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2016

Form 990-PF 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 www.irs.gov/form990pf.

Open to Public Inspection

For	caler	ndar year 2016, or tax year beginning 07-01-20)16 , ar	nd er	nding 06-30-	2017	-
		ındatıon			A Employer ide	entification numbe	r
		lley Health & Wellness Foundation	34-1845584				
		N-BAILEY HEALTH & WELLN If street (or P O box number if mail is not delivered to street address)	Room/suite		P. Talanhana ann		\
		ton Drive NW Suite D		·	mber (see instructior	15)	
City	or town	n, state or province, country, and ZIP or foreign postal code			(330) 580-2380	l	
		44718			C If exemption	application is pending	g, check here
G CH	neck al	I that apply Initial return Initial return of a	former public charity		D 1. Foreian ord	ganizations, check he	ere \square
.	icci ui	☐ Final return ☐ Amended return	rormer public ename,			ganizations meeting	▶ ∟
		Address change Name change				k here and attach cor	
H C	neck tv	pe of organization Section 501(c)(3) exempt private	foundation			indation status was t n 507(b)(1)(A), chec	
_		n 4947(a)(1) nonexempt charitable trust			under section	11 307 (B)(1)(A), check	KITCIC
[Fa	r mark	ket value of all assets at end J Accounting method	☐ Cash ☑ Accru	al	F If the founda	ition is in a 60-month	termination
		from Part II, col (c), \$ 7,042,696			under section	n 507(b)(1)(B), checl	k here ► L
,,,,,	2 20/1	(Part I, column (d) must	be on cash basis)				
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and				(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily	expenses per books	(Ь)	Net investment income	(c) Adjusted net income	for charitable purposes
	ı	equal the amounts in column (a) (see instructions))					(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	400				
	2	Check ► ✓ If the foundation is not required to attach					
	-	Sch B					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities	144,442		144,442		
	5a	Gross rents					
	Ь	Net rental income or (loss)	104.063				
Œ	6a	Net gain or (loss) from sale of assets not on line 10	104,863				
Revenue	b	Gross sales price for all assets on line 6a 1,434,857					
æ	7	Capital gain net income (from Part IV, line 2)			104,863		
	8	Net short-term capital gain					
	9	Income modifications					
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	249,705		249,305		
	13	Compensation of officers, directors, trustees, etc	61,659		24,403		37,256
	14	Other employee salaries and wages	27,658		2,489		25,169
ses	15	Pension plans, employee benefits	6,965		2,090		4,875
ens	16a	Legal fees (attach schedule)	150		0	0	150
X	b	Accounting fees (attach schedule)	10,725		0	0	10,725
/e	C	Other professional fees (attach schedule)					
atı	17	Interest	95-1				
Administrative Expenses	18	Taxes (attach schedule) (see instructions)	2,478				
Ē	19	Depreciation (attach schedule) and depletion					
AG	20	Occupancy	15,362		3,841		11,521
בַ	21	Travel, conferences, and meetings	528				528
ਰ	22	Printing and publications	9 58,449		34,036		24,413
Operating and	24	Total operating and administrative expenses.	30,449		34,030		24,413
era	24	Add lines 13 through 23	183,974		66,859	0	114,637
o	25	Contributions, gifts, grants paid	366,645		30,039	0	301,267
	26	Total expenses and disbursements. Add lines 24 and	333,343				331,207
		25	550,619		66,859	0	415,904
	27	Subtract line 26 from line 12					
	a	Excess of revenue over expenses and	-300,914				
	Ь	disbursements Net investment income (if negative, enter -0-)			182,446		
	c	Adjusted net income(if negative, enter -0-)			•		
For		work Reduction Act Notice, see instructions.	I	L	Cat No. 11380V	·	m 000-DE (2016

Investments—corporate stock (attach schedule)

Investments—corporate bonds (attach schedule)

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Investments—land, buildings, and equipment basis ▶ _

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Analysis of Changes in Net Assets or Fund Balances

Less accumulated depreciation (attach schedule)

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe ▶_

Unrestricted . . .

