DLN: 93491182009180

OMB No 1545-0052

2019

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

| A templery including | For | cale | ndar year 2019, or tax year beginning 01-01-20 |)19 , ar | nd ending 12-31- | 2019 | |
|--|-------------|---------|--|-----------------------|------------------------|------------------------|-------------------------|
| Section of Control (19-26) plus insulation funds in the delivered to street able to 19-20 (19-20) | | | | | | entification numbe | r |
| City of boars, date or growned, contriv, and ZP or foreign posted code City (64-76) City of boars, date or growned, contriv, and ZP or foreign posted code City (64-76) City of boars, date or growned, contriv, and ZP or foreign posted code City (64-76) City of boars, date or growned, contriv, and ZP or foreign posted code City (64-76) City of boars, date or growned, contriv, and ZP or foreign posted code City (64-76) City of boars, date or growned code City of boars, date City of boars, d | | | | | 30-0127892 | | |
| Cory et some, state or attemment, country, and ZIP or fereign residual ode C Head all that apply | | | |) Room/suite | B Telephone nu | mber (see instruction | ns) |
| Set WORK, NY 1908, 1907 Initial return | | | | | (212) 664-7656 | 5 | |
| Final return | | | | | C If exemption | application is pendin | g, check here |
| Final return | G Cl | neck al | that apply | former public charity | D 1. Foreign or | ganizations, check he | ere \square |
| H Check type of organization — Section 501(x)(3) esembly private foundation section 4947(3)(1) nonexempt character ust Other (specify) | | | | • | 2 Foreign or | ganizations meeting | the 85% |
| | | | \square Address change $\qquad \square$ Name change | | test, chec | k here and attach co | mputation 🕨 🔲 |
| Farm market value of all assets at end of year (from Part II, col (c.) hor (s) Ps 313,335,938 Developed (c.) hor (s) Ps 313,335 Developed (c | H C | neck ty | $ \sqrt{p} $ e of organization $ \sqrt{S} $ Section 501(c)(3) exempt private | foundation | | | |
| of year (from Part II, col. (c), how 16) ▶ \$ 313,335,538 | | Section | n 4947(a)(1) nonexempt charitable trust | e private foundation | | | |
| Part Analysis of Revenue and Expenses (the cotto) Part I, column (a) must be on cash base) | | | | ☐ Cash ☑ Accru | | | |
| of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (b), (c), and (d) may not necessarily experts the amounts in columns (a) (see instructions) 1 | | | ▶ \$ 313 335 583 | be on cash basis) | under sectio | 11 307(D)(1)(B), Cliec | ik flere |
| of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (b), (c), and (d) may not necessarily experts the amounts in columns (a) (see instructions) 1 | Pa | rt I | Analysis of Revenue and Expenses (The total | <u> </u> | | | (d) Dishursements |
| 2 Check | | | of amounts in columns (b), (c), and (d) may not necessarily | expenses per | | | for charitable purposes |
| 2 Check | | 1 | | | | | |
| Sch B | | 2 | , | | | | |
| 1000 | | | Sch B | | | | |
| 10 Sample Sampl | | _ | - · · · · · | 4 244 54 | 7,000,007 | | |
| December December | | - | | 4,214,517 | 7,906,997 | | |
| 100 22,730,496 | | | | | | | |
| December Page Pag | a) | | • , | 22,736,496 | <u> </u> | | |
| Net short-term capital gain | Reveru | | • , , | | | | |
| Net short-term capital gain | | | 80,017,749 |) | | | |
| 10a Gross sales less returns and allowances | | _ | | | 1,505,235 | | |
| 10a Gross sales less returns and allowances | | _ | • | | | | |
| B Less Cost of goods sold C Gross profit or (loss) (attach schedule) C Gross profit or (loss) (attach sched | | - | 1 | | | | |
