

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
▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No 1545-0052

2018

Open to Public Inspection

For calendar year 2018 or tax year beginning

, and ending

Name of foundation HEALTH FOUNDATION FOR WESTERN &		A Employer identification number 22-3804398
Number and street (or P.O. box number if mail is not delivered to street address) 726 EXCHANGE STREET	Room/suite 518	B Telephone number (716) 852-3030
City or town, state or province, country, and ZIP or foreign postal code BUFFALO, NY 14210-1485		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <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"/>
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		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 114,700,729.	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

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))

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received	2,000,000.		N/A	
2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
3 Interest on savings and temporary cash investments				
4 Dividends and interest from securities	1,616,269.	2,473,230.		STATEMENT 2
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	5,282,434.			STATEMENT 1
b Gross sales price for all assets on line 6a	22,061,208.			
7 Capital gain net income (from Part IV, line 2)		8,880,711.		
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)				
11 Other income	10,552.	36,177.		STATEMENT 3
12 Total. Add lines 1 through 11	8,909,255.	11,390,118.		
13 Compensation of officers, directors, trustees, etc.	382,080.	0.		382,080.
14 Other employee salaries and wages	658,515.	0.		658,515.
15 Pension plans, employee benefits	158,987.	0.		158,987.
16a Legal fees	5,292.	0.		5,292.
b Accounting fees	22,300.	5,575.		16,725.
c Other professional fees	1,651,887.	841,745.		810,142.
17 Interest				
18 Taxes	201,625.	78,343.		0.
19 Depreciation and depletion	49,027.	0.		
20 Occupancy	120,261.	0.		120,261.
21 Travel, conferences, and meetings	302,493.	0.		302,493.
22 Printing and publications	11,845.	0.		11,845.
23 Other expenses	338,258.	111,141.		338,258.
24 Total operating and administrative expenses. Add lines 13 through 23	3,902,570.	1,036,804.		2,804,598.
25 Contributions, gifts, grants paid	3,129,048.			3,129,048.
26 Total expenses and disbursements. Add lines 24 and 25	7,031,618.	1,036,804.		5,933,646.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	1,877,637.			
b Net investment income (if negative, enter -0-)		10,353,314.		
c Adjusted net income (if negative, enter -0-)			N/A	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of year amounts only		Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
Assets	1 Cash - non-interest-bearing			154,961.	264,573.	264,573.	
	2 Savings and temporary cash investments			3,257,099.	810,869.	810,869.	
	3 Accounts receivable ▶						
	Less: allowance for doubtful accounts ▶			5,146.			
	4 Pledges receivable ▶						
	Less: allowance for doubtful accounts ▶						
	5 Grants receivable						
	6 Receivables due from officers, directors, trustees, and other disqualified persons						
	7 Other notes and loans receivable ▶						
	Less: allowance for doubtful accounts ▶						
	8 Inventories for sale or use						
	9 Prepaid expenses and deferred charges						
	10a Investments - U.S. and state government obligations						
	b Investments - corporate stock STMT 9			21,195,037.	18,963,181.	18,963,181.	
	c Investments - corporate bonds						
	Liabilities	11 Investments - land, buildings, and equipment basis ▶					
Less: accumulated depreciation ▶							
12 Investments - mortgage loans							
13 Investments - other STMT 10				102,611,087.	94,095,809.	94,095,809.	
14 Land, buildings, and equipment basis ▶ 491,567.							
Less: accumulated depreciation ▶ 327,405.				180,204.	164,162.	164,162.	
15 Other assets (describe ▶)				500,603.	402,135.	402,135.	
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)				127,904,137.	114,700,729.	114,700,729.	
17 Accounts payable and accrued expenses				47,000.	111,000.		
18 Grants payable							
Net Assets or Fund Balances	19 Deferred revenue						
	20 Loans from officers, directors, trustees, and other disqualified persons						
	21 Mortgages and other notes payable						
	22 Other liabilities (describe ▶ DEFERRED COMPENSAT)			273,920.	241,575.		
23 Total liabilities (add lines 17 through 22)			320,920.	352,575.			
Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31	24 Unrestricted			127,583,217.	112,557,432.		
	25 Temporarily restricted						
	26 Permanently restricted				1,790,722.		
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31	27 Capital stock, trust principal, or current funds					
		28 Paid-in or capital surplus, or land, bldg, and equipment fund					
		29 Retained earnings, accumulated income, endowment, or other funds					
		30 Total net assets or fund balances			127,583,217.	114,348,154.	
	31 Total liabilities and net assets/fund balances			127,904,137.	114,700,729.		

