

Form **990-PF**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Private Foundation  
 or Section 4947(a)(1) Trust Treated as Private Foundation**

OMB No. 1545-0052  
**2020**  
**Open to Public Inspection**

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 ▶ Go to [www.irs.gov/Form990PF](http://www.irs.gov/Form990PF) for instructions and the latest information.

**For calendar year 2020, or tax year beginning 01-01-2020 , and ending 12-31-2020**

Name of foundation Blue Cross of Idaho Foundation For Health Inc		<b>A Employer identification number</b> 26-0024334
Number and street (or P.O. box number if mail is not delivered to street address) 3000 E Pine Ave	Room/suite	<b>B Telephone number</b> (see instructions) (986) 224-3992
City or town, state or province, country, and ZIP or foreign postal code Meridian, ID 83642		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here..... <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation ... <input type="checkbox"/>
<b>H</b> 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		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ..... <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) ▶ \$ <u>80,495,304</u>	<b>J</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ..... <input type="checkbox"/>

<b>Part I Analysis of Revenue and Expenses</b> <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)</small>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>Revenue</b>	<b>1</b> Contributions, gifts, grants, etc., received (attach schedule)	25,033,184			
	<b>2</b> Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch. B				
	<b>3</b> Interest on savings and temporary cash investments	4	4		
	<b>4</b> Dividends and interest from securities	960,518	960,518		
	<b>5a</b> Gross rents				
	<b>b</b> Net rental income or (loss)				
	<b>6a</b> Net gain or (loss) from sale of assets not on line 10	559,920			
	<b>b</b> Gross sales price for all assets on line 6a	3,088,273			
	<b>7</b> Capital gain net income (from Part IV, line 2)		992,968		
	<b>8</b> Net short-term capital gain				
	<b>9</b> Income modifications			647	
	<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less: Cost of goods sold					
<b>c</b> Gross profit or (loss) (attach schedule)					
<b>11</b> Other income (attach schedule)					
<b>12 Total.</b> Add lines 1 through 11	26,553,626	1,953,490	647		
<b>Operating and Administrative Expenses</b>	<b>13</b> Compensation of officers, directors, trustees, etc.	153,986	0		153,986
	<b>14</b> Other employee salaries and wages	522,603	0		514,263
	<b>15</b> Pension plans, employee benefits				
	<b>16a</b> Legal fees (attach schedule)	1,577	0		1,577
	<b>b</b> Accounting fees (attach schedule)	8,300	830		7,470
	<b>c</b> Other professional fees (attach schedule)	602,933	37,859		588,257
	<b>17</b> Interest				
	<b>18</b> Taxes (attach schedule) (see instructions)	26,871	0		0
	<b>19</b> Depreciation (attach schedule) and depletion	24,517	0		
	<b>20</b> Occupancy	38,565	0		38,699
	<b>21</b> Travel, conferences, and meetings	10,389	0		11,136
	<b>22</b> Printing and publications				
	<b>23</b> Other expenses (attach schedule)	14,750	0		18,189
	<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	1,404,491	38,689		1,333,577
	<b>25</b> Contributions, gifts, grants paid	1,019,471			1,019,471
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	2,423,962	38,689		2,353,048	
<b>27</b> Subtract line 26 from line 12:					
<b>a Excess of revenue over expenses and disbursements</b>	24,129,664				
<b>b Net investment income</b> (if negative, enter -0-)		1,914,801			
<b>c Adjusted net income</b> (if negative, enter -0-)			647		

**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
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	345,333	70,739	70,739
	<b>2</b> Savings and temporary cash investments . . . . .	447,902	13,627,962	13,627,962
	<b>3</b> Accounts receivable ▶ _____ 2,846 Less: allowance for doubtful accounts ▶ _____		2,846	2,846
	<b>4</b> Pledges receivable ▶ _____ 13,020,927 Less: allowance for doubtful accounts ▶ _____	468,692	13,020,927	13,020,927
	<b>5</b> Grants receivable . . . . .			
	<b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	<b>7</b> Other notes and loans receivable (attach schedule) ▶ _____ Less: allowance for doubtful accounts ▶ _____			
	<b>8</b> Inventories for sale or use . . . . .			
	<b>9</b> Prepaid expenses and deferred charges . . . . .	2,997	3,131	3,131
	<b>10a</b> Investments—U.S. and state government obligations (attach schedule)			
	<b>b</b> Investments—corporate stock (attach schedule) . . . . .			
	<b>c</b> Investments—corporate bonds (attach schedule) . . . . .			
	<b>11</b> Investments—land, buildings, and equipment: basis ▶ _____ Less: accumulated depreciation (attach schedule) ▶ _____			
	<b>12</b> Investments—mortgage loans . . . . .			
	<b>13</b> Investments—other (attach schedule) . . . . .	49,904,620	53,679,045	53,679,045
	<b>14</b> Land, buildings, and equipment: basis ▶ _____ 151,228 Less: accumulated depreciation (attach schedule) ▶ _____ 60,574	115,170	90,654	90,654
<b>15</b> Other assets (describe ▶ _____)				
<b>16 Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I)	51,284,714	80,495,304	80,495,304	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	111,444	85,004	
	<b>18</b> Grants payable . . . . .			
	<b>19</b> Deferred revenue . . . . .			
	<b>20</b> Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b> Mortgages and other notes payable (attach schedule) . . . . .			
	<b>22</b> Other liabilities (describe ▶ _____)			
	<b>23 Total liabilities</b> (add lines 17 through 22) . . . . .	111,444	85,004	
<b>Net Assets or Fund Balances</b>	<b>Foundations that follow FASB ASC 958, check here</b> ▶ <input checked="" type="checkbox"/> <b>and complete lines 24, 25, 29 and 30.</b>			
	<b>24</b> Net assets without donor restrictions . . . . .	50,983,980	80,388,809	
	<b>25</b> Net assets with donor restrictions . . . . .	189,290	21,491	
	<b>Foundations that do not follow FASB ASC 958, check here</b> ▶ <input type="checkbox"/> <b>and complete lines 26 through 30.</b>			
	<b>26</b> Capital stock, trust principal, or current funds . . . . .			
	<b>27</b> Paid-in or capital surplus, or land, bldg., and equipment fund			
	<b>28</b> Retained earnings, accumulated income, endowment, or other funds			
<b>29 Total net assets or fund balances</b> (see instructions) . . . . .	51,173,270	80,410,300		
<b>30 Total liabilities and net assets/fund balances</b> (see instructions) .	51,284,714	80,495,304		