| C C Gross profit or (loss) (attach schedule) S 363,882 244,192 | | | | <u>.</u> | | | |
| 12 Total. Add lines 1 through 11 27,314,895 9,656,424 | | c | | | | | |
| 13 Compensation of officers, directors, trustees, etc 491,907 0 491,907 1 | | 11 | Other income (attach schedule) | 363,882 | 244,192 | | |
| 14 Other employee saiaries and wages 2,542,433 231,578 2,303,664 15 Pension plans, employee benefits 938,490 42,219 894,505 16 Legal fees (attach schedule) 9 | | 12 | Total. Add lines 1 through 11 | 27,314,895 | 9,656,424 | | |
| 15 Pension plans, employee benefits 938,490 42,219 894,505 16a Legal fees (attach schedule) 938,490 1,726 0 3,550 16b Accounting fees (attach schedule) 937,726 0 37,026 1c Cother professional fees (attach schedule) 9332,704 166,599 161,699 17 Interest 18 Taxes (attach schedule) (see instructions) 93 169,555 163,849 0 19 Depreciation (attach schedule) and depletion 31,941 0 20 Occupancy 742,194 56,644 719,359 21 Travel, conferences, and meetings 143,652 1,661 135,725 22 Printing and publications 28,478 0 28,478 23 Other expenses (attach schedule) 93 298,637 287,560 295,724 24 Total operating and administrative expenses. Add lines 13 through 23 5,759,443 950,110 5,071,637 25 Contributions, gifts, grants paid 8,124,249 9,036,431 26 Total expenses and disbursements. Add lines 24 and 25 13,883,692 950,110 14,108,068 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements Net investment income (if negative, enter -0-) 8,706,314 | | 13 | Compensation of officers, directors, trustees, etc | 491,907 | , 0 | | 491,907 |
| 16a Legal fees (attach schedule) 1,726 0 3,550 b Accounting fees (attach schedule) 2 37,726 0 37,026 c Other professional fees (attach schedule) 2 332,704 166,599 161,699 17 Interest | | 14 | Other employee salaries and wages | 2,542,433 | 231,578 | | 2,303,664 |
| 23 Other expenses (attach schedule) | es | 15 | Pension plans, employee benefits | 938,490 | 42,219 | | 894,505 |
| 23 Other expenses (attach schedule) | sue | 16a | Legal fees (attach schedule) | | 0 | | 3,550 |
| 23 Other expenses (attach schedule) | Σ | Ь | Accounting fees (attach schedule) | | 0 | | 37,026 |
| 23 Other expenses (attach schedule) | ė. | C | Other professional fees (attach schedule) | 332,704 | 166,599 | | 161,699 |
| 23 Other expenses (attach schedule) | atıv | | Interest | | | | |
| 23 Other expenses (attach schedule) | Str | | , | | | | 0 |
| 23 Other expenses (attach schedule) | Ē | | | | | | |
| 23 Other expenses (attach schedule) | Actr | | • • | | | | <u> </u> |
| 23 Other expenses (attach schedule) | nd. | | | | · | | <u> </u> |
| 26 Total expenses and disbursements. Add lines 24 and 25 | | | | | | | <u> </u> |
| 26 Total expenses and disbursements. Add lines 24 and 25 | Ē | | | 250,037 | 201,300 | | 255,724 |
| 26 Total expenses and disbursements. Add lines 24 and 25 | era | | · · · | 5,759,443 | 950,110 | | 5,071,637 |
| 25 | o | 25 | | | | | + |
| 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) | | 26 | • | | | | |
| a Excess of revenue over expenses and disbursements b Net investment income (If negative, enter -0-) c Adjusted net income (If negative, enter -0-) | | 27 | | 13,883,692 | 950,110 | | 14,108,068 |
| disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-) | | | | | | | |
| c Adjusted net income (if negative, enter -0-) | | | disbursements | 13,431,203 | I | | |
| | | | · - | | 8,706,314 | | |
| TOT TOUGHTOUR ACCUMULATION ACTIVATION SECTION AND AND AND AND AND AND AND AND AND AN | For | | | | Cat No. 11300 | | |

