

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.

2017

Open to Public
Inspection

For calendar year 2017, or tax year beginning 04-01-2017, and ending 03-31-2018

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							
City or town, state or province, country, and ZIP or foreign postal code CHELSEA, MI 48118		C If exemption application is pending, check here ► <input type="checkbox"/>							
G Check all that apply <table border="0"> <tr> <td><input type="checkbox"/> Initial return</td> <td><input type="checkbox"/> Initial return of a former public charity</td> </tr> <tr> <td><input type="checkbox"/> Final return</td> <td><input type="checkbox"/> Amended return</td> </tr> <tr> <td><input type="checkbox"/> Address change</td> <td><input type="checkbox"/> Name change</td> </tr> </table>		<input type="checkbox"/> Initial return	<input type="checkbox"/> Initial return of a former public charity	<input type="checkbox"/> Final return	<input type="checkbox"/> Amended return	<input type="checkbox"/> Address change	<input type="checkbox"/> Name change	D 1. Foreign organizations, check here ► <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/>	
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H Check type of organization <table border="0"> <tr> <td><input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation</td> <td><input type="checkbox"/> Other taxable private foundation</td> </tr> <tr> <td><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust</td> <td><input type="checkbox"/> Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ 45,146,257</td> </tr> </table>		<input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation	<input type="checkbox"/> Other taxable private foundation	<input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust	<input type="checkbox"/> Fair market value of all assets at end of year (from Part II, col. (c), line 16) ► \$ 45,146,257	E If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/>			
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<input type="checkbox"/> Cash	<input checked="" type="checkbox"/> Accrual								
<input type="checkbox"/> Other (specify) _____									
		(d) Disbursements for charitable purposes (cash basis only)							

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check ► <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	199	199		
	4 Dividends and interest from securities	548,810	548,810		
	5a Gross rents	327,286	327,286		
	b Net rental income or (loss)	176,005			
	6a Net gain or (loss) from sale of assets not on line 10	-326,133			
	b Gross sales price for all assets on line 6a	2,696,075			
	7 Capital gain net income (from Part IV, line 2)		695,978		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances	97,625			
	b Less Cost of goods sold	56,861			
	c Gross profit or (loss) (attach schedule)		40,764	40,764	
	11 Other income (attach schedule)	4,724,521	30,754	4,680,424	
	12 Total. Add lines 1 through 11	5,315,447	1,603,027	4,721,188	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	133,912	53,565	0	80,347
	14 Other employee salaries and wages	3,103,939	93,562	2,792,066	218,311
	15 Pension plans, employee benefits	52,230	7,835	0	44,395
	16a Legal fees (attach schedule)	169,260	0	0	169,260
	b Accounting fees (attach schedule)	45,740	0	0	45,740
	c Other professional fees (attach schedule)	441,128	0	370,219	70,909
	17 Interest	302,749	0	302,749	0
	18 Taxes (attach schedule) (see instructions)	458,932	31,278	15,130	400,524
	19 Depreciation (attach schedule) and depletion	973,824	0	251,799	
	20 Occupancy	21,772	0	0	21,772
	21 Travel, conferences, and meetings	26,174	0	17,871	8,303
	22 Printing and publications	52,322	0	0	1,118
	23 Other expenses (attach schedule)	1,614,181	347,341	1,106,553	213,624
	24 Total operating and administrative expenses.				
	Add lines 13 through 23	7,396,163	533,581	4,856,387	1,274,303
	25 Contributions, gifts, grants paid	392,295			468,987
	26 Total expenses and disbursements. Add lines 24 and 25	7,788,458	533,581	4,856,387	1,743,290
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-2,473,011			
	b Net investment income (if negative, enter -0-)		1,069,446		
	c Adjusted net income (if negative, enter -0-)			0	

