \$ _____ 0 (2) On foundation managers ► \$ _____ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	<input type="checkbox"/>	Yes	No
	<i>If "Yes," attach a detailed description of the activities.</i>			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	<input type="checkbox"/>	Yes	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	<input type="checkbox"/>	Yes	
4b	If "Yes," has it filed a tax return on Form 990-T for this year?	<input type="checkbox"/>	Yes	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	<input type="checkbox"/>	Yes	No
	<i>If "Yes," attach the statement required by General Instruction T.</i>			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	● By language in the governing instrument, or			
	● By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.	<input type="checkbox"/>	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	► MI			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	<input type="checkbox"/>	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV	<input type="checkbox"/>	Yes	No
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses.	<input type="checkbox"/>	Yes	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ►WWW 5HEALTHYTOWNS.ORG	13	Yes	
14	The books are in care of ►AMY HEYDLAUFF Telephone no ►(734) 433-4599 Located at ►14800 E OLD US 12 CHELSEA MI ZIP+4 ►48118			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here ► <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year ► 15			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 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 ►	16	Yes	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	(6) Agree to pay money or property to a government official? (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)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	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)? Organizations relying on a current notice regarding disaster assistance check here. ► <input type="checkbox"/>	1b	No
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))		
a	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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
	If "Yes," list the years ► 20____, 20____, 20____, 20____		
b	Are there any years listed in 2a for which the foundation is 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____, 20____		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b	If "Yes," did it have excess business holdings in 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	
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	No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). Yes No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? Yes No

b If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here. ►

5b

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No
If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?
If "Yes" to 6b, file Form 8870.

6b

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
MATT PEGOUSKIE 14800 OLD US 12 CHELSEA, MI 48118	COMMUNITY RESOURCE M 40 00	57,449	1,723	0
Total number of other employees paid over \$50,000.				0

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

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE"

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
SCHIFF HARDIN LLP	ATTORNEY FEES	1,105,00
350 S MAIN STREET SUITE 210 ANN ARBOR, MI 48104		
RUSSELL INVESTMENTS	INVESTMENT MANAGEMENT FEES	208,400
1301 SECOND AVENUE SEATTLE, WA 98101		

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

1 OVERSIGHT OF THE CHELSEA, DEXTER, MANCHESTER & STOCKBRIDGE WELLNESS CENTERS WHICH SERVE APPROXIMATELY 6,700 SERVICE AREA RESIDENTS THE WELLNESS CENTERS ARE MEDICALLY INTEGRATED WELLNESS FACILITIES THAT INCLUDE ORTHOPEDIC AND PHYSICAL THERAPY SERVICES OPEN TO THE PUBLIC, THERAPY POOLS AND WORKOUT EQUIPMENT THEY ALSO PROVIDE FREE CLASSES TO DEVELOPMENTALLY DISABLED ADULTS AND OTHER COMMUNITY MEMBERS PLUS FEE BASED CLASSES TO ANYONE IN THE COMMUNITY HEALTH LECTURES ARE FREE FOR THE COMMUNITY CHELSEA WELLNESS CENTER IS THE FIRST CERTIFIED MEDICAL INTEGRATION CENTER IN MI 4,519,591

2 ESTABLISHED FIVE COMMUNITIES WELLNESS COALITIONS OUR TECHNICAL SUPPORT INCLUDES IDENTIFYING LOCAL/STATE & NATIONAL RESOURCES, IDENTIFYING PREVENTION BEST PRACTICES, PLANNING & FUNDING ACTIVITIES & MEETINGS, ARCHIVING DOCUMENTS, DEVELOPING MARKETING & EDUCATIONAL MATERIAL, PUBLICITY, EDUCATING ON THE ROLE OF COALITIONS & PROJECT DEVELOPMENT, HOSTING WORKSHOPS, PROBLEM SOLVING AND GENERAL SUPPORT OF VOLUNTEERS (COALITION MEMBERS) FUNDS ARE AVAILABLE FOR COMPREHENSIVE WELLNESS PLANS IN EACH OF THE FIVE COMMUNITIES IN THE SERVICE AREA

11

4

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

Amount	Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2
	1 _____ _____
	2 _____ _____

All other program-related investments. See instructions.