Permanently restricted

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) -

Temporarily restricted

3,740,434

1,460,431

1,394,446

6,784,108

59,400

59.400

6,724,708

6,724,708

6,784,108

606

9

4,228,941

1,656,475

1,064,777

7,042,696

2,100 65,378

67,478

6,975,218

6,975,218

7.042,696

2

3

4

5

6

6,724,708

-300,914

551,424

6,975,218

6,975,218 Form **990-PF** (2016)

0 🥦

4,228,941

1,656,475

1,064,777

7,042,696

	7
S	8
Assets	9
As	10a
	b
	c
	11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

28

29

31 Part III

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

2

List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)

Date sold

Page **3**

	ouse, or common stock, 200 shs	P—Purchase D—Donation	(mo , day, yr)	(mo , day, yr)	
1 a WELLS FARGO PUBLICALLY	TRADED SECURITIES	P	2010-01-01	2016-12-31	
b					
С					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	Cost or	(g) other basis ense of sale	Gain c	h) or (loss) or minus (g)
a 1,434,	857		1,329,9	94	104,863
b					
с					
d					
e					
Complete only for assets s	howing gain in column (h) and ow	ned by the foundation	on 12/31/69		(I)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col(ı) (ʒ), ıf any	col (k), but not	h) gain minus less than -0-) or om col (h))
a					104,863
b					
с					
d					
e		If gain, also enter in P			
• -	I In or (loss) as defined in sections 1 I, line 8, column (c) (see instruction			3	104,863
Part V Qualification Un	ider Section 4940(e) for Re	duced Tax on Net	Investment I	ncome	
(For optional use by domestic priv	vate foundations subject to the sec	tion 4940(a) tax on ne	t investment inco	ome)	
If section 4940(d)(2) applies, leav	ve this part blank			_	_
	section 4942 tax on the distributat qualify under section 4940(e) Do		in the base perio	od? \(\sum Y	es 🔽 No
1 Enter the appropriate amo	unt in each column for each year,	see instructions before	making any entr	ies	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	(d) Distribution rat (col (b) divided by c	
2015	548,562		6,886,124		0 079662
2014	446,808		7,674,131		0 058223
2013	524,066		7,682,356		0 068217
2012	430,849		7,270,801		0 059257
2011	604,132		6,920,763	1	0 087293
2 Total of line 1, column (d)					0 352652
	or the 5-year base period—divide t ation has been in existence if less t		or by the 3		0 07053
	charitable-use assets for 2016 from		4		6,848,827
5 Multiply line 4 by line 3			5		483,048
6 Enter 1% of net investmen	t income (1% of Part I, line 27b)		6		1,824
			7		484,872
	ns from Part XII, line 4 ,				415,904
	ter than line 7, check the box in Pa			sing a 1% tax rate Se	e the Part VI
				Fo	orm 990-PF (2016)

(b)

How acquired

P—Purchase

(c)

Date acquired

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional service	ces (see instructions). If none, enter "NON	IE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Total number of others receiving over \$50,000 for professional services		
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year Include rel organizations and other beneficiaries served, conferences convened, research papers produced.		Expenses
1 GRANT TO PRESCRIPTION ASSISTANCE NETWORK FOR OPERATING EXPE	NSES	50,000
2 GRANT TO STARK COUNTY BOARD OF DEV DISABILITIES FOR A CLASSR	OOM AMPLIFICATION SYSTEM	26,720
3 GRANT TO MEALS ON WHEELS STARK AND WAYNE FOR A NEW TRUCK FO	OR MEAL DELIVERY	25,000
4 GRANT TO POMERENE HOSPITAL TO BRING PAN SERVICES TO HOLMES C	COUNTY	15,000
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	Amount
1 NONE		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		
Total Add lines I dillough 5		F 000 DE (2010)
		Form 990-PF (2016)

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

3a 3h

4

5

415.904

415,904

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Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

3

4

b Total for prior years

b From 2012. . . . c From 2013. .

d From 2014. . . .

e From 2015.