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	127,583,217.
2 Enter amount from Part I, line 27a	2	1,877,637.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	129,460,854.
5 Decreases not included in line 2 (itemize) ▶ UNREALIZED LOSSES ON INVESTMENTS	5	15,112,700.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	114,348,154.

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Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, 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 PUBLICLY TRADED INVESTMENTS	P	VARIOUS	VARIOUS
b NONPUBLICLY TRADED INVESTMENTS	P	VARIOUS	VARIOUS
c PASSED THROUGH K-1S	P	VARIOUS	VARIOUS
d CAPITAL GAINS DIVIDENDS			
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 8,575,793.		7,201,182.	1,374,611.
b 13,272,236.		10,717,663.	2,554,573.
c		<4,738,348.>	4,738,348.
d 213,179.			213,179.
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.

(i) FMV 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			1,374,611.
b			2,554,573.
c			4,738,348.
d			213,179.
e			

2 Capital gain net income or (net capital loss)	<div style="display: flex; align-items: center;"> <div style="border-left: 1px solid black; border-right: 1px solid black; padding: 0 5px;"> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div> <div style="margin-left: 10px;"> 2 8,880,711. </div> </div>
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). If (loss), enter -0- in Part I, line 8	<div style="display: flex; align-items: center;"> <div style="border-left: 1px solid black; border-right: 1px solid black; padding: 0 5px;"> If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8 </div> <div style="margin-left: 10px;"> 3 N/A </div> </div>

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 doesn't qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see the 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))
2017	5,607,986.	119,695,686.	.046852
2016	5,854,361.	109,897,074.	.053271
2015	5,784,080.	115,975,430.	.049873
2014	5,856,177.	120,458,209.	.048616
2013	5,292,642.	115,780,290.	.045713

2 Total of line 1, column (d)	2 .244325
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3 .048865
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4 123,983,224.
5 Multiply line 4 by line 3	5 6,058,440.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6 103,533.
7 Add lines 5 and 6	7 6,161,973.
8 Enter qualifying distributions from Part XII, line 4	8 5,966,631.

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)			
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		1	207,066.
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	207,066.
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	207,066.
6 Credits/Payments:			
a 2018 estimated tax payments and 2017 overpayment credited to 2018	6a	10,000.	
b Exempt foreign organizations - tax withheld at source	6b	0.	
c Tax paid with application for extension of time to file (Form 8868)	6c	110,000.	
d Backup withholding erroneously withheld	6d	0.	
7 Total credits and payments. Add lines 6a through 6d	7	120,000.	
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	2,728.	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	89,794.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		
11 Enter the amount of line 10 to be: Credited to 2019 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11		

Part VII-A Statements Regarding Activities

	Yes	No
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?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. 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		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input type="checkbox"/> \$ 0. (2) On foundation managers <input type="checkbox"/> \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. <input type="checkbox"/> \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If "Yes," has it filed a tax return on Form 990-T for this year?		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		X
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?	X	
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	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions <input type="checkbox"/> <u>NY</u>		
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	X	
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 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	X	

N/A

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Part VII-A Statements Regarding Activities (continued)

	Yes	No
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		X
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		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>WWW.HFWCNY.ORG</u>	X	
14 The books are in care of ► <u>CAROL L. QUARANTILLO</u> Telephone no. ► <u>716-852-3030</u> Located at ► <u>726 EXCHANGE STREET, SUITE 518, BUFFALO, NY</u> ZIP+4 ► <u>14210-1485</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		N/A
16 At any time during calendar year 2018, 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 the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►		X

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		X
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 2018?		X
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 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? If "Yes," list the years ►	<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)	N/A	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ►		
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 2018 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 2018)	N/A	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		X
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 2018?		X

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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

N/A

Organizations relying on a current notice regarding disaster assistance, check here

☒**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?

N/A

☐ 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

X

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?

N/A

7b

8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?☐ Yes ☒ No**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1 List all officers, directors, trustees, and 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
SEE STATEMENT 14		355,698.	26,382.	0.