1

Total. Add lines 1 through 3 ► 0

Part X Minimum Investment Return

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes			
a	Average monthly fair market value of securities.	1a	25,798,834	
b	Average of monthly cash balances.	1b	298,241	
c	Fair market value of all other assets (see instructions).	1c	1,345,833	
d	Total (add lines 1a, b, and c).	1d	27,442,908	
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0	
2	Acquisition indebtedness applicable to line 1 assets.	2	0	
3	Subtract line 2 from line 1d.	3	27,442,908	
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	411,644	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	27,031,264	
6	Minimum investment return. Enter 5% of line 5.	6	1,351,563	

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

1	Minimum investment return from Part X, line 6.	1	1,351,563	
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	52,916	
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	501	
c	Add lines 2a and 2b.	2c	53,417	
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	1,298,146	
4	Recoveries of amounts treated as qualifying distributions.	4	12,754	
5	Add lines 3 and 4.	5	1,310,900	
6	Deduction from distributable amount (see instructions).	6	0	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	1,310,900	

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes			
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	2,718,343	
b	Program-related investments—total from Part IX-B.	1b	0	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	166,900	
3	Amounts set aside for specific charitable projects that satisfy the			
a	Suitability test (prior IRS approval required).	3a		
b	Cash distribution test (attach the required schedule).	3b		
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	2,885,243	
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions).	5	0	
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	2,885,243	

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				1,310,900
2 Undistributed income, if any, as of the end of 2015			0	
a Enter amount for 2014 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010.				
b From 2011.				
c From 2012.				
d From 2013.	13,639,331			
e From 2014.	549,326			
f Total of lines 3a through e.		14,188,657		
4 Qualifying distributions for 2015 from Part XII, line 4 ► \$ 2,885,243				
a Applied to 2014, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2015 distributable amount.				1,310,900
e Remaining amount distributed out of corpus	1,574,343			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	15,763,000			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f 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 be required - see instructions).	0			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	0			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	15,763,000			
10 Analysis of line 9				
a Excess from 2011.				
b Excess from 2012.				
c Excess from 2013.	13,639,331			
d Excess from 2014.	549,326			
e Excess from 2015.	1,574,343			

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. <input type="text"/>				
b Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)				
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.				
b 85% of line 2a				
c Qualifying distributions from Part XII, line 4 for each year listed				
d Amounts included in line 2c not used directly for active conduct of exempt activities				
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c				
3 Complete 3a, b, or c for the alternative test relied upon				
a "Assets" alternative test—enter				
(1) Value of all assets				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				
b "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.				
c "Support" alternative test—enter				
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).				
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).				
(3) Largest amount of support from an exempt organization				
(4) Gross investment income				

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)**1 Information Regarding Foundation Managers:**

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

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

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

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

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

AMY HEYDLAUFF
14800 E OLD US 12
CHELSEA, MI 48118
(734) 433-4599

b The form in which applications should be submitted and information and materials they should include

ELECTRONIC SUBMISSION THROUGH THE "GRANTS" TAB ON WEBSITE. ALL INFORMATION RELATED TO GRANT APPLICATION IS POSTED ON WEBSITE. APPLICANTS WILL BE REQUIRED TO PROVIDE PROOF OF NON-PROFIT STATUS, RESPONSIBLE CONTACT, DEMONSTRATED NEED, PURPOSE, MISSION, BUDGET, METHOD OF MEASUREMENT, AND SUSTAINABILITY PLAN

c Any submission deadlines

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

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

GRANTS ARE LIMITED TO NON-PROFITS IN THE ORGANIZATION'S SERVICE AREA, INCLUDING CHELSEA, DEXTER, GRASS LAKE, MANCHESTER, AND STOCKBRIDGE. THE ORGANIZATION ONLY GRANTS TO NON-PROFITS RELATED TO THE ORGANIZATION'S VISION (EAT BETTER, MOVE MORE, AVOID UNHEALTHY SUBSTANCES, AND CONNECT WITH OTHERS IN HEALTHY WAYS)