From 2011.

Page 9

338,792

338,792

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Part XIII		Undistributed Income (see in				
	D. storler steelel	a construct for 2016 from Book VI, lose 7				
1	Distributabl	e amount for 2016 from Part XI, line 7				
2	Undistribute	ed income, if any, as of the end of 2016				

a Enter amount for 2015 only.

Excess distributions carryover, if any, to 2016

f Total of lines 3a through e.

d Applied to 2016 distributable amount. . . . e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b 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 e Undistributed income for 2015 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 2017 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 2011 not

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2017.

10 Analysis of line 9 a Excess from 2012. .

b Excess from 2013. .

c Excess from 2014. . .

d Excess from 2015. .

e Excess from 2016. .

6 Enter the net total of each column as

indicated below:

4 Qualifying distributions for 2016 from Part XII, line 4 🕨 \$ a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

2014, 2013, 2012

(see instructions)

274.788 75,364

147.039

72.162 207,282

75.364 147,039

72.162

207,282

77,112

(a)

Corpus

776.635

77.112

853,747

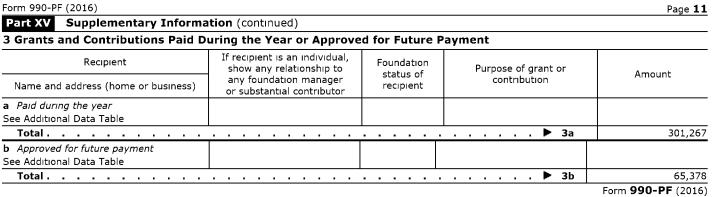
274.788

578,959

(b)

Years prior to 2015

(c)



er gross	amounts unless otherwise indicated	Unrelated bus	siness income	Excluded by section	512, 513, or 514	(e) Related or exemp
	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
						
	and contracts from government agencies					
Intere	ship dues and assessments					
	ds and interest from securities			14	144,442	
Net ren	tal income or (loss) from real estate					
	inanced property					
	ebt-financed property					
	ntal income or (loss) from personal property					
	r (loss) from sales of assets other than					
ınvent	prỳ í			18	104,863	
	ome or (loss) from special events					
Other r	rofit or (loss) from sales of inventory evenue a					
	evenue a					
с						
d						
d e Subtota Total.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e)			13	249,305	
d e Subtota Total. / e worksh	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio Relationship of Activities to th	^{ns}) e Accomplish r	nent of Exem	pt Purposes	3	249,30
d e Subtota Total. / e worksh	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio	ns) e Accomplishr Income is reported	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	249,30
d e Subtota Total. / e worksh	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplishr Income is reported	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	249,30
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d e Subtota Total. / e worksh art XVI	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplishr Income is reported	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	249,30
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d e Subtota Total. / e worksh art XVI ne No.	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	ns) e Accomplishr Income is reported	ment of Exem	pt Purposes of Part XVI-A contribut	ted importantly to	249,30

, ,	(2010)							
	Information Regarding Transfers To and Transactions and Relationships With Noncharitable							
	Exempt Organizations							