| For | m 990- | PF (2019) | | | | Page 2 |
|-------------------------|--------|---|------------|-----------------|----------------------------------|----------------------------------|
| Pa | rt II | Balance Sheets Attached schedules and amounts in the description column | | ginning of year | End of | |
| | 1 | should be for end-of-year amounts only (See instructions) Cash—non-interest-bearing | (a | 880,683 | (b) Book Value 653,773 | (c) Fair Market Value 653,773 |
| | 2 | Savings and temporary cash investments | | 2,382,009 | 7,645,922 | 7,645,922 |
| | 3 | Accounts receivable | | 2,552,555 | 7,010,522 | 7,10,10,15,15,22 |
| | | Less allowance for doubtful accounts ▶ | | | | |
| | 4 | Pledges receivable ► | | | | |
| | - | Less allowance for doubtful accounts ▶ | | | | |
| | 5 | Grants receivable | | | | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | | |
| | " | disqualified persons (attach schedule) (see instructions) | | | | |
| | 7 | Other notes and loans receivable (attach schedule) | | | | |
| | ′ | Less allowance for doubtful accounts | | | | |
| | 8 | Inventories for sale or use | | | | |
| ets | | | | 12,698 | 18,503 | 18,503 |
| Assets | 9 | Prepaid expenses and deferred charges | | 12,698 | 16,303 | 16,303 |
| ⋖ | 10a | Investments—U.S. and state government obligations (attach schedule) | | | | |
| | b | Investments—corporate stock (attach schedule) | | | | |
| | C | Investments—corporate bonds (attach schedule) | | | | |
| | 11 | Investments—land, buildings, and equipment basis ▶ | - | | | |
| | | Less accumulated depreciation (attach schedule) ▶ | | | | |
| | 12 | Investments—mortgage loans | | | , | |
| | 13 | Investments—other (attach schedule) | | 269,458,292 | 304,833,490 | 304,833,490 |
| | 14 | Land, buildings, and equipment basis ► 695,042 | | | | |
| | | Less accumulated depreciation (attach schedule) ► 608,387 | | 103,159 | | 86,655 |
| | 15 | Other assets (describe ▶) | % J | 147,891 | 97,240 | 97,240 |
| | 16 | Total assets (to be completed by all filers—see the | | | | |
| | | instructions Also, see page 1, item I) | | 272,984,732 | 313,335,583 | 313,335,583 |
| | 17 | Accounts payable and accrued expenses | | 207,702 | 241,734 | |
| | 18 | Grants payable | | 6,539,977 | 5,500,576 | |
| Liabilities | 19 | Deferred revenue | | | | |
| 를 | 20 | Loans from officers, directors, trustees, and other disqualified persons | | | | |
| ap | 21 | Mortgages and other notes payable (attach schedule) | | | | |
| _ | 22 | Other liabilities (describe) | ارچھ | 1,470,754 | 1,536,574 | |
| | 23 | Total liabilities(add lines 17 through 22) | | 8,218,433 | 7,278,884 | |
| -Se | | Foundations that follow FASB ASC 958, check here | | | | |
| Š | | and complete lines 24, 25, 29 and 30. | | | | |
| <u>ala</u> | 24 | Net assets without donor restrictions | | 264,766,299 | 306,056,699 | |
| 8 | 25 | Net assets with donor restrictions | | | | |
| Assets or Fund Balances | | Foundations that do not follow FASB ASC 958, check here | | | | |
| ō | | and complete lines 26 through 30. | | | | |
| Ş | 26 | Capital stock, trust principal, or current funds | | | | |
| 556 | 27 | Paid-in or capital surplus, or land, bldg , and equipment fund | | | | |
| | 28 | Retained earnings, accumulated income, endowment, or other funds | | | | |
| Net | 29 | Total net assets or fund balances (see instructions) | | 264,766,299 | 306,056,699 | |
| _ | | | | | | |