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			► 3a	463,707
b <i>Approved for future payment</i> CHELSEA COMMUNITY HOSPITAL 775 S MAIN STREET CHELSEA, MI 48118	NONE	PC	SJMHS RENTAL PAYMENTS	220,915
Total			► 3b	220,915

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue						
a MEMBERSHIP FEES						4,411,113
b MISCELLANEOUS INCOME				14	30	9,521
c						
d						
e						
f						
g Fees and contracts from government agencies						
2 Membership dues and assessments.						
3 Interest on savings and temporary cash investments.				14	267	
4 Dividends and interest from securities.				18	499,891	
5 Net rental income or (loss) from real estate						
a Debt-financed property.				16	67,227	
b Not debt-financed property.				16	189,502	
6 Net rental income or (loss) from personal property.						
7 Other investment income.						
8 Gain or (loss) from sales of assets other than inventory.				18	35,541	
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory				03	40,671	
11 Other revenue a K-1 OTHER INCOME HIGH QUALITY BOND FUND						
b K-1 OTHER INCOME CF STRATEGIC SOLUTIONS FLOBAL EQUITY LLC				14	-3,622	
c K-1 OTHER INCOME RUSSELL MULTI ASSET CORE PLUS FUND	900099		4,346	14	-28,473	
d K-1 OTHER INCOME RUSSELL CORE BOND FUND	900099		-6	14	152	
e				14	2,902	
12 Subtotal Add columns (b), (d), and (e).			4,340		804,088	4,420,634
13 Total Add line 12, columns (b), (d), and (e).						5,229,062

Part 1: M&B - Relationship of Activities to the Achievement of External Business Objectives

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)
1A	FEES GENERATED FROM OPERATION OF MEDICALLY-INTEGRATED COMMUNITY
1A	WELLNESS CENTER

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.)
PUBLICLY TRADED SECURITIES	P		
FROM K-1 CFI STRATEGIC SOLUTIONS GLOBAL EQUITY FUND	P		
FROM K-1 CFI STRATEGIC SOLUTIONS GLOBAL EQUITY FUND	P		
FROM K-1 CFI INSTITUTIONAL HIGH QUALITY BOND FUND	P		
FROM K-1 CFI INSTITUTIONAL HIGH QUALITY BOND FUND	P		
FROM K-1 RUSSELL MULTI ASSET CORE PLUS FUND	P		
FROM K-1 RUSSELL MULTI ASSET CORE PLUS FUND	P		
FROM K-1 RUSSELL CORE BOND FUND	P		
FROM K-1 RUSSELL CORE BOND FUND	P		
LOSS ON SALE OF CFI STRATEGIC SOLUTIONS	P		

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	(h) (e) plus (f) minus (g)
2,931,286		2,892,502	38,784
407,251			407,251
1,852,391			1,852,391
38,295			38,295
12,428			12,428
44,583			44,583
125,878			125,878
		117,973	-117,973
		28,520	-28,520
18,965,466		19,115,105	-149,639

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			38,784
			407,251
			1,852,391
			38,295
			12,428
			44,583
			125,878
			-117,973
			-28,520
			-149,639

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 (b) P—Purchase D—Donation	Date acquired (c) (mo, day, yr)	(d) Date sold (mo, day, yr)
LOSS ON SALE OF CFI HQ BOND FUND	P		
LOSS ON SALE OF FIXED ASSETS	P		

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)
2,398,773		2,420,089	-21,316
		3,243	-3,243