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) . . . . .	<b>1</b>	51,173,270
<b>2</b> Enter amount from Part I, line 27a . . . . .	<b>2</b>	24,129,664
<b>3</b> Other increases not included in line 2 (itemize) ▶ _____	<b>3</b>	5,107,366
<b>4</b> Add lines 1, 2, and 3 . . . . .	<b>4</b>	80,410,300
<b>5</b> Decreases not included in line 2 (itemize) ▶ _____	<b>5</b>	0
<b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29 .	<b>6</b>	80,410,300

**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.)
<b>1 a</b> VINIX		2008-11-04	2020-07-01
<b>b</b> VBTLX		2008-11-04	2020-03-17
<b>c</b> VBTLX		2008-11-04	2020-07-01
<b>d</b> Capital Gains Dividends	P		
<b>e</b>			

	(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)
<b>a</b>	850,000		288,193	561,807
<b>b</b>	500,000		465,192	34,808
<b>c</b>	1,500,000		1,341,920	158,080
<b>d</b>	238,273			238,273
<b>e</b>				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) 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	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	
<b>a</b>			561,807
<b>b</b>			34,808
<b>c</b>			158,080
<b>d</b>			238,273
<b>e</b>			

<b>2</b> 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		<b>2</b>	992,968
<b>3</b> 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	{			<b>3</b>	

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

**SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 - DO NOT COMPLETE**

<b>1</b> Reserved			
(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved
<b>2</b> Reserved . . . . .			<b>2</b>
<b>3</b> Reserved . . . . .			<b>3</b>
<b>4</b> Reserved . . . . .			<b>4</b>
<b>5</b> Reserved . . . . .			<b>5</b>
<b>6</b> Reserved . . . . .			<b>6</b>
<b>7</b> Reserved . . . . .			<b>7</b>
<b>8</b> Reserved . . . . .			<b>8</b>

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

Table with 11 rows for excise tax calculations. Includes fields for exempt foundations, tax under section 511, tax based on investment income, and credits/payments. Total tax due is 33,384.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question number, Yes, and No. Questions cover political activities, tax on political expenditures, and asset requirements.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-14 regarding controlled entities, distributions, public inspection requirements, and books in care.

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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.

Table with 3 columns: Question, Yes, No. Row 16 regarding interest in foreign countries.

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.

Main table with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

**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 **5b** Yes  No

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?  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? **6b** Yes  No  
If "Yes" to 6b, file Form 8870.

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

**b** If "Yes", did the foundation receive any proceeds or have any net income attributable to the transaction? **7b** Yes  No

**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 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, foundation managers and their compensation. See instructions**

(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 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	(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
NONE				

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

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

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

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
FSG Inc 500 Boylston St Ste 600 Boston, MA 02116	Consulting Services	362,853
Reynolds Meyers LLC PO Box 383 Boise, ID 83701	Consulting Services	65,749
<b>Total</b> 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
<b>1</b> Healthcare Innovation - working to bridge the gap between clinical and community services to create business solution to address social determinants of health.	632,390
<b>2</b> High Five - Working to address childhood obesity by providing access to healthy foods and physical activity.	510,111
<b>3</b> COVID-19 Response - Statewide funding to address emergency needs and recovery efforts from COVID-19	316,926
<b>4</b> Youth Behavioral Health - Working to meet youth where they are by building innovative partnerships with schools and communities to address trauma and support well-being.	207,918

**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
<b>1</b> _____ _____	
<b>2</b> _____ _____	
All other program-related investments. See instructions. <b>3</b> _____ _____	
<b>Total.</b> Add lines 1 through 3 . . . . . ▶	0

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
<b>a</b>	Average monthly fair market value of securities. . . . .	<b>1a</b>	47,064,028
<b>b</b>	Average of monthly cash balances. . . . .	<b>1b</b>	1,823,866
<b>c</b>	Fair market value of all other assets (see instructions). . . . .	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c). . . . .	<b>1d</b>	48,887,894
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets. . . . .	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d. . . . .	<b>3</b>	48,887,894
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	<b>4</b>	733,318
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	48,154,576
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	<b>6</b>	2,407,729

**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.)

<b>1</b>	Minimum investment return from Part X, line 6. . . . .	<b>1</b>	2,407,729
<b>2a</b>	Tax on investment income for 2020 from Part VI, line 5. . . . .	<b>2a</b>	26,616
<b>b</b>	Income tax for 2020. (This does not include the tax from Part VI.). . . . .	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b. . . . .	<b>2c</b>	26,616
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1. . . . .	<b>3</b>	2,381,113
<b>4</b>	Recoveries of amounts treated as qualifying distributions. . . . .	<b>4</b>	647
<b>5</b>	Add lines 3 and 4. . . . .	<b>5</b>	2,381,760
<b>6</b>	Deduction from distributable amount (see instructions). . . . .	<b>6</b>	0
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1. . . . .	<b>7</b>	2,381,760

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26. . . . .	<b>1a</b>	2,353,048
<b>b</b>	Program-related investments—total from Part IX-B. . . . .	<b>1b</b>	0
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes. . . . .	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the:		
<b>a</b>	Suitability test (prior IRS approval required). . . . .	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule). . . . .	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	2,353,048
<b>5</b>	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. . . . .	<b>5</b>	0
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	<b>6</b>	2,353,048