313,335,583

1

2

3

4

5

6

264,766,299

13,431,203

27,965,604

306,163,106

306,056,699 Form **990-PF** (2019)

106,407

272,984,732

30

Part III

2

3

4

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

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Analysis of Changes in Net Assets or Fund Balances

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

Other increases not included in line 2 (itemize)

Enter amount from Part I, line 27a

Add lines 1, 2, and 3

Decreases not included in line 2 (itemize) ▶

Page **3**

| Part IV Capital Gains | and Losses for Tax on Invest | ment Income | | | |
|---|--|---------------------------------|---|--|--|
| | e the kınd(s) of property sold (e g , arehouse, or common stock, 200 shs | | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
| 1a See Addıtıonal Data Tabl | e | | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| e | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | Cost or | (g) other basis ense of sale | Gain d | h) or (loss) f) minus (g) |
| a See Additional Data Table | e | | | | |
| b | | | | | |
| С | | | | | |
| d | | | | | |
| e | | | | | |
| Complete only for assets | showing gain in column (h) and ow | ned by the foundation | on 12/31/69 | | (I) |
| (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | Excess | (k) of col (ı) (յ), ıf any | col (k), but not | h) gain minus less than -0-) or om col (h)) |
| a See Additional Data Table | e | | | | |
| b | | | | | |
| с | | | | | |
| d | | | | | |
| e | | | | | |
| · | gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructions : | | · I | 3 | 1,505,235 |
| Part V Qualification l | Jnder Section 4940(e) for Re | educed Tax on Net | Investment In | come | |
| (For optional use by domestic p | rivate foundations subject to the sec eave this part blank | ction 4940(a) tax on ne | et investment incon | ne) | |
| If "Yes," the foundation does no | e section 4942 tax on the distributal ot qualify under section 4940(e) Do | not complete this part | | | es 🗸 No |
| | nount in each column for each year, | see instructions before | making any entrie | | |
| (a) Base period years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitab | | (d) Distribution rat (col (b) divided by d | col (c)) |
| 2018 | 11,957,857 | | 292,913,098 | | 0 040824 |
| 2017 | 16,047,058 15,186,302 | | 287,746,413 270,497,824 | | 0 055768 |
| 2016 | | | ' ' ' | | 0 056142 |
| 2015 | 14,535,462 13,979,509 | | 280,458,570 285,527,645 | | 0 051827 |
| | | | | 1 | 0 048960 |
| 2 Total of line 1, column (c | d) | | | | 0 253521 |
| number of years the four | ndation has been in existence if less ncharitable-use assets for 2019 from | than 5 years | | | 0 050704 292,651,865 |
| 5 Multiply line 4 by line 3 | | | 5 | | 14,838,620 |
| 6 Enter 1% of net investme | ent income (1% of Part I, line 27b) | | 6 | | 87,063 |
| 7 Add lines 5 and 6 | | | 7 | | 14,925,683 |
| 8 Enter qualifying distributi | ons from Part XII, line 4 , | | 8 | | 14,123,505 |
| If line 8 is equal to or gre instructions | eater than line 7, check the box in Pa | art VI, line 1b, and com | plete that part usi | | ee the Part VI |