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

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			-21,316
			-3,243

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
AMY HEYDLAUFF 14800 OLD US 12 CHELSEA, MI 48118	CHIEF EXECUTIVE OFFICER 40 00	119,350	11,791	0
SCOTT BROSHAR 14800 OLD US 12 CHELSEA, MI 48118	TREASURER 7 00	0	0	0
LARRY COBLER 14800 OLD US 12 CHELSEA, MI 48118	CHAIR 3 00	0	0	0
NANCY GRAEBNER 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 2 00	0	0	0
KARI NEWMAN 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 4 00	0	0	0
KEVIN DOMBKOWSKI 14800 OLD US 12 CHELSEA, MI 48118	SECRETARY 4 00	0	0	0
ANNE KITTENDORF 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 4 00	0	0	0
TOM MANN 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 7 00	0	0	0
ROBERT STEPHENS 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 3 00	0	0	0
JEFF WALLACE 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 4 00	0	0	0
ROB CASALOU 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 1 00	0	0	0
SALLY DEVOL 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 12 00	0	0	0
COY VAUGHN 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 8 00	0	0	0
MICHAEL WILLIS 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 9 00	0	0	0

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
ST JOSEPH MERCY CHELSEA 775 S MAIN STREET CHELSEA, MI 48118	NONE	PC	HEART & SOLE RACE	2,000
ST JOSEPH MERCY CHELSEA 775 S MAIN STREET CHELSEA, MI 48118	NONE	PC	SRSLY CHELSEA	20,000
ST JOSEPH MERCY CHELSEA 775 S MAIN STREET CHELSEA, MI 48118	NONE	PC	CAC 5H FARM MARKET DEMONSTRATIONS	6,400
ST JOSEPH MERCY CHELSEA 775 S MAIN STREET CHELSEA, MI 48118	NONE	PC	FARMERS MARKET	17,190
CHELSEA SCHOOL DISTRICT 500 WASHINGTON STREET CHELSEA, MI 48118	NONE	PC	IRON CLAD BASEBALL FESTIVAL	1,500
CHELSEA SCHOOL DISTRICT 500 WASHINGTON STREET CHELSEA, MI 48118	NONE	PC	CAMP GABIKA	11,000
CHELSEA SCHOOL DISTRICT 500 WASHINGTON STREET CHELSEA, MI 48118	NONE	PC	HEALTHY SELFIES	1,560
RUN FOR THE ROLLS 6045 QUEEN OAKS DRIVE CHELSEA, MI 48118	NONE	PC	RUN FOR THE ROLLS RACE	2,000
ST LOUIS CENTER 16195 OLD US 12 CHELSEA, MI 48118	NONE	PC	21ST ANNUAL GOLF & GLORY	500
CHELSEA SENIOR CENTER 512 E WASHINGTON STREET CHELSEA, MI 48118	NONE	PC	FESTIVAL OF TABLES	500
LEGACY LAND CONSERVANCY 1100 MAIN STREET ANN ARBOR, MI 48104	NONE	PC	FAMILY REC BROCHURES	200
CHELSEA DISTRICT LIBRARY 221 SOUTH MAIN CHELSEA, MI 48118	NONE	PC	COMMUNITY READ	6,000
BALLET CHELSEA-YDT PO BOX 591 CHELSEA, MI 48118	NONE	PC	ADAPTIVE MOVEMENT CHELSEA	7,000
EDDY DISCOVERY CENTER 17030 BUSH RD CHELSEA, MI 48118	NONE	PC	SNOW SHOES FOR LANTERN LIT TRAILS	500
DEXTER DISTRICT LIBRARY 3255 ALPINE STREET DEXTER, MI 48130	NONE	PC	5H COMMUNITY READ	4,000
Total				► 3a
				463,707