Part >	(VII	Information Re Exempt Organi		ransi	fers To	and Transac	tio	ns and	Relatio	nships With No	ncharit	able		
1 Did ti (c) of	he org f the C	anization directly or in ode (other than sectio	directly enga	ge in organi	any of the	e following with	any 7, re	other or	ganızatıo political	n described in sect organizations?	ion 501		Yes	No
a Trans	sfers fr	om the reporting foun	dation to a n	oncha	ırıtable ex	empt organizat	ion	of		_				
(1)	Cash.											1a(1)		No
(2)	Other	assets										1a(2)		No
b Other	r trans	actions												
(1)	Sales	of assets to a nonchari	table exemp	t orga	nızatıon.							1b(1)		No
(2)	Purcha	ases of assets from a n	oncharitable	exem	pt organi	zation						1b(2)		No
(3)	Rental	of facilities, equipmen	nt, or other a	ssets.								1b(3)		No
(4)	Reımb	ursement arrangemen	ts									1b(4)		No
(5)	Loans	or loan guarantees.										1b(5)		No
(6) F	Perforn	nance of services or m	embership or	fund	raising so	licitations						1b(6)		No
c Shar	ing of f	^f acılıtıes, equipment, n	nailing lists, d	ther .	assets, or	paid employee	es.					1c		No
		er to any of the above												
		s, other assets, or ser- saction or sharing arra										e		
(a) Line N	No	(b) Amount involved	(c) Name of	noncha	arıtable exe	mpt organization	1	(d) Des	cription of	transfers, transactions	s, and shar	ıng arraı	ngemen	its
							_							
							+							
	_						+							
							+							
							+							
							+							
							+							
2a Is the	e found	dation directly or indire	ectly affiliated	with	, or relate	d to, one or m	ore t	tax-exem	pt organi	zations				
descr	ribed in	n section 501(c) of the	Code (other	than	section 50	01(c)(3)) or in	sect	ion 527?.			[Yes	✓ N	lo
b If "Ye	es," co	mplete the following so	chedule											
		(a) Name of organization	in		(b) Type of organ	zatio	n		(c) Descriptio	n of relatio	nship		
		r penalties of perjury, knowledge and belief												
Sign		preparer has any kno		ni ecc,	, and com	piete Deciarat	1011	ы ргераго	er (other	citati caxpayer, is c	Jasea On	an innoi	mation	1 01
Here	*	****	•			2017-11-02		\ *:	****		May the IF			
11616) –							—) –			with the p			
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		C 5								employed ▶ 🔲		P00190	1524	
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Prepa	rer	Firm's name ► HALL	KISTLER &	СОМР	ANYIIP			1						
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	•	Fırm's address ▶ 22	0 MARKET A	VENUI	E SOUTH	- SUITE 700								
			NTON OU	14700	2100						Phone no	0 (330	453-	7633
		CANTON, OH 447022100												

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter (e) other allowances Contributions to (b) devoted to position -0-) employee benefit plans and deferred compensation DON A SULTZBACH EXECUTIVE DIRECTOR 46,519 ۵ 0 16 0 2719 Fulton Drive NW Suite D Canton, OH 44718 PETER KOPKO **TREASURER** 15,140 0 40 2719 Fulton Drive NW Suite D Canton, OH 44718 DANIEL N MORETTA DO 0 **SECRETARY** 0 10 2719 Fulton Drive NW Suite D Canton, OH 44718 JOHN L MUHLBACH JR TRUSTEE 0 0 10 2719 Fulton Drive NW Suite D Canton, OH 44718 JENNIFER R KESSEL 0 0 TRUSTEE 0 10 2719 Fulton Drive NW Suite D Canton, OH 44718 FREDERICK W ROHRIG CHAIRMAN 0 0 10 2719 Fulton Drive NW Suite D Canton, OH 44718 SCOTT P SANDROCK TRUSTEE 0 0 10 2719 Fulton Drive NW Suite D Canton, OH 44718 THOMAS F TURNER 0 0 TRUSTEE 0 10 2719 Fulton Drive NW Suite D Canton, OH 44718 DAVID A MILLER TRUSTEE 0 0 10 2719 Fulton Drive NW Suite D Canton, OH 44718 DIANE K JARRETT TRUSTEE ٥ ٥ 10 2719 Fulton Drive NW Suite D Canton, OH 44718 EUGENE A THORN III TRUSTEE 0 0 10 2719 Fulton Drive NW Suite D Canton, OH 44718 DANIEL J FULINE 0 TRUSTEE 0 10 2719 Fulton Drive NW Suite D Canton, OH 44718 CHARLES R CONKLIN DO VICE CHAIRMAN 0 0 10 2719 Fulton Drive NW Suite D Canton, OH 44718 JAMES MOLNAR TRUSTEE 0 0 0 10 2719 Fulton Drive NW Suite D Canton, OH 44718