**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 2019	(c) 2019	(d) 2020
<b>1</b>	Distributable amount for 2020 from Part XI, line 7				2,381,760
<b>2</b>	Undistributed income, if any, as of the end of 2020:				
<b>a</b>	Enter amount for 2019 only. . . . .			0	
<b>b</b>	Total for prior years: 20____, 20____, 20____		0		
<b>3</b>	Excess distributions carryover, if any, to 2020:				
<b>a</b>	From 2015. . . . .				
<b>b</b>	From 2016. . . . . 106,876				
<b>c</b>	From 2017. . . . . 64,615				
<b>d</b>	From 2018. . . . . 518,011				
<b>e</b>	From 2019. . . . . 734,334				
<b>f</b>	<b>Total</b> of lines 3a through e. . . . .	1,423,836			
<b>4</b>	Qualifying distributions for 2020 from Part XII, line 4: ▶ \$ 2,353,048				
<b>a</b>	Applied to 2019, but not more than line 2a			0	
<b>b</b>	Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b>	Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b>	Applied to 2020 distributable amount. . . . .				2,353,048
<b>e</b>	Remaining amount distributed out of corpus	0			
<b>5</b>	Excess distributions carryover applied to 2020. <i>(If an amount appears in column (d), the same amount must be shown in column (a).)</i>	28,712			28,712
<b>6</b>	<b>Enter the net total of each column as indicated below:</b>				
<b>a</b>	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	1,395,124			
<b>b</b>	Prior years' undistributed income. Subtract line 4b from line 2b . . . . .		0		
<b>c</b>	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		
<b>d</b>	Subtract line 6c from line 6b. Taxable amount—see instructions . . . . .		0		
<b>e</b>	Undistributed income for 2019. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . .			0	
<b>f</b>	Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 . . . . .				0
<b>7</b>	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			
<b>8</b>	Excess distributions carryover from 2015 not applied on line 5 or line 7 (see instructions). . . . .	0			
<b>9</b>	<b>Excess distributions carryover to 2021.</b> Subtract lines 7 and 8 from line 6a . . . . .	1,395,124			
<b>10</b>	Analysis of line 9:				
<b>a</b>	Excess from 2016. . . . . 78,164				
<b>b</b>	Excess from 2017. . . . . 64,615				
<b>c</b>	Excess from 2018. . . . . 518,011				
<b>d</b>	Excess from 2019. . . . . 734,334				
<b>e</b>	Excess from 2020. . . . .				

**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 2020, enter the date of the ruling. . . . . ▶

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

	Tax year				(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .					
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon:					
<b>a</b> "Assets" alternative test—enter:					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . . . .					
<b>c</b> "Support" alternative test—enter:					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the foundation 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. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions

**a** The name, address, and telephone number or email address of the person to whom applications should be addressed:

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

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**c** Any submission deadlines:

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

**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)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471
<b>b</b> <i>Approved for future payment</i>				
<b>Total . . . . .</b> ▶ <b>3b</b>				0





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

<b>(a) Name and address</b>	<b>Title, and average hours per week (b) devoted to position</b>	<b>(c) Compensation (If not paid, enter -0-)</b>	<b>(d) Contributions to employee benefit plans and deferred compensation</b>	<b>Expense account, (e) other allowances</b>
Kendra E Witt-Doyle 3000 E Pine Ave Meridian, ID 83642	Executive Director 40.00	125,898	28,088	0
Ralph Woodard 3000 E Pine Ave Meridian, ID 83642	President - Chairman 1.00	0	0	0
Mike Reynoldson 3000 E Pine Ave Meridian, ID 83642	Vice Chair 1.00	0	0	0
Steven Driggers 3000 E Pine Ave Meridian, ID 83642	Secretary 1.00	0	0	0
Mark Kohler 3000 E Pine Ave Meridian, ID 83642	Secretary 1.00	0	0	0
David Ward 3000 E Pine Ave Meridian, ID 83642	Treasurer 1.00	0	0	0
Roger Quarles 3000 E Pine Ave Meridian, ID 83642	Director 1.00	0	0	0
Jim Hickey 3000 E Pine Ave Meridian, ID 83642	Director 1.00	0	0	0
Pam McNamara 3000 E Pine Ave Meridian, ID 83642	Director 1.00	0	0	0
Luke Malek 3000 E Pine Ave Meridian, ID 83642	Director 1.00	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)				
<b>a</b> <i>Paid during the year</i>				
Central District Health Department PO Box 23492 Belfast, ME 04915	None	GOV	WICHHC support.	5,000
Idaho Association For The Education Of Young Children 4355 W Emerald St Ste 250 Boise, ID 83706	None	PC	2020 Idaho AEYC Professional Development Institute	2,000
Heritage Academy 500 S Lincoln Ave Jerome, ID 83338	None	GOV	promote physical activity for students	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

**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)				
<b>a</b> <i>Paid during the year</i>				
Marsh Valley School District 40 School Street PO Box 180 Arimo, ID 83214	None	GOV	promote physical activity for students	750
Valley View Elementary 3555 N Milwaukee St Boise, ID 83704	None	GOV	promote physical activity for students	750
Prospect Elementary School 4300 North Red Horse Way Meridian, ID 83646	None	GOV	promote physical activity for students	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471



**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)				
<b>a</b> <i>Paid during the year</i>				
Upriver Elementary 75 Fern St PO Box 249 Fernwood, ID 83830	None	GOV	promote physical activity for students	750
Eagle Rock Middle School 2020 Pancheri Drive Idaho Falls, ID 83402	None	GOV	promote physical activity for students	1,000
Idaho Falls School District 91 690 John Adams Idaho Falls, ID 83401	None	GOV	promote physical activity for students	500
<b>Total . . . . . ▶ 3a</b>				1,019,471

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Marsing Elementary 207 8th Ave W Marsing, ID 83639	None	GOV	promote physical activity for students	500
Nampa School District 619 S Canyon St Nampa, ID 83686	None	GOV	promote physical activity for students	750
Coeur d'Alene Charter Academy 4904 N Duncan Drive Coeur dAlene, ID 83815	None	GOV	promote physical activity for students	750
<b>Total . . . . . ▶ 3a</b>				1,019,471