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
DEXTER SENIOR CENTER 7720 DEXTER-ANN ARBOR RD DETER, MI 48118	NONE	PC	WINTER MARKEPLACE	500
METROPARKS FOUNDATION PO BOX 337 DEXTER, MI 48130	NONE	PC	DEXTER B2B 10K RUN/WALK	500
EDDY DISCOVERY CENTER 17030 BUSH RD CHELSEA, MI 48118	NONE	PC	SNOW SHOES FOR LANTERN LIT TRAILS	500
GRASS LAKE CHARTER TOWNSHIP 373 LAKESIDE DRIVE GRASS LAKE, MI 49240	NONE	PC	G L PARK IMPOVEMENTS	11,500
GRASS LAKE COMMUNITY SCHOOLS 1000 GRASS LAKE RD GRASS LAKE, MI 49240	NONE	PC	PROJECT SAFE GRADUATION	1,000
GRASS LAKE METHODIST CHURCH 449 E MICHIGAN AVE GRASS LAKE, MI 49240	NONE	PC	FOOD FOR FRIENDS	500
MANCHESTER COMMUNITY SCHOOLS 410 CITY RD MANCHESTER, MI 48158	NONE	PC	COMMUNITY & SCHOOL GARDENS	7,470
MANCHESTER COMMUNITY SCHOOLS 410 CITY RD MANCHESTER, MI 48158	NONE	PC	STRESS MANAGEMENT	6,690
MANCHESTER COMMUNITY SCHOOLS 410 CITY RD MANCHESTER, MI 48158	NONE	PC	SRSLY MANCHESTER	24,130
MANCHESTER COMMUNITY SCHOOLS 410 CITY RD MANCHESTER, MI 48158	NONE	PC	SAFE ROUTES TO SCHOOL	5,000
MANCHESTER COMMUNITY SCHOOLS 410 CITY RD MANCHESTER, MI 48158	NONE	PC	HEALTHY CHEFS	10,000
MANCHESTER COMMUNITY SCHOOLS 410 CITY RD MANCHESTER, MI 48158	NONE	PC	HEALTHY CHEFS	3,272
MANCHESTER COMMUNITY SCHOOLS 410 CITY RD MANCHESTER, MI 48158	NONE	PC	THE LEADER IN ME	5,000
MANCHESTER COMMUNITY SCHOOLS FOUNDATION 410 CITY RD MANCHESTER, MI 48158	NONE	PC	MHS AFTER PROM EVENT	500
VILLAGE OF MANCHESTER 912 CITY RD MANCHESTER, MI 48158	NONE	PC	MANCHESTER FARMERS MARKET	8,000
Total				463,707

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
VILLAGE OF MANCHESTER 912 CITY RD MANCHESTER, MI 48158	NONE	PC	SAFE ROUTES TO SCHOOL	15,000
BALLET CHELSEA-YDT PO BOX 591 CHELSEA, MI 48118	NONE	PC	ADAPTIVE MOVEMENT MANCHESTER	5,500
MANCHESTER DISTRICT LIBRARY 410 CITY RD MANCHESTER, MI 48158	NONE	PC	COMMUNITY READ	2,000
CS MOTT CHILDREN'S HOSPITAL 1500 MEDICAL CENTER DR ANN ARBOR, MI 48109	NONE	PC	HELMETS FOR PRE-K STUDENTS	345
RIVERFOLK MUSIC & ARTS ORGANIZATION PO BOX 133 MANCHESTER, MI 48104	NONE	PC	GAZEBO CONCERTS	1,200
STOCKBRIDGE COMMUNITY SCHOOLS 305 W ELIZABETH STREET STOCKBRIDGE, MI 49285	NONE	PC	GATHERING UNDER THE PAVILION	7,000
STOCKBRIDGE COMMUNITY SCHOOLS 305 W ELIZABETH STREET STOCKBRIDGE, MI 49285	NONE	PC	COMMUNITY PATHWAYS	2,250
STOCKBRIDGE COMMUNITY SCHOOLS 305 W ELIZABETH STREET STOCKBRIDGE, MI 49285	NONE	PC	YOUTH ATHLETIC FIELDS	8,400
STOCKBRIDGE COMMUNITY SCHOOLS 305 W ELIZABETH STREET STOCKBRIDGE, MI 49285	NONE	PC	HERITAGE HEALTHY SNACKS	4,500
STOCKBRIDGE COMMUNITY SCHOOLS 305 W ELIZABETH STREET STOCKBRIDGE, MI 49285	NONE	PC	OPEN AIR MARKET	3,628
VILLAGE OF STOCKBRIDGE PO BOX 155 STOCKBRIDGE, MI 49285	NONE	PC	LAKELAND TRAILS STATE PARK	20,000
FRIENDS OF THE STOCKBRIDGE LIBRARY PO BOX 802 STOCKBRIDGE, MI 49285	NONE	PC	COMMUNITY READ	4,225
ST JOSEPH MERCY CHELSEA 775 S MAIN STREET CHELSEA, MI 48118	NONE	PC	SRSLY STOCKBRIDGE	20,000
UNIVERSITY OF MISSOURI PO BOX 807012 KANSAS CITY, MO 64180	NONE	PC	BEHAVIOURAL RISK FACTOR SURVEY	32,825
ST JOSEPH MERCY HOSPITAL PO BOX 995 ANN ARBOR, MI 48105	NONE	PC	NEXT STEPS FITNESS PROGRAM	24,775
Total.			► 3a	463,707