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
DIANE OYLER - 726 EXCHANGE STREET, SUITE 518, BUFFALO, NY 14210	VICE PRESIDENT OF PROGRAM	107,350.	14,987.	0.
MONICA BROWN - 726 EXCHANGE STREET, SUITE 518, BUFFALO, NY 14210	PROGRAM OFFICER	92,671.	15,602.	0.
MARNIE ANNESE - 431 E. FAYETTE STREET, SUITE 250, SYRACUSE, NY	PROGRAM OFFICER	75,836.	1,655.	0.
CORALIE BROWN - 726 EXCHANGE STREET, SUITE 518, BUFFALO, NY 14210	GRANTS MANAGER	60,641.	3,990.	0.
STEVEN COPPS - 726 EXCHANGE STREET, SUITE 518, BUFFALO, NY 14210	OFFICE/EVENTS MANAGER	51,571.	13,050.	0.
Total number of other employees paid over \$50,000				0

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NANCY BLASCHAK 8822 VIOLET PARKWAY, EDEN, NY 14057	PROGRAM IMPLEMENTATION ADVIS	60,000.
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 SEE STATEMENT 15	517,803.
2 SEE STATEMENT 16	163,359.
3 SEE STATEMENT 17	102,270.
4 SEE STATEMENT 18	127,079.

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
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	125,473,027.
b	Average of monthly cash balances	1b	398,266.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	125,871,293.
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	125,871,293.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,888,069.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	123,983,224.
6	Minimum investment return. Enter 5% of line 5	6	6,199,161.

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	6,199,161.
2a	Tax on investment income for 2018 from Part VI, line 5	2a	207,066.
b	Income tax for 2018 (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	207,066.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	5,992,095.
4	Recoveries of amounts treated as qualifying distributions	4	73,655.
5	Add lines 3 and 4	5	6,065,750.
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	6,065,750.

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	5,933,646.
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	32,985.
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	5,966,631.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	5,966,631.

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.

Form 990-PF (2018)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				6,065,750.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			5,756,371.	
b Total for prior years.		0.		
3 Excess distributions carryover, if any, to 2018:				
a From 2013				
b From 2014				
c From 2015				
d From 2016				
e From 2017				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2018 from Part XII, line 4: \$ 5,966,631.				
a Applied to 2017, but not more than line 2a			5,756,371.	
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 2018 distributable amount				210,260.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2018 (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:	0.			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
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 2017. Subtract line 4a from line 2a. Taxable amount - see instructions			0.	
f Undistributed income for 2018. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019				5,855,490.
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 2013 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2014				
b Excess from 2015				
c Excess from 2016				
d Excess from 2017				
e Excess from 2018				

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

N/A

- 1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling

- b** Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**

- ▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Name of the organization

HEALTH FOUNDATION FOR WESTERN &

Employer identification number

22-3804398

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

501(c)() (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Name of organization HEALTH FOUNDATION FOR WESTERN &	Employer identification number 22-3804398
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Part I **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RALPH C. WILSON, JR FOUNDATION 3101 EAST GRAND BLVD, SUITE 200 DETROIT, MI 48202	\$ 2,000,000.	Person <input checked="" type="checkbox"/> Payroll Noncash (Complete Part II for noncash contributions)
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization	Employer identification number
HEALTH FOUNDATION FOR WESTERN &	22-3804398

Part II **Noncash Property** (see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization

Employer identification number

HEALTH FOUNDATION FOR WESTERN &**22-3804398****Part III**

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info once) ▶ \$

Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

FORM 990-PF

GAIN OR (LOSS) FROM SALE OF ASSETS

STATEMENT 1

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	MANNER ACQUIRED (E) DEPREC.	DATE ACQUIRED (F) GAIN OR LOSS	DATE SOLD
PUBLICLY TRADED INVESTMENTS				PURCHASED	VARIOUS	VARIOUS
	8,575,793.	7,201,182.	0.	0.	1,374,611.	

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	MANNER ACQUIRED (E) DEPREC.	DATE ACQUIRED (F) GAIN OR LOSS	DATE SOLD
NONPUBLICLY TRADED INVESTMENTS				PURCHASED	VARIOUS	VARIOUS
	13,272,236.	10,717,663.	0.	0.	2,554,573.	