Recipient If recipient is an individual, show any relationship to status of status of

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
MALONE COLLEGE 515 25TH STREET NW CANTON, OH 44709	NOT APPLICABLE	NC	MEDICAL TRAINING SCHOLARSHIPS	8,000
STARK STATE TECHNICAL COLLEGE 6200 FRANK AVE NW NORTH CANTON, OH 44720	NOT APPLICABLE	NC	MEDICAL TRAINING SCHOLARSHIPS	4,000
KENT STATE UNIVERSITY - STARK CAMPUS 6000 FRANK AVENUE NW NORTH CANTON, OH 44720	NOT APPLICABLE	NC	MEDICAL TRAINING SCHOLARSHIPS	8,000
KENT STATE UNIVERSITY - TUSCARAWAS CAMPUS 330 UNIVERSITY DR NE NEW PHILADELPHIA, OH 44663	NOT APPLICABLE	NC	MEDICAL TRAINING SCHOLARSHIPS	4,000

NC

MEDICAL TRAINING

SCHOLARSHIPS

6,000

301,267

NOT APPLICABLE

OU COLLEGE OF OSTEOPATHIC

MEDICINE

Total.

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GROSVENOR HALL ATHENS, OH 45701

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	Foundation status of	Purpose of grant or contribution	Amount		
Name and address (home or business)	any foundation manager or substantial contributor	recipient				
a Paid during the year						
OU COLLEGE OF OSTEOPATHIC MEDICINE GROSVENOR HALL ATHENS, OH 45701	NOT APPLICABLE	NC	MEDICAL TRAINING SCHOLARSHIPS	5,000		
AULTMAN COLLEGE 2600 Sixth Street SW Canton, OH 44710	Not Applicable	NC	Medical training scholarships	4,000		
NEW LEAF CENTER PO BOX 336 MT EATON, OH 44659	NOT APPLICABLE	PC	Dr salary/benefits	10,000		
FAITH IN ACTION 412 Lincoln Way E	NOT APPLICABLE	PC	SERVICES TO FRAIL ELDERLY	10,000		

AULTMAN COLLEGE 2600 Sixth Street SW Canton, OH 44710	Not Applicable	NC	Medical training scholarships	4,000
NEW LEAF CENTER PO BOX 336 MT EATON, OH 44659	NOT APPLICABLE	PC	Dr salary/benefits	10,000
FAITH IN ACTION 412 Lincoln Way E MASSILLON, OH 44646	NOT APPLICABLE	PC	SERVICES TO FRAIL ELDERLY	10,000
BUT OMATUEON COCKETY OF THE BUTNE	NOT ARRIVE ARRIVE	20	CLASSES FOR THE NEEDY WILL	F 000

NEW LEAF CENTER PO BOX 336 MT EATON, OH 44659	NOT APPLICABLE	PC	Dr salary/benefits	10
FAITH IN ACTION 412 Lincoln Way E MASSILLON, OH 44646	NOT APPLICABLE	PC	SERVICES TO FRAIL ELDERLY	10
PHILOMATHEON SOCIETY OF THE BLIND	NOT APPLICABLE	PC	GLASSES FOR THE NEEDY WHO	5

MASSILLON, OH 44646	NOT APPLICABLE	PC	SERVICES TO FRAIL ELDERLY	10,000
PHILOMATHEON SOCIETY OF THE BLIND 2701 Tuscarawas St W CANTON, OH 44708	NOT APPLICABLE	l	GLASSES FOR THE NEEDY WHO ARE VISUALLY IMPAIRED	5,000

Total				301,267
PHILOMATHEON SOCIETY OF THE BLIND 2701 Tuscarawas St W CANTON, OH 44708	NOT APPLICABLE	PC	GLASSES FOR THE NEEDY WHO ARE VISUALLY IMPAIRED	5,
MASSILLON, OH 44646				