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
MANCHESTER SCHOOLS 410 CITY RD MANCHESTER, MI 48158	NONE	PC	HEALTHY CHEF'S PROGRAM	10,000
DEXTER METHODIST CHURCH 7643 HURON RIVER DR DEXTER, MI 48130	NONE	PC	FARMERS MARKET	5,616
HURON PATHWAYS 14800 E OLD US 12 CHELSEA, MI 48118	NONE	PC	CONSULTING FOR PATHWAY CONSTRUC	3,500
LEGACY LAND GRANT 1100 N MAIN ANN ARBOR, MI 48104	NONE	PC	CONSULTING FOR PATHWAY CONSTRUC	3,000
CITY OF DEXTER 8140 MAIN DEXTER, MI 48130	NONE	PC	FARM FRESH	200
MANCHESTER SCHOOLS 410 CITY RD MANCHESTER, MI 48158	NONE	PC	YOUTH FOOTBALL	310
CHELSEA COMMUNITY HOSPITAL 775 S MAIN STREET CHELSEA, MI 48118	NONE	PC	SJMHS RENTAL PAYMENTS	120,521
PROGRAMS TO EDUCATE ALL CYCLISTS 32 N WASHINGTON STE 1 YPSILANTI, MI 48197	NONE	PC	PEAC DEXTER BIKE SAFETY	4,000
Total				463,707

TY 2015 Accounting Fees Schedule

Name: THE CHELSEA HEALTH AND WELLNESS
FOUNDATION
EIN: 26-3040367

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	53,885	0	0	53,885

TY 2015 Investments - Other Schedule

Name: THE CHELSEA HEALTH AND WELLNESS
FOUNDATION
EIN: 26-3040367

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
SSG RELATIVE VALUE & EVENT DRIVEN SERIES	FMV	0	0
RUSSELL INSTL FDS MULTI ASSET CORE PLUS FD	FMV	18,441,582	18,441,582
RUSSELL INSTL FDS LLC CORE BD FD	FMV	3,483,441	3,483,441
RUSSELL TTL RETURN Q CL B SRS 6	FMV	2,619,064	2,619,064

**TY 2015 Land, Etc.
Schedule**

Name: THE CHELSEA HEALTH AND WELLNESS
FOUNDATION
EIN: 26-3040367

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
LAND	3,101,000	0	3,101,000	3,101,000
BUILDINGS	21,039,367	3,431,418	17,607,949	17,607,949
BUILDING IMPROVEMENTS	606,594	157,039	449,555	449,555
MOVABLE EQUIPMENT	1,016,312	509,503	506,809	506,809
IT EQUIPMENT	366,242	232,476	133,766	133,766
IT SOFTWARE	37,216	33,046	4,170	4,170
FURNITURE AND FIXTURES	483,883	254,240	229,643	229,643