	Part II Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 Cash—non-interest-bearing	4,696	5,324	5,324	
	2 Savings and temporary cash investments	300,484	310,286	310,286	
	3 Accounts receivable ► 37,515				
	Less allowance for doubtful accounts ► 1,500	30,906	36,015	36,015	
	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	22,271	21,234	21,234	
	9 Prepaid expenses and deferred charges	3,586	12,576	12,576	
	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)	24,663,170	24,168,837	24,168,837	
	14 Land, buildings, and equipment basis ► 27,119,821				
	Less accumulated depreciation (attach schedule) ► 6,527,836	21,271,996	20,591,985	20,591,985	
	15 Other assets (describe ►)				
	16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	46,297,109	45,146,257	45,146,257	
	17 Accounts payable and accrued expenses	288,760	188,168	188,168	
	18 Grants payable	121,406	48,354	48,354	
	19 Deferred revenue	401,526	447,168	447,168	
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable (attach schedule)	10,381,378	9,838,188	9,838,188	
	22 Other liabilities (describe ►)	229,269	246,167	246,167	
	23 Total liabilities (add lines 17 through 22)	11,422,339	10,768,045	10,768,045	
	Foundations that follow SFAS 117, check here ► <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24 Unrestricted				
	25 Temporarily restricted				
	26 Permanently restricted				
	Foundations that do not follow SFAS 117, check here ► <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27 Capital stock, trust principal, or current funds	0	0	0	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	0	
	29 Retained earnings, accumulated income, endowment, or other funds	34,874,770	34,378,212	34,378,212	
	30 Total net assets or fund balances (see instructions)	34,874,770	34,378,212	34,378,212	
	31 Total liabilities and net assets/fund balances (see instructions)	46,297,109	45,146,257	45,146,257	

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	34,874,770
2 Enter amount from Part I, line 27a	2	-2,473,011
3 Other increases not included in line 2 (itemize) ►	3	2,524,743
4 Add lines 1, 2, and 3	4	34,926,502
5 Decreases not included in line 2 (itemize) ►	5	548,290
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	34,378,212

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)			(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a See Additional Data Table					
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a 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					
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))		
a 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	695,978	
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		818,977	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

 Yes No

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

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	2,380,799	24,570,979	0 096895
2015	2,885,243	27,031,264	0 106737
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
2 Total of line 1, column (d)			2 0 834489
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 166898
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			4 24,802,298
5 Multiply line 4 by line 3			5 4,139,454
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 10,694
7 Add lines 5 and 6			7 4,150,148
8 Enter qualifying distributions from Part XIII, line 4			8 2,161,131

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 instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)	1	21,389
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		
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	0
3	Add lines 1 and 2.	3	21,389
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5	21,389
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	29,993
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	0
7	Total credits and payments Add lines 6a through 6d.	7	29,993
8	Enter any penalty for underpayment of estimated tax Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	0
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	8,604
11	Enter the amount of line 10 to be Credited to 2018 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?	1a	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?	1b	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>			
c	Did the foundation file Form 1120-POL for this year?	1c	Yes	No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
(1)	On the foundation ► \$ _____ 0	(2)	On foundation managers ► \$ _____ 0	
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	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? <i>If "Yes," attach a conformed copy of the changes</i>	3	Yes	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Yes	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	Yes	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	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 <ul style="list-style-type: none"> By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 	6	Yes	
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	► MI			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i>	8b	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	Yes	No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	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 ► <u>AMY HEYDLAUFF</u>	Telephone no	► (734) 433-4599
Located at ► <u>14800 E OLD US 12 CHELSEA MI</u>		ZIP+4 ► <u>48118</u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here and enter the amount of tax-exempt interest received or accrued during the year.	15	<input type="checkbox"/>
16	At any time during calendar year 2017, 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 <input type="checkbox"/> No <input checked="" type="checkbox"/>

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.	1b	No <input type="checkbox"/>
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?	1c	No <input type="checkbox"/>
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 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? If "Yes," list the years ► 20____, 20____, 20____, 20____	2a	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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____	2c	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	3a	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b	If "Yes," did it have excess business holdings in 2017 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 2017).	3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	
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 2017?	4b	No <input type="checkbox"/>

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

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If any answer is "Yes" to 5a(1)–(5), did 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<i>If "Yes," attach the statement required by Regulations section 53 4945-5(d)</i>			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	6b
	<i>If "Yes" to 6b, file Form 8870</i>			No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			7b

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	59,771	6,641	0
ASHLEY TOMASI 14800 OLD US 12 CHELSEA, MI 48118	COALITION COORDINATO 40 00	43,553	6,504	0