**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)				
<b>a</b> <i>Paid during the year</i>				
Sugar - Salem High School 102 N Park Ave Sugar City, ID 83448	None	GOV	promote physical activity for students	750
North Star Charter School 839 N Linder Rd Eagle, ID 83616	None	GOV	promote physical activity for students	500
Gem Prep Meridian 2750 E Gala St Meridian, ID 83642	None	GOV	promote physical activity for students	1,000
<b>Total . . . . . ▶ 3a</b>				1,019,471

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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)				
<b>a</b> <i>Paid during the year</i>				
Koelsch Elementary School 2015 N Curtis Rd Boise, ID 83706	None	GOV	promote physical activity for students	500
Council Elementary 202 Michigan Ave PO Box 68 Council, ID 83612	None	GOV	promote physical activity for students	500
Oakwood Elementary 525 S 4th E Preston, ID 83263	None	GOV	promote physical activity for students	500
<b>Total . . . . . ▶ 3a</b>				1,019,471

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Hawthorne Elementary 2401 W Targee St Boise, ID 83705	None	GOV	promote physical activity for students	1,000
Richfield School District 555 North Tiger Drive Richfield, ID 83349	None	GOV	promote physical activity for students	750
Webster Elementary 1409 8th St Lewiston, ID 83501	None	GOV	promote physical activity for students	1,000
<b>Total . . . . . ▶ 3a</b>				1,019,471

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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)				
<b>a</b> <i>Paid during the year</i>				
Clark County JrSr High School 23 West 2nd South Dubois, ID 83423	None	GOV	promote physical activity for students	750
Christian Center School 3639 W Prairie Avenue Hayden, ID 83835	None	GOV	promote physical activity for students	500
Jefferson Elementary 200 S Latah St Boise, ID 83705	None	GOV	promote physical activity for students	750
<b>Total . . . . . ▶ 3a</b>				1,019,471

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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)				
<b>a</b> <i>Paid during the year</i>				
Swan Valley Elementary 3389 Highway 26 Irwin, ID 83428	None	GOV	promote physical activity for students	500
AB McDonald Elementary School 2323 East D St Moscow, ID 83843	None	GOV	promote physical activity for students	1,000
Ponderosa Elementary 2950 N Naomi Ave Meridian, ID 83646	None	GOV	promote physical activity for students	500
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
St Dominic School 20274 W Riverview Drive Post Falls, ID 83654	None	GOV	promote physical activity for students	750
Parma School District 805 E McConnell Ave Parma, ID 83660	None	GOV	promote physical activity for students	500
Monroe Elementary 3615 W Cassia St Boise, ID 83705	None	GOV	promote physical activity for students	1,000
<b>Total . . . . . ▶ 3a</b>				1,019,471



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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)				
<b>a</b> <i>Paid during the year</i>				
Upper Carmen Charter School PO Box 33 Carmen, ID 83462	None	GOV	promote physical activity for students	750
Mary Macpherson Elementary 1050 East Amity Rd Meridian, ID 83642	None	GOV	promote physical activity for students	500
West Canyon Elementary 19548 Ustick Road Caldwell, ID 83607	None	GOV	promote physical activity for students	1,000
<b>Total . . . . . ▶ 3a</b>				1,019,471

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Hagerman School District #233 324 North 2nd Ave Hagerman, ID 83332	None	GOV	promote physical activity for students	1,000
Farmin Stidwell Elementary 1326 Spruce St Sandpoint, ID 83864	None	GOV	promote physical activity for students	750
Winton Elementary School 920 W Lacrosse Ave Coeur dAlene, ID 83814	None	GOV	promote physical activity for students	500
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Wendell School District 150 E Main St Wendell, ID 83355	None	GOV	promote physical activity for students	1,000
Teton Elementary 126 W Main Teton, ID 83451	None	GOV	promote physical activity for students	750
Twin Falls District 411 201 Main Avenue West Twin Falls, ID 83301	None	GOV	promote physical activity for students	1,000
<b>Total . . . . . ▶ 3a</b>				1,019,471

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Xavier Charter School 1218 N College Rd W Twin Falls, ID 83301	None	GOV	promote physical activity for students	500
Blackfoot School District 270 E Bridge St Blackfoot, ID 83221	None	GOV	promote physical activity for students	1,000
Falcon Ridge Public Charter School 278 S Ten Mile Rd Kuna, ID 83634	None	GOV	promote physical activity for students	750
<b>Total . . . . . ▶ 3a</b>				1,019,471

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Winton Elementary School 920 W Lacrosse Ave Coeur dAlene, ID 83814	None	GOV	promote physical activity for students	500
Sacajawea Elementary School 1710 N Illinois Ave Caldwell, ID 83605	None	GOV	promote physical activity for students	1,000
House of the Lord Christian Academy 754 Silver Birch Oldtown, ID 83822	None	GOV	promote physical activity for students	750
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Ola Elementary School 22001 Sweet Ola Hwy Ola, ID 83657	None	GOV	promote physical activity for students	750
Popplewell Elementary School 200 6th Avenue N Buhl, ID 83316	None	GOV	promote physical activity for students	1,000
Harold B Lee Elementary 4726 W Hwy 36 Weston, ID 83286	None	GOV	promote physical activity for students	750
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

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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)				
<b>a</b> <i>Paid during the year</i>				
Cornerstone Christian School (EIN #820299608) 515 WEST NORTH 2ND STREET GRANGEVILLE, ID 83530	None	GOV	promote physical activity for students	750
Groveland Elementary 375 W 170 N Blackfoot, ID 83221	None	GOV	promote physical activity for students	500
Ponderosa Elementary School 2850 N Naomi Meridian, ID 83642	None	GOV	Grant to support walking program	250
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Whitman Elementary School 1840 9th Avenue Lewiston, ID 83501	None	GOV	promote physical activity for students	1,000
AH Bush Elementary School 380 West Anderson Idaho Falls, ID 83402	None	GOV	promote physical activity for students	500
White Pine Elementary 401 E Linden St Boise, ID 83706	None	GOV	promote physical activity for students	500
<b>Total . . . . . ▶ 3a</b>				1,019,471