| orm | 990-PF (20 | <u>'</u> | | | | | | F | Page 6 |
|-------|---------------|---------------------------------------|---|-----------------------------|--|--------|----------|---------|---|
| Pai | t VII-B | Statements Regard | ling Activities for Which | n Form 4720 May Be | Required (continued | d) | | | |
| 5a | - | | pay or incur any amount to | | | | | Yes | No |
| | | | rise attempt to influence legis | | ☐ Yes | ✓ No | , | | |
| | | • • | pecific public election (see sec | ** | | | | | |
| | * | | ter registration drive? | | · · 🗌 Yes | ✓ No | , | | |
| | | - | for travel, study, or other sin | • | _ Yes | ✓ No | | | |
| | | - | on other than a charitable, et | · - | | | | | |
| | | | nstructions | | · · ✓ Yes | ☐ No | , | | |
| | | | nan religious, charitable, scier | | _ | _ | | | |
| h | | | prevention of cruelty to child | | ⊔ Yes | ✓ No | • | | |
| D | | | did any of the transactions factoring disast | | • | | 5b | | No |
| | - | | otice regarding disaster assis | | _ | | 150 | | 110 |
| _ | _ | • • | a(4), does the foundation claim | | | | | | |
| _ | | • | re responsibility for the grant | • | 🗖 | | | | |
| | | · · · · · · · · · · · · · · · · · · · | red by Regulations section 53 | | · · • Yes | ∐ No | · | | |
| 6a | | · | receive any funds, directly o | — | ıms on | | | | |
| - | | | · · · · · · · · · · · · · | ** ' ' ' ' | _ | | | | |
| ь | | | pay premiums, directly or in- | | ⊔ res | . ✓ No | 6ь | | No |
| | | 6b, file Form 8870 | , , , | ,, , | | | | | |
| 7a | At any time | e during the tax year, was | s the foundation a party to a | prohibited tax shelter tra | nsaction? | ✓ No | | | |
| b | If "Yes", di | d the foundation receive a | any proceeds or have any net | : income attributable to th | ne transaction? | . NO | 7b | | |
| 8 | Is the foun | dation subject to the sect | ion 4960 tax on payment(s) | of more than \$1,000,000 | ın remuneration or | | | | |
| | excess par | achute payment during th | ne year [?] | | · · Yes | ✓ No | , L | | |
| Do | 4 V/TTT | Information About C | Officers, Directors, Trus | tees, Foundation Ma | | | | , | |
| Pal | t VIII | and Contractors | | | | | | | |
| 1 | List all off | icers, directors, trustee | es, foundation managers a | nd their compensation | . See instructions | | | | |
| | (-) N- | | (b) Title, and average | (c) Compensation (If | (d) Contributions to | | e) Exper | nse acc | ount, |
| | (a) Nai | me and address | hours per week devoted to position | not paid, enter -0-) | employee benefit plans deferred compensation | | other a | llowand | ces |
| See A | Additional Da | ata Table | | | · | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 2 | Compensa | ition of five highest-pai | id employees (other than t | those included on line | | | enter " | NONE | <u>." </u> |
| (a) | Name and a | ddress of each employee | naid (b) Title, and average | | (d) Contributions to employee benefit | |) Expen | se acco | nunt |
| (0) | | re than \$50,000 | hours per week devoted to position | (c) Compensation | plans and deferred | | other al | | |
| | | | | | compensation | | | | |
| | DRIVER | | SENIOR DIRECTOR, FIN | 260,86 | 68,4 | 192 | | | 0 |
| | BROADWAY | / 23RD FLOOR | 10 00 | | | | | | |
| | OLAS SMIRI | | CHIEF INVESTMENT OF | = 230,73 | 39 28.8 | 242 | | | |
| | | 23RD FLOOR | 18 00 | 230,7. | 20,0 | , , , | | | U |
| | YORK, NY 1 | | | | | | | | |
| | ZEZZA | | DIRECTOR OF POLICY A | 209,93 | 78 38,8 | 363 | | | 0 |
| 1385 | BROADWAY | 23RD FLOOR | 40 00 | | | | | | |
| | YORK, NY 1 | | | | | | | | |
| MAUI | REEN COZIN | E | SENIOR DIRECTOR, | 212,36 | 28,9 | 945 | | | 0 |
| | | 23RD FLOOR | COM 40 00 | | | | | | |
| | YORK, NY 1 | 10018 | | | | | | | |
| | N BYRD | | PROGRAM OFFICER | 131,0 | 50 52,2 | 266 | | | 0 |
| | BROADWAY | / 23RD FLOOR 10018 | | | | | | | |
| | | | l er \$50,000 | | | | | | 15 |
| | | | , | | | | orm QQ | ∩-DF | |