Total number of other employees paid over \$50,000. ► 0

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
RUSSELL INVESTMENTS 1301 SECOND AVENUE SEATTLE, WA 98101	INVESTMENT MANAGEMENT FEES	195,989
SCHIFF HARDIN LLP 350 S MAIN STREET SUITE 210 ANN ARBOR, MI 48104	ATTORNEY FEES	154,697
K&B ASPHALT SEALCOATING INC 1451 BRENNER HWY CLAYTON, MI 49235	PARKING LOT IMPROVEMENTS	113,682

Total number of others receiving over \$50,000 for professional services. ► 0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 OVERSIGHT OF THE CHELSEA, DEXTER, MANCHESTER & STOCKBRIDGE WELLNESS CENTERS WHICH SERVE APPROXIMATELY 6,700 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	4,827,861
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	200,192
3	
4	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions	
3	
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	24,839,075
b	Average of monthly cash balances.	1b	340,923
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	25,179,998
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	25,179,998
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	377,700
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	24,802,298
6	Minimum investment return. Enter 5% of line 5.	6	1,240,115

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

1	Minimum investment return from Part X, line 6.	1	1,240,115
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	21,389
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	21,389
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	1,218,726
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	1,218,726
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	1,218,726

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	1,743,290
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	417,841
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	2,161,131
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	2,161,131
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 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				1,218,726
2 Undistributed income, if any, as of the end of 2017			0	
a Enter amount for 2016 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2017				
a From 2012.				
b From 2013.	13,639,331			
c From 2014.	549,326			
d From 2015.	1,574,343			
e From 2016.	1,159,235			
f Total of lines 3a through e.	16,922,235			
4 Qualifying distributions for 2017 from Part XII, line 4 ► \$ 2,161,131			0	
a Applied to 2016, 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 2017 distributable amount.				1,218,726
e Remaining amount distributed out of corpus	942,405			
5 Excess distributions carryover applied to 2017 (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	17,864,640			
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 2016 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018				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 2012 not applied on line 5 or line 7 (see instructions)	0			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	17,864,640			
10 Analysis of line 9				
a Excess from 2013.	13,639,331			
b Excess from 2014.	549,326			
c Excess from 2015.	1,574,343			
d Excess from 2016.	1,159,235			
e Excess from 2017.	942,405			

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 2017, enter the date of the ruling. ►			
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 THE WEBSITE. ALL INFORMATION RELATED TO GRANT APPLICATION IS POSTED ON THE WEBSITE. APPLICANTS WILL BE REQUIRED TO PROVIDE PROOF OF NON-PROFIT STATUS, RESPONSIBLE CONTACT, DEMONSTRATED NEED, PURPOSE, MISSION, BUDGET, METHOD OF MEASUREMENT, AND SUSTAINABILITY PLAN

c Any submission deadlines

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

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

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

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total			► 3a	468,987
b Approved for future payment ST JOSEPH MERCY HOSPITAL 775 S MAIN STREET CHELSEA, MI 48118	NONE	PC	SJMHS RENTAL PAYMENTS	48,354
Total			► 3b	48,354

Part XVI-A Analysis of Income-Producing Activities

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					4,634,179
b PROGRAM SERVICES					15,491
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	199	
4 Dividends and interest from securities.			18	548,810	
5 Net rental income or (loss) from real estate					
a Debt-financed property.			16	6,618	
b Not debt-financed property.			16	169,387	
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	-326,133	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			03	40,764	
11 Other revenue					
a MAGAZINE ADVERTISING REVENUE	900099	44,097		0	0
b K-1 OTHER INCOME RUSSELL MULTI ASSET CORE FUND	900099	0	14	31,666	
c K-1 OTHER INCOME RUSSELL CORE BOND FUND		0	14	-912	
d _____					
e _____					
12 Subtotal Add columns (b), (d), and (e).		44,097		470,399	4,649,670
13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations.)					5,164,166

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

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.)