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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Madison Middle School 575 W 7th S Rexburg, ID 83440	None	GOV	promote physical activity for students	1,000
Butte County School District #111 PO Box 89 Arco, ID 83213	None	GOV	promote physical activity for students	500
Taft Elementary 3722 N Anderson St Boise, ID 83703	None	GOV	promote physical activity for students	750
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Idaho Community Foundation Inc 210 W State Street Boise, ID 83702	None	PC	COVID19 Response fund grant	100,000
Idaho FoodbankPO Box 5601 Boise, ID 83705	None	PC	Food and supplies in response to COVID-19 pandemic	20,000
Boys & Girls Club of Ada County 610 East 42nd Street Garden City, ID 83714	None	PC	Support summer program at Koelsch Elementary an impoverished school	30,000
<b>Total . . . . .</b>				<b>1,019,471</b>

**▶ 3a**

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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)				
<b>a</b> <i>Paid during the year</i>				
Ronald McDonald House 101 Warm Springs Avenue Boise, ID 83712	None	PC	English and spanish orientation video for families staying in facility while their child is hospitalized	22,000
Idaho Community Foundation Inc 210 W State Street Boise, ID 83702	None	PC	COVID-19 response for Internet for Students Emergency Fund	25,000
Camp Rainbow Gold Inc 216 W Jefferson St Boise, ID 83702	None	PC	20 camp scholarships for Idaho children diagnosed with cancer	20,000
<b>Total . . . . .</b>				<b>1,019,471</b>

▶ **3a**

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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)				
<b>a</b> <i>Paid during the year</i>				
Coeur d'Alene Tribe PO Box 408 Coeur dAlene, ID 83851	None	GOV	PPE equipment for CDA Community	5,000
City of Good Inc 246 8th Street Boise, ID 83702	None	PC	Food and supplies for providing meals to those in need during COVID-19 pandemic	15,000
The Young Men's Christian Association of Boise City Idaho 1177 W State Street Boise, ID 83702	None	PC	Support for the neuro-incusive programs at theBCI Thrive center	20,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Innovia Foundation 421 West Riverside Suite 606 Spokane, WA 99201	None	PC	COVID-19 community reponse and recovery fund in North Idaho	10,000
Idaho Hunger Relief Task Force Inc 963 S Orchard St Ste 206 Boise, ID 83705	None	PC	fresh fruit and veggie access to diabetics during COVID 19 pandemic	3,200
Rolling Tomato Inc PO Box 2144 Boise, ID 83701	None	PC	Support for food recovery efforts during COVID-19	5,000
<b>Total . . . . . ▶ 3a</b>				1,019,471

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Museum of Idaho 200 N Eastern Ave Idaho Falls, ID 83402	None	PC	Eastern Idaho Community Commitment Fund - Covid 19 relief	5,000
Northwest Credit Union Foundaton 18000 International Blvd Ste 350 SeaTac, WA 98188	None	PC	COVID-19 worker emergency relief fund to provide access to affordable credit for Idahoans in need	10,000
University of Idaho Foundation 875 Perimeter DrMS 3143 Moscow, ID 83844	None	GOV	Vandal Promise and WWAMI scholarships	200,000
<b>Total . . . . .</b>				<b>1,019,471</b>

**▶ 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)				
<b>a</b> <i>Paid during the year</i>				
City Of Bonners Ferry PO Box 149 Bonners Ferry, ID 83805	None	GOV	Update city splash pad	4,000
Garfield Elementary School 1914 S Broadway Boise, ID 83706	None	GOV	Garfield Walking Path	5,000
Mosaics Public School Inc 1010 West Jefferson Suite 201 Boise, ID 83702	None	GOV	upgrade school's rubberized playground surface	1,000
<b>Total . . . . .</b>				<b>1,019,471</b>

**▶ 3a**

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Education Northwest 101 SW Main Street Suite 500 Portland, OR 97204	None	PC	support statewide landscape analysis of youth behavioral health services and programming in Idaho	5,000
Jannus Inc1607 W Jefferson St Boise, ID 83702	None	PC	Idaho Out of School Network Behavioral Management Institute	5,000
City Of Orofino217 1St St Orofino, ID 83544	None	GOV	Orofino Elementary School garden project. Outdoor classroom/education hub for the community.	2,753
<b>Total . . . . .</b>				<b>1,019,471</b>

**▶ 3a**



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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Nampa School District 619 S Canyon St Nampa, ID 83686	None	GOV	Youth behavioral health curriculum and supplies	49,600
Idaho Medical Association Foundation Inc PO Box 2668 Boise, ID 83701	None	PC	Support IMA Foundation's future physician of Idaho award program.	20,000
Idaho Association For The Education Of Young Children 4355 W Emerald St Ste 250 Boise, ID 83706	None	PC	Support for federal grant funding, Preschool development birth through five	5,000
<b>Total . . . . .</b>				<b>1,019,471</b>

**▶ 3a**

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Idaho Children's Trust Fund Alexander House 304 W State Street Boise, ID 83702	None	PC	Support Parents during COVID-19	5,000
Boys & Girls Club of Ada County 610 East 42nd Street Garden City, ID 83714	None	PC	Operational expenses for all day program K-12 when in -person school is cancelled or modified due to health and safety concerns.	10,000
Boys & Girls Club of Nampa 316 Stampede Drive Nampa, ID 83687	None	PC	operational and program support for day long stand-up site programming for children when school is cancelled or modified due to health and safety concerns	10,000
<b>Total . . . . . ▶ 3a</b>				1,019,471