(A) DESCRIPTION OF PROPERTY	(B) GROSS SALES PRICE	(C) COST OR OTHER BASIS	(D) EXPENSE OF SALE	MANNER ACQUIRED (E) DEPREC.	DATE ACQUIRED (F) GAIN OR LOSS	DATE SOLD
PASSED THROUGH K-1S				PURCHASED	VARIOUS	VARIOUS
	0.	<1,140,071.>	0.	0.	1,140,071.	

CAPITAL GAINS DIVIDENDS FROM PART IV

213,179.

TOTAL TO FORM 990-PF, PART I, LINE 6A

5,282,434.

FORM 990-PF		DIVIDENDS AND INTEREST FROM SECURITIES			STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
NONPUBLICLY TRADED INVESTMENTS	871,986.	0.	871,986.	1,728,947.	
PUBLICLY TRADED INVESTMENTS	213,179.	213,179.	0.	0.	
PUBLICLY TRADED INVESTMENTS	744,283.	0.	744,283.	744,283.	
TO PART I, LINE 4	1,829,448.	213,179.	1,616,269.	2,473,230.	

FORM 990-PF		OTHER INCOME		STATEMENT 3
DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
INTEREST INCOME - PRI PASSED THROUGH K-1S	6,880.	6,880.		
RETURNED GRANT FUNDS	0.	29,297.		
OTHER INCOME	2,386.	0.		
	1,286.	0.		
TOTAL TO FORM 990-PF, PART I, LINE 11	10,552.	36,177.		

FORM 990-PF		LEGAL FEES		STATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES	5,292.	0.		5,292.
TO FM 990-PF, PG 1, LN 16A	5,292.	0.		5,292.

FORM 990-PF	ACCOUNTING FEES			STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	22,300.	5,575.		16,725.
TO FORM 990-PF, PG 1, LN 16B	22,300.	5,575.		16,725.

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT MANAGEMENT FEES	841,745.	841,745.		0.
EVALUATION CONSULTANTS	382,948.	0.		382,948.
PROGRAM CONSULTANTS	427,194.	0.		427,194.
TO FORM 990-PF, PG 1, LN 16C	1,651,887.	841,745.		810,142.

FORM 990-PF	TAXES			STATEMENT 7
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL TAXES	201,625.	0.		0.
PASSED THROUGH K-1	0.	78,343.		0.
TO FORM 990-PF, PG 1, LN 18	201,625.	78,343.		0.

FORM 990-PF	OTHER EXPENSES		STATEMENT 8	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
TELEPHONE/ELECTRONIC COMMUNICATION	92,724.	0.		92,724.
OFFICE EXPENSE	142,051.	0.		142,051.
INSURANCE	4,032.	0.		4,032.
SPONSORED EVENTS	44,343.	0.		44,343.
MAINTENANCE EXPENSE	33,378.	0.		33,378.
MISCELLANEOUS EXPENSE	8,387.	0.		8,387.
NYS FILING FEES	1,500.	0.		1,500.
MEMBERSHIP DUES	11,843.	0.		11,843.
PASSED THROUGH K-1	0.	111,141.		0.
TO FORM 990-PF, PG 1, LN 23	338,258.	111,141.		338,258.

FORM 990-PF	CORPORATE STOCK		STATEMENT 9	
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	
CORPORATE STOCK-SEE TAB A		18,963,181.	18,963,181.	
TOTAL TO FORM 990-PF, PART II, LINE 10B		18,963,181.	18,963,181.	

FORM 990-PF	OTHER INVESTMENTS		STATEMENT 10	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
PARTNERSHIPS AND COMMON TRUST FUNDS -SEE TAB A	FMV	78,793,167.	78,793,167.	
FIXED INCOME-SEE TAB A	FMV	15,302,642.	15,302,642.	
TOTAL TO FORM 990-PF, PART II, LINE 13		94,095,809.	94,095,809.	

FORM 990-PF	OTHER ASSETS		STATEMENT 11
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
DEFERRED COMPENSATION	273,920.	241,575.	241,575.
PROGRAM RELATED INVESTMENT	226,683.	160,560.	160,560.
TO FORM 990-PF, PART II, LINE 15	500,603.	402,135.	402,135.

FORM 990-PF	OTHER LIABILITIES		STATEMENT 12
DESCRIPTION			
	BOY AMOUNT	EOY AMOUNT	
DEFERRED COMPENSATION LIABILITY	273,920.	241,575.	
TOTAL TO FORM 990-PF, PART II, LINE 22	273,920.	241,575.	