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.)
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 FIXED ASSETS	P		
RUSSELL MULTI ASSET CORE BOND PLUS	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)
822,622			822,622
212,153			212,153
		3,645	-3,645
		9,019	-9,019
		3,132	-3,132
2,696,075		3,019,076	-323,001

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 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	
			822,622
			212,153
			-3,645
			-9,019
			-3,132
			-323,001

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, (e) other allowances
AMY HEYDLAUFF 14800 OLD US 12 CHELSEA, MI 48118	CEO 50 00	133,912	15,447	0
SCOTT BROSHAR 14800 OLD US 12 CHELSEA, MI 48118	CHAIR 8 00	0	0	0
ROB CASALOU 14800 OLD US 12 CHELSEA, MI 48118	PRESIDENT 3 00	0	0	0
PATRICK CONLIN 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 3 00	0	0	0
SALLY DEVOL 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 6 00	0	0	0
KEVIN DOMBKOWSKI 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 6 00	0	0	0
CINDY DRESCH 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 6 00	0	0	0
NANCY GRAEBNER 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 3 00	0	0	0
ANNE KITTENDORF 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 4 00	0	0	0
DOUGLAS LANCE 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 3 00	0	0	0
KARI NEWMAN 14800 OLD US 12 CHELSEA, MI 48118	VICE CHAIR 6 00	0	0	0
RUTH VANBOGELEN 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 6 00	0	0	0
COY VAUGHN 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 4 00	0	0	0
JEFF WALLACE 14800 OLD US 12 CHELSEA, MI 48118	TREASURER 6 00	0	0	0
MICHAEL WILLIS 14800 OLD US 12 CHELSEA, MI 48118	BOARD MEMBER 4 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)				
<i>a Paid during the year</i>				
BALLET CHELSEA-YDTPO BOX 591 CHELSEA, MI 48118	NONE	PC	ADAPTIVE MOVEMENT & 5K TUTU RUN	13,800
CHELSEA COMMUNITY KITCHEN 305 S MAIN ST STE 100 CHELSEA, MI 48118	NONE	PC	KIDS COOKING PROGRAM	500
CHELSEA SCHOOL DISTRICT 500 WASHINGTON STREET CHELSEA, MI 48118	NONE	PC	CAMP GABIKA AND EDUCATIONAL SUPPORT	13,000
CHELSEA SENIOR CENTER 512 E WASHINGTON STREET CHELSEA, MI 48118	NONE	PC	FESTIVAL OF TABLES	10,500
DEXTER COALTION 14800 E OLD US HWY 12 CHELSEA, MI 48118	NONE	PC	DEXTER FARM TO SCHOOL AND FITNESS FESTIVAL	47,308
Total			►	468,987
3a				

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 DEXTER, MI 48130	NONE	PC	WINTER MARKET	5,500
GRASS LAKE CHARTER TOWNSHIP 373 LAKESIDE DR GRASS LAKE, MI 49240	NONE	PC	SHARE-USE COURTS	1,100
GRASS LAKE COMMUNITY SCHOOLS 899 UNION STREET GRASS LAKE, MI 49240	NONE	PC	EDUCATIONAL AND PHYSICAL EDUCATION SUPPORT	22,000
GRASS LAKE FARMERS MARKET PO BOX 446 GRASS LAKE, MI 49240	NONE	PC	GRASS LAKE FARMERS MARKET	62,750
GRASS LAKE WELLNESS COALITION 14800 E OLD US HWY 12 CHELSEA, MI 48118	NONE	PC	YOGA BY THE LAKE	9,300
Total			►	468,987
3a				

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				
JACKSON YMCA127 W WESLEY STREET GRASS LAKE, MI 49240	NONE	PC	POUND AND PILATES	500
MANCHESTER COALITION 14800 E OLD US HWY 12 CHELSEA, MI 48118	NONE	PC	GENERAL OPERATING SUPPORT	25,410
MANCHESTER COMMUNITY SCHOOLS 410 CITY RD MANCHESTER, MI 48158	NONE	PC	SAFE ROUTES TO SCHOOL AND EDUCATIONAL SUPPORT	5,900
NATIONAL KIDNEY FOUNDATION OF MICHIGAN 1169 OAK VALLEY DRIVE ANN ARBOR, MI 48108	NONE	PC	DIABETES PREVENTION PROGRAM	11,000
PROGRAMS TO EDUCATE ALL CYCLISTS (PEAC) 32 N WASHINGTON STREET STE 1 YPSILANTI, MI 48197	NONE	PC	PEAC - DEXTER	4,000
Total			►	468,987
3a				