Form 990PF Part XV Line 3 - Grant	ts and Contributions Paid	I During the '	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
TUSCARAWAS CLINIC FOR THE WORKING UNINSURED 420 S Reeves Ave DOVER, OH 44622	not applicable	PC	Part-time physician assistant	10,000
VIOLA STARTZMAN FREE CLINIC 1874 Cleveland Rd Wooster, OH 44691	Not applicable	PC	NURSE PRACTITIONER	12,500
MISCELLANEOUS MATCHING GRANTS 2719 FULTON DRIVE NW CANTON, OH 44718	NOT APPLICABLE	PC	MISCELLANEOUS MATCHING GRANTS	2,465
HAMMER & NAILS 906 12TH STREET NW CANTON, OH 44703	NOT APPLICABLE	PC	HANDICAP RAMPS	11,000
SOCIETY FOR EQUAL ACCESS 1458 5TH STREET NW NEW PHILADELPHIA, OH 44663	NOT APPLICABLE	PC	MODIFIED MINI VAN	10,000
Total				301,267

Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
UNIVERSITY OF MOUNT UNION 1972 CLARK AVENUE ALLIANCE, OH 44601	NOT APPLICABLE	NC	MEDICAL TRAINING SCHOLARSHIPS	5,000
WALSH UNIVERSITY 2020 EAST MAPLE STREET NORTH CANTON, OH 44720	NOT APPLICABLE	NC	MEDICAL TRAINING SCHOLARSHIPS	8,000
Community Hospice of Tuscarawas County 716 Commercial Avenue SW New Philadelphia, OH 44663	Not Applicable	PC	New Training Lab & Furniture	6,000
Louisville Fire Department 215 South Mill Street Louisville, OH 44641	Not Applicable	PC	CPR Equipment	2,400
New Hope Conductive Learning Center 8171 Rittman Ave Sterling, OH 44276	Not Applicable	PC	Rehabilitation equipment	3,252

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Form 990PF Part XV Line 3 - Gran	ts and Contributions Paic	During the	Year or Approved for Future P	ayment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
Pomerene Hospital 981 WOoster Road Millersburg, OH 44654	Not Applicable	NC	Bring PAN services to Holmes County	15,000
Prescription Assistance Network 408 9th St SW Canton, OH 44707	Not Applicable	PC	Operational Expenses	50,000
Refuge of Hope 405 3rd St NE Canton, OH 44702	Not Applicable	PC	Emergency Water Heater	2,800
St Joseph Senior Living 2308 Reno Drive Louisville, OH 44641	Not Applicable	PC	Therapy Equipment	11,630
Boys & Girls Club of Massillon 730 Duncan St SW	Not Applicable	PC	Healthy Habits summer program	10,000

Canton, OH 44702	тос прривавие		Emergency Water Heater	2,000
St Joseph Senior Living 2308 Reno Drive Louisville, OH 44641	Not Applicable	PC	Therapy Equipment	11,630
Boys & Girls Club of Massillon 730 Duncan St SW Massillon, OH 44647	Not Applicable	PC	Healthy Habits summer program	10,000

301,267

Total . .

3a

Form 990PF Part XV Line 3 - Gran	ts and Contributions Paid	During the	Year or Approved for Future	Payment
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
Children's Dyslexia Center 836 Mark Avenue N Canton, OH 44702	Not applicable	PC	Tutoring dyslexic children	5,000
Community Action 905 Pittsburgh Ave Wooster, OH 44691	Not Applicable	PC	Out-of-county medical transportation	10,000
Love Center 1291 Massillon Road Millersburg, OH 44654	Not Applicable	PC	Food pantry	5,000
Meals on Wheels 2363 Nave Rd SE Massillon, OH 44646	Not Applicable	PC	New truck for meal delivery	25,000
The Salvation Army 315 6th St NE Massillon, OH 44646	Not Applicable	PC	Food pantry	5,500

Total

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301,267

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation If recipient is an individual, Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient

	or substantial contributor			
a Paid during the year				
Stark County Board of Dev Disabilities	Not Applicable	PC	Classroom amplification system	26,720