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Coeur d'Alene School District #271 1400 N Northwood Center Court Coeur dAlene, ID 83815	None	GOV	support youth behavioral health programming	500
Boise Parks & Recreation 110 Scout Lane Boise, ID 83702	None	GOV	Programming for grades 1-6 when in-person school is cancelled due to health and safety concerns.	10,000
Nampa School District 619 S Canyon St Nampa, ID 83686	None	GOV	Behavioral Health support services for teachers due to COVID19	10,000
<b>Total . . . . .</b>				<b>1,019,471</b>

▶ **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)				
<b>a</b> <i>Paid during the year</i>				
Wassmuth Center For Human Rights 777 S 8th St Boise, ID 83702	None	PC	Grant for SDOH, Health Inequity	100,000
The Young Men's Christian Association of Boise City Idaho 1177 W State Street Boise, ID 83702	None	PC	School day plus program and new program in Canyon County to support learning when in person school is cancelled due to health and safety concerns.	20,000
The Home Partnership Foundation Inc PO Box 7899 Boise, ID 83707	None	PC	Avenues of Hope Campaign support	5,000
<b>Total . . . . .</b>				1,019,471

**▶ 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)				
<b>a</b> <i>Paid during the year</i>				
City Of Orofino 217 1St St Orofino, ID 83544	None	GOV	Benches, tables, landscaping and fencing for completion of skate park.	13,369
City Of Orofino 217 1St St Orofino, ID 83544	None	GOV	Safe Routes to Schools program.	4,135
Treasure Valley Education Partnership Inc 322 East Front Street Suite 200University of Idaho Water Center Boise, ID 83702	None	PC	Support "more than school" statewide education symposium	2,000
<b>Total . . . . .</b>				<b>1,019,471</b>

**▶ 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)				
<b>a</b> <i>Paid during the year</i>				
Idaho Community Foundation Inc 210 W State Street Boise, ID 83702	None	PC	7Cares Idaho Shares Campaign	10,000
City Of Homedale31 W Wyoming Ave Homedale, ID 83628	None	GOV	to promote physical activity in city	1,000
City Of Shoshone207 S Rail St W Shoshone, ID 83352	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . . ▶ 3a</b>				1,019,471

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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)				
<b>a</b> <i>Paid during the year</i>				
City of Cascade105 S Main Street Cascade, ID 83611	None	GOV	to promote physical activity in city	1,000
City Of Lapwai315 S Main St Lapwai, ID 83540	None	GOV	to promote physical activity in city	1,000
City Of Emmett501 E Main Emmett, ID 83617	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

**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)				
<b>a</b> <i>Paid during the year</i>				
City Of Jerome152 E Ave A Jerome, ID 83338	None	GOV	to promote physical activity in city	1,000
City of Moscow206 E 3rd St Moscow, ID 83843	None	GOV	to promote physical activity in city	1,000
City of Coeur D'Alene710 E Mullian Ave Coeur D Alene, ID 83814	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471



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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)				
<b>a</b> <i>Paid during the year</i>				
City Of Twin Falls 321 2Nd Ave E Twin Falls, ID 83301	None	GOV	to promote physical activity in city	1,000
City of Caldwell PO Box 1179 Caldwell, ID 83606	None	GOV	to promote physical activity in city	1,000
City of Eagle 660 E Civic Lane Eagle, ID 83616	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

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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)				
<b>a</b> <i>Paid during the year</i>				
City Of Nampa311 3rd St S Nampa, ID 83651	None	GOV	to promote physical activity in city	1,000
City of Pocatello911 North 7th Ave Pocatello, ID 83205	None	GOV	to promote physical activity in city	1,000
City Of MeridianPO Box 670 Caldwell, ID 83606	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

**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)				
<b>a</b> <i>Paid during the year</i>				
City Of Lewiston PO Box 617 Lewiston, ID 83501	None	GOV	to promote physical activity in city	1,000
City Of Idaho Falls PO Box 50220 Idaho Falls, ID 83405	None	GOV	to promote physical activity in city	1,000
City Of Crouch 342 Village Circle Crouch, ID 83622	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

**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)				
<b>a</b> <i>Paid during the year</i>				
City Of Winchester501 Nezperce Ave Winchester, ID 83555	None	GOV	to promote physical activity in city	1,000
City Of Arimo115 Henderson Ave Arimo, ID 83214	None	GOV	to promote physical activity in city	1,000
City Of CottonwoodPO Box 571 Cottonwood, ID 83522	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

**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)				
<b>a</b> <i>Paid during the year</i>				
City Of Dayton PO Box 12 Dayton, ID 83232	None	GOV	to promote physical activity in city	1,000
City of McCall 216 Park St McCall, ID 83638	None	GOV	to promote physical activity in city	1,000
City Of Bancroft PO Box 39 Bancroft, ID 83217	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . . ▶ 3a</b>				1,019,471

**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)				
<b>a</b> <i>Paid during the year</i>				
City Of American Falls 550 North Oregon Trail American Falls, ID 83211	None	GOV	to promote physical activity in city	1,000
City Of Ponderay PO Box 500 Ponderay, ID 83852	None	GOV	to promote physical activity in city	1,000
City Of Grace 103 E Center St Grace, ID 83241	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . . ▶ 3a</b>				1,019,471

**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)				
<b>a</b> <i>Paid during the year</i>				
City Of Bonners Ferry PO Box 149 Bonners Ferry, ID 83805	None	GOV	to promote physical activity in city	1,000
City Of Ferdinand PO Box 101 Ferdinand, ID 83526	None	GOV	to promote physical activity in city	1,000
City of Worley PO Box 219 9936 WE Street Worley, ID 83876	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . . ▶ 3a</b>				1,019,471

**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)				
<b>a</b> <i>Paid during the year</i>				
City of Wendell 375 1st Ave E Wendell, ID 83355	None	GOV	to promote physical activity in city	1,000
City of Weiser 55 W Idaho St Weiser, ID 83672	None	GOV	to promote physical activity in city	1,000
City of Star 10769 W State Street Star, ID 83669	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . . ▶ 3a</b>				1,019,471