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				
RUN FOR THE ROLLS 112 E MIDDLE STREET CHELSEA, MI 48118	NONE	PC	RUN FOR THE ROLLS	2,000
ST JOSEPH MERCY CHELSEA 775 S MAIN STREET CHELSEA, MI 48118	NONE	PC	CHELSEA FARMERS MARKET SUPPORT AND PHYSICAL FITNESS SUPPORT	89,456
ST LOUIS CENTER 16195 OLD US HWY 12 CHELSEA, MI 48118	NONE	PC	23RD ANNUAL GOLF & GLORY	500
STOCKBRIDGE COMMUNITY OUTREACH PO BOX 682 STOCKBRIDGE, MI 49285	NONE	PC	TIDE ME OVER & COOKING PROJECT	10,200
STOCKBRIDGE COMMUNITY SCHOOLS 305 W ELIZABETH STREET STOCKBRIDGE, MI 49285	NONE	PC	STRATEGIC DEVELOPMENT OF OPEN SPACES	1,302
Total			►	468,987
3a				

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	MANCHESTER FARMERS MARKET	15,000
ADULT LEARNERS INSTITUTE 14800 E OLD US HWY 12 CHELSEA, MI 48118	NONE	PC	WELLNESS ALTERNATIVES	335
EDDY DISCOVERY CENTER 17030 BUSH RD CHELSEA, MI 48118	NONE	PC	NATURE PLAY AREA	2,000
DEXTER WELLNESS CENTER 2810 BAKER RD DEXTER, MI 48130	NONE	PC	ALTERNATIVE STUDENTS FITNESS	1,184
LEGACY LAND CONSERVANCY 1100 N MAIN STREET ANN ARBOR, MI 48104	NONE	PC	FAMILY REC BROUCHURE	500
Total			►	468,987
3a				

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)				
<i>a Paid during the year</i>				
VILLAGE OF GRASS LAKE 119 NORTH LAKE GRASS LAKE, MI 49240	NONE	PC	GRASS LAKE VILLAGE BIKE RACKS	2,500
GRASS LAKE METHODIST CHURCH 449 E MICHIGAN AVE GRASS LAKE, MI 49240	NONE	PC	FOOD WITH FRIENDS PLANS	1,500
AMERICAN CANCER SOCIETY PO BOX 464 GRASS LAKE, MI 49240	NONE	PC	RUN FOR HOPE	500
MANCHESTER AREA HISTORICAL SOCIETY 302 E MAIN MANCHESTER, MI 48158	NONE	PC	2017 SESQUICENTENNIAL	1,500
MANCHESTER COMMUNITY RESOURCE CENTER PO BOX 833 MANCHESTER, MI 48158	NONE	PC	KIWANIS YOUTH LEADERSHIP	7,500
Total				468,987
3a				

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 AREA SENIOR CITIZENS COUNC 912 CITY RD PO BOX 31 MANCHESTER, MI 48158	NONE	PC	SENIOR NUTRITION SUPPORT	1,000
TOWN HALL PLAYERS 4515 SHEPPER RD STOCKBRIDGE, MI 49285	NONE	PC	BLATHER, BARNEY, AND BALDERDASH	500
STOCKBRIDGE COMMUNITY EDUCATION 305 W ELIZABETH STREET STOCKBRIDGE, MI 49285	NONE	PC	COMMUNITY PATHWAYS PLANS	11,250
VILLAGE OF STOCKBRIDGE 775 S MAIN STREET CHELSEA, MI 48118	NONE	PC	BASKETBALL COURTS	11,000
ST JOSEPH MERCY HOSPITAL 775 S MAIN STREET CHELSEA, MI 48118	NONE	PC	SJMHS RENTAL PAYMENTS	76,692
Total			►	468,987
3a				

TY 2017 Accounting Fees Schedule

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

Accounting Fees Schedule

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	45,740	0	0	45,740

TY 2017 Investments - Other Schedule

Name: THE CHELSEA HEALTH AND WELLNESS
FOUNDATION

EIN: 26-3040367

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
RUSSELL INSTL FDS MULTI ASSET CORE PLUS FD	FMV	17,786,745	17,786,745
RUSSELL INSTL FDS LLC CORE BD FD	FMV	3,511,321	3,511,321
RUSSELL TTL RETURN Q CL B SRS 6	FMV	2,870,771	2,870,771