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|---|--|---------------------------|
| Part VIII Information About Officers, Directors, Trus and Contractors (continued) | stees, Foundation Managers, Highly Paid E | mployees, |
| 3 Five highest-paid independent contractors for professiona | l services (see instructions). If none, enter "NOI | NE". |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| MACHLOWITZ CONSULTANTS | HR SEARCH FIRM FEES | 75,000 |
| 110 E 28TH STREET NEW YORK, NY 10016 | | |
| JP MORGAN | INVESTMENT CUSTODIAN FEES | 66,616 |
| 4 METRO TECH CENTER 16TH FLOOR NEW YORK, NY 11245 | | |
| MERCURY PUBLIC AFFAIRS | MEDIA RELATIONS CONSULTING FEES | 52,500 |
| 200 VARICK STREET SUITE 600 NEW YORK, NY 10014 | | |
| | _ | |
| Total number of others receiving over \$50,000 for professional service | s | 0 |
| Part IX-A Summary of Direct Charitable Activities | | |
| List the foundation's four largest direct charitable activities during the tax year. In organizations and other beneficiaries served, conferences convened, research paper. | | Expenses |
| 1 SEE STATEMENT 15 | | 1,215,037 |
| 2 | | 183,960 |
| 3 | | 716,056 |
| 4 | | |
| 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 | | |
| 2 | | |
| | | |
| All other program-related investments See instructions 3 | | |
| Total. Add lines 1 through 3 | | 0 |
| | | Form 990-PF (2019) |

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

2

3a 3h

4

5

15,437

14,123,505

14.123.505

Form 990-PF (2019)

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

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

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

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

14,123,505

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350,366

Page 9

| _ | _ | • | ٠. | ١ | _ | _ | _ | |
|---|---|---|----|---|---|---|---|--|
| I | X | ı | ŧ | Ī | | | | |
| | | | | | | | | |

| Form 990-PF (20 | 019) |
|-----------------|---|
| Part XIII | Undistributed Income (see instructions) |

b Total for prior years

a From 2014. **b** From 2015. . . . c From 2016. . . d From 2017.

e From 2018.

| 990-PF (2 | 019) |
|-----------|------|
| t XIII | Undi |

1 Distributable amount for 2019 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2019

Excess distributions carryover, if any, to 2019

f Total of lines 3a through e.

d Applied to 2019 distributable amount. e Remaining amount distributed out of corpus **5** Excess distributions carryover applied to 2019

same amount must be shown in column (a))

(If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 **b** Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) . . .

6 Enter the net total of each column as

9 Excess distributions carryover to 2020.

10 Analysis of line 9

a Excess from 2015. . . **b** Excess from 2016. . c Excess from 2017. . . .

d Excess from 2018. . . e Excess from 2019. . .

Subtract lines 7 and 8 from line 6a

indicated below:

4 Qualifying distributions for 2019 from Part XII, line 4 > \$ 14,123,505 a Applied to 2018, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election required—see instructions).

a Enter amount for 2018 only.

1.553.903

1.203.537

1.553.903

350,366

1,203,537

1,203,537

(a)

Corpus

(b)

Years prior to 2018

(c)