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT 13
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NAME OF CONTRIBUTOR	ADDRESS
RALPH C. WILSON, JR. FOUNDATION	3101 EAST GRAND BLVD SUITE 200 DETROIT, MI 48202

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS STATEMENT 14
 TRUSTEES AND FOUNDATION MANAGERS

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
LEOLA RODGERS, MPH 431 E. FAYETTE STREET, SUITE 250 SYRACUSE, NY 13202	CHAIR 4.00	0.	0.	0.
CHERYL SMITH FISHER 726 EXCHANGE STREET, SUITE 518 BUFFALO, NY 14210	VICE CHAIR 4.00	0.	0.	0.
ANN ZIEGLER SEDORE 431 E. FAYETTE STREET, SUITE 250 SYRACUSE, NY 13202	SECRETARY 4.00	0.	0.	0.
VINCENT J. MANCUSO 726 EXCHANGE STREET, SUITE 518 BUFFALO, NY 14210	TREASURER 4.00	0.	0.	0.
LISA D. ALFORD 431 E. FAYETTE STREET, SUITE 250 SYRACUSE, NY 13202	TRUSTEE 4.00	0.	0.	0.
RICHARD BATTAGLIA 726 EXCHANGE STREET, SUITE 518 BUFFALO, NY 14210	TRUSTEE 4.00	0.	0.	0.
JOSEPH J. COZZO, MA, MS, LMHC 726 EXCHANGE STREET, SUITE 518 BUFFALO, NY 14210	TRUSTEE 4.00	0.	0.	0.
KEITH CUTTLER 431 E. FAYETTE STREET, SUITE 250 SYRACUSE, NY 13202	TRUSTEE 4.00	0.	0.	0.
RAY R. D'AGOSTINO 431 E. FAYETTE STREET, SUITE 250 SYRACUSE, NY 13202	TRUSTEE 4.00	0.	0.	0.
ANDREW DORN 726 EXCHANGE STREET, SUITE 518 BUFFALO, NY 14210	TRUSTEE 4.00	0.	0.	0.

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DENISE DUNFORD, DNS, FNP, RN 726 EXCHANGE STREET, SUITE 518 BUFFALO, NY 14210	TRUSTEE 4.00	0.	0.	0.
LEANNE F. FISCOE 431 E. FAYETTE STREET, SUITE 250 SYRACUSE, NY 13202	TRUSTEE 4.00	0.	0.	0.
CARRIE B. FRANK 726 EXCHANGE STREET, SUITE 518 BUFFALO, NY 14210	TRUSTEE 4.00	0.	0.	0.
ARTHUR R. GOSHIN, MD, MPH 726 EXCHANGE STREET, SUITE 518 BUFFALO, NY 14210	TRUSTEE 4.00	0.	0.	0.
JOANNE E. HAEFNER 726 EXCHANGE STREET, SUITE 518 BUFFALO, NY 14210	TRUSTEE 4.00	0.	0.	0.
MARYBETH K. MCCALL, M.D. 431 E. FAYETTE STREET, SUITE 250 SYRACUSE, NY 13202	TRUSTEE 4.00	0.	0.	0.
DAVID A. MILLING, MD 726 EXCHANGE STREET, SUITE 518 BUFFALO, NY 14210	TRUSTEE 4.00	0.	0.	0.
COLLEEN O'LEARY 431 E. FAYETTE STREET, SUITE 250 SYRACUSE, NY 13202	TRUSTEE 4.00	0.	0.	0.
MICHAEL D. SHAFFER, CPA 431 E. FAYETTE STREET, SUITE 250 SYRACUSE, NY 13202	TRUSTEE 4.00	0.	0.	0.
CARRIE WHITWOOD 431 E. FAYETTE STREET, SUITE 250 SYRACUSE, NY 13202	TRUSTEE 4.00	0.	0.	0.
NORA OBRIEN-SURIC 726 EXCHANGE STREET, SUITE 518 BUFFALO, NY 14210	PRESIDENT 40.00	230,712.	10,807.	0.
CAROL QUARANTILLO 726 EXCHANGE STREET, SUITE 518 BUFFALO, NY 14210	VICE PRESIDENT OF FINANCE & OPS 40.00	124,986.	15,575.	0.