**TY 2017 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	4,865,270	16,174,097	16,174,097
BUILDING IMPROVEMENTS	960,497	277,098	683,399	683,399
MOVABLE EQUIPMENT	1,084,050	715,836	368,214	368,214
IT EQUIPMENT	406,388	296,388	110,000	110,000
IT SOFTWARE	37,216	34,210	3,006	3,006
FURNITURE AND FIXTURES	491,303	339,034	152,269	152,269

TY 2017 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	169,260	0	0	169,260

TY 2017 Other Decreases Schedule

Name: THE CHELSEA HEALTH AND WELLNESS
FOUNDATION

EIN: 26-3040367

Description	Amount
INCOME FROM K-1 RUSSELL MULTI ASSET CORE PLUS FUND	468,827
INCOME FROM K-1 RUSSELL CORE BOND FUND	79,463

TY 2017 Other Expenses Schedule

Name: THE CHELSEA HEALTH AND WELLNESS
FOUNDATION

EIN: 26-3040367

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADVERTISING	225,333	0	221,597	3,736
TELEPHONE	41,518	0	36,884	4,634
INSURANCE	48,808	0	0	48,808
POSTAGE AND SHIPPING	34,044	0	33,725	319
UTILITIES	355,865	71	355,155	639
SUBSCRIPTIONS AND PUBLICATIONS	6,063	0	0	6,063
LICENSES	64,635	0	64,635	0
COUPONS	8,459	0	8,459	0
EQUIPMENT LEASING	14,808	0	14,808	0
BAD DEBT	26,182	0	26,182	0

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
REPAIRS AND MAINTENANCE	68,040	0	68,040	0
MISCELLANEOUS	129,943	0	122,177	7,766
SUPPLIES	159,073	0	154,711	4,362
INVESTMENT FEES	195,989	195,989	0	0
EXCESS OPERATING EXPENSES OVER REVENUE- CASH BASIS	0	0	0	53,337
COALITION PROJECT EXPENSE	83,960	0	0	83,960
RENTAL EXPENSES	76,276	76,276	0	0
RENTAL EXPENSE- DEXTER LEGAL FEES	2,891	2,891	0	0
RENTAL EXPENSE- DEXTER OCCUPANCY	1,028	1,028	0	0
RENTAL EXPENSE- DEXTER PROPERTY TAXES	20,445	20,445	0	0

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
RENTAL EXPENSE- DEXTER DEPRECIATION	6,998	6,998	0	0
RENTAL EXPENSE- DEXTER INTEREST EXPENSE	14,299	14,299	0	0
RENTAL EXPENSE- CHELSEA WELLNESS PROPERTY TAXES	29,344	29,344	0	0
LATE FEES	180	0	180	0

TY 2017 Other Income Schedule

Name: THE CHELSEA HEALTH AND WELLNESS
FOUNDATION

EIN: 26-3040367

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
MEMBERSHIP FEES	4,634,179		4,634,179
PROGRAM SERVICES	15,491		15,491
MAGAZINE ADVERTISING REVENUE	44,097	0	0
K-1 OTHER INCOME RUSSELL MULTI ASSET CORE FUND	31,666	31,666	31,666
K-1 OTHER INCOME RUSSELL CORE BOND FUND	-912	-912	-912

TY 2017 Other Increases Schedule

Name: THE CHELSEA HEALTH AND WELLNESS
FOUNDATION

EIN: 26-3040367

Description	Amount
UNREALIZED GAIN / LOSS	1,628,111
TAX BASIS ADJUSTMENT FROM SALE OF MULTI ASSET CORE PLUS FUND	896,632

TY 2017 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	29,271	38,955
OTHER ACCRUED LIABILITIES	199,998	207,212

TY 2017 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	222,408	0	222,408	0
OUTSIDE CONTRACT SERVICES	218,720	0	147,811	70,909

TY 2017 Taxes Schedule

Name: THE CHELSEA HEALTH AND WELLNESS
FOUNDATION

EIN: 26-3040367

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROPERTY TAXES	403,541	0	15,130	388,411
EXCISE TAX	12,000	0	0	0
FOREIGN TAXES PAID	31,278	31,278	0	0
PERSONAL PROPERTY TAXES	12,113	0	0	12,113