2018

SANDMAN@NYSHEALTH ORG

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

SEE WWW NYSHEALTH ORG c Any submission deadlines

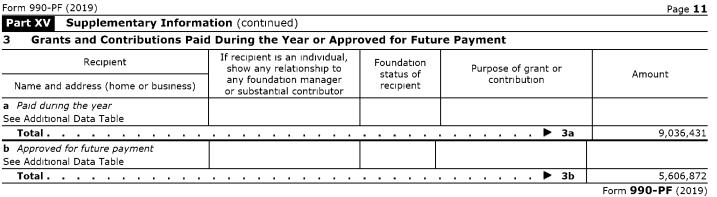
SEE WWW NYSHEALTH ORG

factors

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

SEE WWW NYSHEALTH ORG

Form **990-PF** (2019)



| | | -A Analysis of Income-Producing | | Helpoce income | Evoluded by an | .E12 E12 E14 | (e) |
|--|-------------|--|---------------|----------------|----------------|--------------|-----------------------------------|
| a b C C C C C C C C C C C C C C C C C C | Enter gross | amounts unless otherwise indicated | | | <u> </u> | | Related or exempt function income |
| b d d d d d d d d d d d d d d d d d d d | | | Business code | Amount | Exclusion code | Amount | (See instructions) |
| c d d | | | | | | | |
| g Fees and contracts from government agencies 2 Membership dues and assessments | | | | | | | |
| g Fees and contracts from government agencies Membership dues and assessments | | | | | | | |
| g Fees and contracts from government agencies 2 Membership dues and assessments | | | | | | | |
| 2 Membership dues and assessments | | | | | | | |
| Investments 4 Dividends and interest from securities. 5 Net rental income or (loss) from real estate a Debt-financed property. b Not debt-financed property. 6 Net rental income or (loss) from personal property 7 Other investment income. 8 Gain or (loss) from special events 18 22,736,496 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue a RENTAL INCOME b GRANTS RESCINDED c GRANTS RESCINDED d e 2 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See | | | | | | | |
| 4 Dividends and interest from securities | | | | | | | |
| 5 Net rental income or (loss) from real estate a Debt-financed property | | | | | 1.4 | 4 214 517 | |
| a Debt-financed property. b Not debt-financed property. 6 Net rental income or (loss) from personal property 7 Other investment income. 8 Gain or (loss) from sales of assets other than inventory. 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue a RENTAL INCOME b GRANTS RESCINDED c GRANTS REFUND d e 12 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). 5 Subtotal Add line 12, columns (b), (d), and (e). 6 Net rental income or (loss) from personal property 18 22,736,496 19 Net income or (loss) from sales of inventory 10 Other revenue 1 | | | | | 14 | 4,214,517 | |
| 6 Net rental income or (loss) from personal property 7 Other investment income | | | | | | | |
| 7 Other investment income | | | | | | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | | | | | |
| Inventory | | | | | | | |
| 9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue a RENTAL INCOME b GRANTS RESCINDED c GRANTS REFUND d e 12 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See | | | | | 18 | 22.736.496 | |
| 10 Other revenue a RENTAL INCOME b GRANTS RESCINDED c GRANTS REFUND d e 12 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). 4 (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See | 9 Net inc | ome or (loss) from special events | | | | , , | |
| a RENTAL INCOME b GRANTS RESCINDED c GRANTS REFUND d e 16 198,478 150,000 1 150,000 1 15,404 | • | · · · | | | | | |
| b GRANTS RESCINDED c GRANTS REFUND d e 1.2 Subtotal Add columns (b), (d), and (e). 3 Total. Add line 12, columns (b), (d), and (e). 4.3 Total. Add line 12, columns (b), (d), and (e). 5.4 See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See | | | | | 16 | 100 470 | |
| c GRANTS REFUND d e L2 Subtotal Add columns (b), (d), and (e) | | | | | + | | |
| d | | TC DEFUND | | | | • | |
| 12 Subtotal Add columns (b), (d), and (e) | | | | | | | |
| 3 Total. Add line 12, columns (b), (d), and (e) | | | | | | | |
| (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See | | | | | | | |
| Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See | See wo | orksheet in line 13 instructions to verify calcu | lations) | | 1 | 3 | 27,314,693 |
| the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See | | Relationship of Activities to the | ne Accomplisi | | | | |
| Instructions) Instructions Instructions | | the accomplishment of the foundation's ex | | | | | |
| | | instructions) | | | | | |
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| Form 990-P | F (2019) | | | | Pa | ge 13 |
|-------------------|---------------------------------|--|--|------------|--------|--------------|
| Part XV | Information Re Exempt Organi | | ions and Relationships With Nonchari | table | | |
| | | directly engage in any of the following with a organizations) or in section 527, relating to | any other organization described in section 501 political organizations? | | Yes | No |
| a Transfe | rs from the reporting foun | dation to a noncharitable exempt organization | on of | | | |
| (1) Ca | sh | | | 1a(1) | Yes | |
| | | | | 1a(2) | | No |
| b Other tr | ansactions | | | | | |
| (1) Sa | les of assets to a nonchar | itable exempt organization | | 1b(1) | | No |
| (2) Pu | rchases of assets from a r | noncharitable exempt organization | | 1b(2) | | No |
| | | | | 1b(3) | | No |
| | | ts | | 1b(4) | | No |
| ٠, | | | | 1b(5) | | No |
| | = | embership or fundraising solicitations | | 1b(6) | | No |
| | | nailing lists, other assets, or paid employees | | 1c | | No |
| of the g | oods, other assets, or ser | | Column (b) should always show the fair market we foundation received less than fair market valuable goods, other assets, or services received | | • | |
| (a) Line No | (b) Amount involved | (c) Name of noncharitable exempt organization | (d) Description of transfers, transactions, and sha | rıng arrar | ngemen | ts |
| 1a(1) | | NEW YORK STATE ACADEMY OF FAMILY PHYSICIANS | NYSAFP PATIENT EMPOWERMENT | | | |
| 1a(1) | 44,936 | AMERICAN CONGRESS OF OBSTETRICIANS AND GYNECOLOGISTS | WOMEN, PREGNANCY, & THE OPIOID EPIDEMIC YORK A HEALTHCARE PROVIDER EDUCATIONAL | | | NEW_ |
| | | | | | | |
| | | | | | | |
| | | | | | | |