TY 2015 Legal Fees Schedule

Name: THE CHELSEA HEALTH AND WELLNESS
FOUNDATION
EIN: 26-3040367

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	1,152,097	0	450	1,151,647

TY 2015 Other Decreases Schedule

Name: THE CHELSEA HEALTH AND WELLNESS
FOUNDATION
EIN: 26-3040367

Description	Amount
UNREALIZED LOSS ON SECURITIES	746,956
INCOME FROM K-1 CFI HIGH QUALITY BOND FUND	40,513
INCOME FROM K-1 CF STRATEGIC SOLUTIONS GLOBAL EQUITY LLC	122,837
INCOME FROM K-1 RUSSELL MULTI ASSET CORE PLUS FUND	213,818
INCOME FROM K-1 RUSSELL CORE BOND FUND	98,022

TY 2015 Other Expenses Schedule

Name: THE CHELSEA HEALTH AND WELLNESS
FOUNDATION
EIN: 26-3040367

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADVERTISING	230,367	0	217,767	12,600
TELEPHONE	38,206	0	34,274	3,932
INSURANCE	54,401	0	0	55,898
POSTAGE AND SHIPPING	19,085	0	18,755	330
UTILITIES	375,667	3,447	341,198	31,022
SUBSCRIPTIONS AND PUBLICATIONS	16,386	0	368	16,688
LICENSES	48,316	0	48,316	0
COUPONS	10,057	0	10,057	0
EQUIPMENT LEASING	29,616	0	29,616	0
BAD DEBT	23,460	0	23,460	0
REPAIRS & MAINTENANCE	84,679	0	84,096	583
MISCELLANEOUS	172,135	0	165,212	7,534
SUPPLIES	157,435	0	154,665	3,035
INVESTMENT FEES	208,407	208,407	0	0
EXCESS OPERATING EXP OVER REVENUE - CASH BASIS	0	0	0	99,857
COALITION PROJECT EXPENSE	71,243	0	0	64,431
RENTAL EXPENSE - SUPPLIES	1,042	1,042		0
RENTAL EXPENSE - REPAIRS & MAINTENANCE	17,646	17,646		0
RENTAL EXPENSE - UTILITIES	578	578		0

TY 2015 Other Income Schedule

Name: THE CHELSEA HEALTH AND WELLNESS
FOUNDATION
EIN: 26-3040367

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
MEMBERSHIP FEES	4,411,113		4,411,113
MISCELLANEOUS INCOME	9,551		9,551
K-1 OTHER INCOME HIGH QUALITY BOND FUND	-3,622	-3,622	0
K-1 OTHER INCOME CF STRATEGIC SOLUTIONS FLOBAL EQUITY LLC	-24,127	-28,473	0
K-1 OTHER INCOME RUSSELL MULTI ASSET CORE PLUS FUND	146	152	0
K-1 OTHER INCOME RUSSELL CORE BOND FUND	2,902	2,902	0

TY 2015 Other Liabilities Schedule

Name: THE CHELSEA HEALTH AND WELLNESS
FOUNDATION
EIN: 26-3040367

Description	Beginning of Year - Book Value	End of Year - Book Value
ACCRUED WAGES	25,171	25,717
OTHER ACCRUED LIABILITIES	170,619	200,356

TY 2015 Other Professional Fees Schedule

Name: THE CHELSEA HEALTH AND WELLNESS
FOUNDATION
EIN: 26-3040367

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MANAGEMENT FEES	203,742	0	203,742	0
OUTSIDE CONTRACT SERVICES	228,733	0	128,898	144,893

TY 2015 Taxes Schedule

Name: THE CHELSEA HEALTH AND WELLNESS
FOUNDATION
EIN: 26-3040367

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAXES	5,721	0	0	0