**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)				
<b>a</b> <i>Paid during the year</i>				
City of St Anthony 420 N Bridge St Anthony, ID 83445	None	GOV	to promote physical activity in city	1,000
City of Spirit Lake 6042 W Maine St Spirit Lake, ID 83869	None	GOV	to promote physical activity in city	1,000
City of Roberts PO Box 242647 N 2872 E Roberts, ID 83444	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

**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)				
<b>a</b> <i>Paid during the year</i>				
City of Priest River 552 High Street PO Box 415 Priest River, ID 83856	None	GOV	to promote physical activity in city	1,000
City of Parma PO Box 608305 N 3rd St Parma, ID 83660	None	GOV	to promote physical activity in city	1,000
City of Nez Perce 606 Maple Street Nez Perce, ID 83453	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . . ▶ 3a</b>				1,019,471

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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)				
<b>a</b> <i>Paid during the year</i>				
City of Moyie Springs PO Box 5733331 Roosevelt Road Moyie Springs, ID 83845	None	GOV	to promote physical activity in city	1,000
City of Hope105 Highland Ave Hope, ID 83836	None	GOV	to promote physical activity in city	1,000
City of HazeltonPO Box 145246 Main St Hazelton, ID 83335	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . . ▶ 3a</b>				1,019,471

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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)				
<b>a</b> <i>Paid during the year</i>				
City of Hayden Lake 9393 N Strahorn Rd Hayden Lake, ID 83835	None	GOV	to promote physical activity in city	1,000
City of Genesee PO Box 38140 East Walnut Street Genesee, ID 83832	None	GOV	to promote physical activity in city	1,000
City of Dietrich 35 W 1st Street Dietrich, ID 83324	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . . ▶ 3a</b>				1,019,471

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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)				
<b>a</b> <i>Paid during the year</i>				
City of Burley1401 Overland Ave Burley, ID 83318	None	GOV	to promote physical activity in city	1,000
City Of Post Falls408 N Spokane St Post Falls, ID 83852	None	GOV	to promote physical activity in city	1,000
City Of DowneyPO Box 204 Downey, ID 83234	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

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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)				
<b>a</b> <i>Paid during the year</i>				
City Of Boise PO Box 500 Boise, ID 83701	None	GOV	to promote physical activity in city	1,000
City Of Ammon 2135 S Ammon Rd Ammon, ID 83406	None	GOV	to promote physical activity in city	1,000
City Of Stanley PO Box 53 Stanley, ID 83278	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

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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)				
<b>a</b> <i>Paid during the year</i>				
City Of AtholPO Box 249 Athol, ID 83801	None	GOV	to promote physical activity in city	1,000
City Of OsburnPO Box 865 Osburn, ID 83849	None	GOV	to promote physical activity in city	1,000
City Of Albion225 S Main St Albion, ID 83311	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
City Of Victor 10 South Main StreetUnit 101 Victor, ID 83455	None	GOV	to promote physical activity in city	1,000
City Of Firth106 E Center Street Firth, ID 83236	None	GOV	to promote physical activity in city	1,000
City Of Hollister2392 Main St Hollister, ID 83301	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . . ▶ 3a</b>				1,019,471



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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)				
<b>a</b> <i>Paid during the year</i>				
City Of Preston 70 W Oneida Preston, ID 83262	None	GOV	to promote physical activity in city	1,000
City Of Mud Lake 1124 E 1500 N Terreton, ID 83450	None	GOV	to promote physical activity in city	1,000
City Of Kamiah PO Box 338 Kamiah, ID 83536	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

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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)				
<b>a</b> <i>Paid during the year</i>				
City Of SmeltonvillePO Box 200 Smeltonville, ID 83868	None	GOV	to promote physical activity in city	1,000
City Of Wallace703 Cedar St Wallace, ID 83873	None	GOV	to promote physical activity in city	1,000
City Of JuliaettaPO Box 229 Juliaetta, ID 83535	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

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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)				
<b>a</b> <i>Paid during the year</i>				
City Of East Hope PO Box 186 Hope, ID 83836	None	GOV	to promote physical activity in city	1,000
City Of Peck PO Box 105 Peck, ID 83545	None	GOV	to promote physical activity in city	1,000
City Of Orofino 217 1St St Orofino, ID 83544	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

**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)				
<b>a</b> <i>Paid during the year</i>				
City Of Shelley101 South Emmerson Shelley, ID 83274	None	GOV	to promote physical activity in city	1,000
City Of Clifton175 West Center Clifton, ID 83328	None	GOV	to promote physical activity in city	1,000
City Of MaladPO Box 6568 Carol Stream, IL 60197	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

**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)				
<b>a</b> <i>Paid during the year</i>				
City Of Weston Po Box 68 Weston, ID 83286	None	GOV	to promote physical activity in city	1,000
City Of Garden City 6015 Glennwood St Garden City, ID 83714	None	GOV	to promote physical activity in city	1,000
City Of Blackfoot 157 N Broadway Blackfoot, ID 83221	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

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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)				
<b>a</b> <i>Paid during the year</i>				
City Of DriggsPO Box 48 Driggs, ID 83422	None	GOV	to promote physical activity in city	1,000
City Of Chubbuck5160 Yellowstone Ave Chubbuck, ID 83202	None	GOV	to promote physical activity in city	1,000
City Of Rexburg35 N 1St St Rexburg, ID 83440	None	GOV	to promote physical activity in city	1,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

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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)				
<b>a</b> <i>Paid during the year</i>				
City of Fairfield 407 Soldier Rd Fairfeild, ID 83327	None	GOV	to promote physical activity in city	1,000
City of Heyburn 941 18th St Heyburn, ID 83336	None	GOV	to promote physical activity in city	1,000
Idaho Association For The Education Of Young Children 4355 W Emerald St Ste 250 Boise, ID 83706	None	PC	support early childhood mental health and work associated with Preschool development grant birth -5	15,000
<b>Total . . . . . ▶ 3a</b>				1,019,471