TOTALS INCLUDED ON 990-PF, PAGE 6, PART VIII

355,698.

26,382.

0.

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT 15

ACTIVITY ONE

FELLOWS - A PROGRAM DESIGNED TO EXPAND A NETWORK OF SKILLED LEADERS THAT WILL LEARN TO LEAD COLLABORATIVELY FROM BOTH WITHIN AND OUTSIDE OF THEIR ORGANIZATIONS AND BECOME ADVOCATES FOR IMPROVED HEALTH CARE DELIVERY PARTICULARLY FOR THE FRAIL ELDERLY AND CHILDREN LIVING IN COMMUNITIES OF POVERTY.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 1

517,803.

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT 16

ACTIVITY TWO

PEDALS PROJECT - THE POSITIVE EMOTIONAL DEVELOPMENT AND LEARNING SKILLS PROGRAM (PEDALS) WORKS WITH PRESCHOOL PROVIDERS TO (1) BUILD KIDS SOCIAL EMOTIONAL SKILLS, INCREASING KINDERGARTEN READINESS, (2) IDENTIFY THOSE CHILDREN WITH SOCIAL EMOTIONAL NEEDS, MAKE ACCOMMODATIONS FOR THOSE CHILDREN IN THE CLASSROOM, AND ENSURE THEY, AND THEIR FAMILIES, ARE CONNECTED TO APPROPRIATE SUPPORTS, (3) INCREASE TEACHERS SKILLS IN SUPPORTING SOCIAL EMOTIONAL DEVELOPMENT AND ADDRESSING PROBLEM BEHAVIORS.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 2

163,359.

FORM 990-PF	SUMMARY OF DIRECT CHARITABLE ACTIVITIES	STATEMENT 17
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ACTIVITY THREE

AGING BY DESIGN - A PROGRAM TO IMPROVE THE HEALTH OF VULNERABLE OLDER ADULTS THAT USES A PROCESS CALLED DESIGN THINKING. DESIGN THINKING IS AN APPROACH TO PROBLEM SOLVING THAT PUTS THE NEEDS OF PEOPLE EXPERIENCING A PROBLEM AT THE CORE. IT PROVIDES A TOOLKIT FOR DEEPLY UNDERSTANDING PEOPLE'S NEEDS AND EXPERIENCES, GENERATING IDEAS TO MEET THOSE NEEDS, AND THEN IMPLEMENTING INNOVATIVE AND PRACTICAL SOLUTIONS

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 3

102,270.

FORM 990-PF	SUMMARY OF DIRECT CHARITABLE ACTIVITIES	STATEMENT 18
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ACTIVITY FOUR

CO-CREATING WELL BEING: SUPPORTING CHILDREN AND FAMILIES THROUGH TRAUMA - A MULTI-YEAR THREE PHASED INITIATIVE FOCUSED ON ADDRESSING TRAUMA, TOXIC STRESS, ADVERSE CHILDHOOD EXPERIENCES AND ITS IMPACT ON CHILDREN AND FAMILIES WITHIN THE AREAS OF CHILDBEARING, OVERALL HEALTH AND WELL-BEING, EARLY CHILDHOOD DEVELOPMENT AND SCHOOL-READINESS.

EXPENSES

TO FORM 990-PF, PART IX-A, LINE 4

127,079.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION
PART XV, LINES 2A THROUGH 2D

STATEMENT 19

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

DIANE OYLER
726 EXCHANGE STREET, SUITE 518
BUFFALO, NY 14210

TELEPHONE NUMBER

(716)852-3030

FORM AND CONTENT OF APPLICATIONS

NO SET FORM

ANY SUBMISSION DEADLINES

SUBMISSION DEADLINES VARY BASED ON THE PROJECT. SEE FOUNDATION WEBSITE AT
WWW.HFWCNY.ORG FOR ADDITIONAL INFORMATION

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE FOUNDATION PROVIDES GRANTS FOR THE PURPOSE OF IMPROVING THE HEALTH AND
HEALTH CARE ACROSS WESTERN AND CENTRAL NEW YORK WITH A SPECIAL FOCUS ON
YOUNG CHILDREN, OLDER ADULTS, AND THE SYSTEMS SERVING THEM. (SEE THE
FOUNDATION'S WEBSITE AT WWW.HFWCNY.ORG FOR ADDITIONAL INFORMATION)