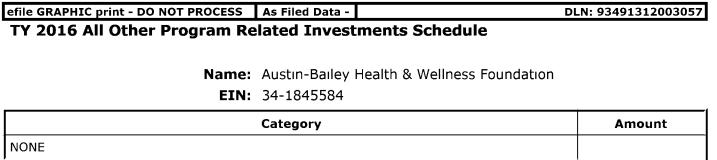
2950 Whipple Ave NW Canton, OH 44708	,		

Name and address (home or business)

3a

Canton, OH 44708		
Total	 	301,267

efile GRAPHIC print - DO NOT F	PROCESS	As Filed D	ata -			DLN: 93491312003057
TY 2016 Accounting Fo	ees Sch	edule				
	Name:	Austin-B	ailev He	alth & Wellr	ness Foundation	
Name: Austin-Bailey Health & Wellness Foundation EIN: 34-1845584						
Category	Am	ount		vestment come	Adjusted Net Income	Disbursements for Charitable Purposes
VAR SERVICES INCL AUDIT & TAX		10,725				10,725



efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93491312003057 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. TY 2016 Depreciation Schedule

Name: Austin-Bailey Health & Wellness Foundation EIN: 34-1845584

2003057

End of Year Fair

Market Value

1,656,475

Value

1,656,475

Name: Austin-Bailey Health & Wellness Foundation **EIN:** 34-1845584 Name of Bond **End of Year Book**

WELLS FARGO

DLN: 93491312003057

Name: Austin-Bailey Health & Wellness Foundation

EIN: 34-1845584

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Naı	me of Stock	 ear Book alue	End of Year Fair Market Value
WELLS FARGO		4,228,941	4,228,941

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491312003057					
TY 2016 Investments - Other Schedule							

FMV

Name: Austin-Bailey Health & Wellness Foundation

1,064,777

1,064,777

EIN: 34-1845584			
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value

OTHER ALTERNATIVE INVESTMENTS

efile GRAPHIC print - DO NOT PROCESS	S As Filed Data	-	DLI	N: 93491312003057
TY 2016 Legal Fees Schedul	е			_
Nam	e: Austin-Baile	y Health & Wellnes	ss Foundation	
EII	N: 34-1845584			
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
VAR LEGAL SERVICES	150			150

Name: Austin-Bailey Health & Wellness Foundation

ETNL 24 104FF04

As Filed Data -

MISCELLANEOUS RECEIVABLE

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Description

	EIN: 34-1843384	
Other Assets Schedule		

Beginning of Year -

Book Value

606

DLN: 93491312003057

- End of Year Book Value
 - Market Value

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491312003057			
TY 2016 Other Expenses Schedule							
Name	: Austin-Bailey He	ealth & Wellness	Foundation				
	I: 34-1845584						
Other Expenses Schedule							
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
DUES & SUBSCRIPTIONS	4,396	44		4,352			
INSURANCE	6,203	1,551		4,652			
BOARD OF TRUSTEES EXPENSE	9,079	2,270	1	6,809			

8,776

29,995

176

29,995

8,600

OFFICE

INVESTMENT FEES

DLN: 93491312003057

Name: Austin-Bailey Health & Wellness Foundation

EIN: 34-1845584

EIN: 34-1845584

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•	Other Income Schedule						
	Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income			
	THE CAMPBELL FUND TRUST (94-6260018)						
	CUNDILL GLOBAL VALUE LP (43-1691933)						

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491312003057					
TY 2016 Other Increases Schedule								
Name:	Austin-Bailey	Health & Wellness Foundation						
EIN:	34-1845584							
			_					
De	escription		Amount					
GRANTS ACCRUED PY - PAID CY	escription		Amount 59,400					
	escription							

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	.N: 93491312003057			
TY 2016 Taxes Schedule							
Name:	Austin-Baile	y Health & Wellnes	s Foundation				
EIN:	34-1845584	•					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes			
ATTORNEY GENERAL FILING FEES	200						
EXCISE TAX	2,253						
OTHER	25						