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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)				
<b>a</b> <i>Paid during the year</i>				
City Of Twin Falls321 2Nd Ave E Twin Falls, ID 83301	None	GOV	Girls on the Run Program in Twin	10,000
City Of Orofino217 1St St Orofino, ID 83544	None	GOV	Meal sealer	1,126
City Of Orofino217 1St St Orofino, ID 83544	None	GOV	Aluminum Activity Maps	7,288
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471



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Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
Idaho Hunger Relief Task Force Inc 963 S Orchard St Ste 206 Boise, ID 83705	None	PC	support expansion and training for the RxFFV programming in Idaho	25,000
Community Health Clinics Inc 211 16th Ave N Nampa, ID 83653	None	PC	Cleveland Clinic Project in Caldwell for senior residents.	50,000
<b>Total . . . . .</b> ▶ <b>3a</b>				1,019,471

**TY 2020 Accounting Fees Schedule**

**Name:** Blue Cross of Idaho Foundation For  
Health Inc

**EIN:** 26-0024334

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
Accounting Fees	8,300	830		7,470

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2020 Depreciation Schedule

**Name:** Blue Cross of Idaho Foundation For  
Health Inc

**EIN:** 26-0024334

### Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
Furniture	2018-07-15	64,282	9,642	SL	10.000000000000	6,428	0		
AV Equipment	2018-07-15	9,570	2,871	SL	5.000000000000	1,914	0		
Construction/Architect (Leasehold Improvement)	2018-07-01	65,487	21,162	SL	5.050000000000	14,146	0		
Sign	2018-08-01	3,861	1,094	SL	5.000000000000	772	0		
Wall Mural (Leasehold Improvement)	2018-09-01	4,632	1,260	SL	5.050000000000	917	0		
Equipment	2019-12-01	3,396	28	SL	10.000000000000	340	0		

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

## TY 2020 Expenditure Responsibility Statement

**Name:** Blue Cross of Idaho Foundation For  
Health Inc

**EIN:** 26-0024334

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
City of Good	246 8th Street Boise, ID 83702	2020-04-22	15,000	Food and supplies for providing meals to those in need during COVID-19 pandemic.	15,000			2021-08-23	

**TY 2020 Investments - Other Schedule**

**Name:** Blue Cross of Idaho Foundation For  
Health Inc

**EIN:** 26-0024334

**Investments Other Schedule 2**

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
Vanguard Total Bond Fund	FMV	11,696,205	11,696,205
Vanguard Institutional Index Fund	FMV	13,568,142	13,568,142
Dodge & Cox Int'l Stock Fund	FMV	7,291,409	7,291,409
Vanguard International Stock Fund	FMV	9,160,563	9,160,563
Vanguard Extended Market ETF	FMV	10,646,194	10,646,194
RREEF	FMV	1,316,532	1,316,532

**TY 2020 Land, Etc.  
Schedule**

**Name:** Blue Cross of Idaho Foundation For  
Health Inc

**EIN:** 26-0024334

<b>Category / Item</b>	<b>Cost / Other Basis</b>	<b>Accumulated Depreciation</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
Furniture	64,282	16,070	48,212	48,212
AV Equipment	9,570	4,785	4,785	4,785
Construction/Architect (Leasehold Improvement)	65,487	35,308	30,179	30,179
Sign	3,861	1,866	1,995	1,995
Wall Mural (Leasehold Improvement)	4,632	2,177	2,455	2,455
Equipment	3,396	368	3,028	3,028

**TY 2020 Legal Fees Schedule**

**Name:** Blue Cross of Idaho Foundation For  
Health Inc

**EIN:** 26-0024334

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
Legal Fees	1,577	0		1,577

**TY 2020 Other Expenses Schedule**

**Name:** Blue Cross of Idaho Foundation For  
Health Inc

**EIN:** 26-0024334

**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Miscellaneous Expenses	14,750	0		18,189



**TY 2020 Other Increases Schedule**

**Name:** Blue Cross of Idaho Foundation For  
Health Inc

**EIN:** 26-0024334

**Other Increases Schedule**

Description	Amount
Unrealized Gain/Loss	5,106,719
Return of Grant from Prior Year	647

**TY 2020 Other Professional Fees Schedule**

**Name:** Blue Cross of Idaho Foundation For  
Health Inc

**EIN:** 26-0024334

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
Other Professional Fees	602,933	37,859		588,257

**TY 2020 Taxes Schedule**

**Name:** Blue Cross of Idaho Foundation For  
Health Inc

**EIN:** 26-0024334

**Taxes Schedule**

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
Federal Excise Taxes	26,871	0		0

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

**Schedule of Contributors**  
▶ Attach to Form 990, 990-EZ, or 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047  
**2020**

Name of the organization  
Blue Cross of Idaho Foundation For  
Health Inc

**Employer identification number**  
26-0024334

**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 other 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<sup>1</sup>/<sub>3</sub>% 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, 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 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization  
Blue Cross of Idaho Foundation For Health Inc

**Employer identification number**  
26-0024334

**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	Blue Cross Of Idaho Health Service Inc 3000 E Pine Ave Meridian, ID 83642	\$ 25,000,000	<input checked="" type="checkbox"/> Person <input type="checkbox"/> Payroll <input checked="" type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)
		\$	<input type="checkbox"/> Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash (Complete Part II for noncash contributions.)

Name of organization Blue Cross of Idaho Foundation For Health Inc	Employer identification number 26-0024334
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<b>Part II Noncash Property</b>			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
1	34,400 Shares of Vanguard Institutional Index Fund	\$ 12,408,424	2021-04-13
-		\$	
-		\$	
-		\$	
-		\$	
-		\$	
-		\$	
-		\$	
-		\$	
-		\$	
-		\$	

Name of organization  
Blue Cross of Idaho Foundation For  
Health Inc

**Employer identification number**

26-0024334

**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 information once. See instructions.) ▶ \$ \_\_\_\_\_  
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	
_____ _____		_____ _____	

(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	
_____ _____		_____ _____	

(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	
_____ _____		_____ _____	

(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	
_____ _____		_____ _____	