| (2) Pu | rchases of assets from a r | ioncharitable exem | ipt organization | | | 1b(2) | No |
|---------------|--|------------------------------|------------------------------|---------------|--|-------------------|-----------|
| (3) Re | ntal of facilities, equipmen | nt, or other assets. | | | | 1b(3) | No |
| (4) Re | ımbursement arrangemen | ts | | | | 1b(4) | No |
| (5) Lo | ans or loan guarantees. | | | | | 1b(5) | No |
| | | | | | | 1b(6) | No |
| c Sharing | of facilities, equipment, r | nailing lists, other | assets, or paid employees | s | | 1c | No |
| of the g | oods, other assets, or ser | vices given by the | reporting foundation If t | ne foundatio | should always show the fair mark n received less than fair market of ther assets, or services received | | |
| (a) Line No | (b) Amount involved | (c) Name of nonch | arıtable exempt organization | (d) Des | cription of transfers, transactions, and | sharing arranger | nents |
| 1a(1) | 30,377 | NEW YORK STATE PHYSICIANS | ACADEMY OF FAMILY | NYSAFP PA | TIENT EMPOWERMENT | | |
| 1a(1) | 44,936 | | | | REGNANCY, & THE OPIOID EPIDE | | |
| | | AND GYNECOLOG | ISTS | YORK A HE | EALTHCARE PROVIDER EDUCATION | ONAL APPROAC | <u>:H</u> |
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| | | | | | | | |
| 2a Is the fo | ı oundatıon dırectly or ındıre | ı actly affiliated with | or related to one or mo | re tav-evem | nt organizations | | |
| | ed in section 501(c) (other | · · | | | _ | ✓ No | |
| | , , , | | (c)(3)) or in section 32/7 | | теs | ₩ 140 | |
| b If "Yes," | complete the following s (a) Name of organization | | (b) Tune of annual | | (c) Description of re | | |
| | (a) Name or organization | on | (b) Type of organiz | ation | (c) Description of re | eracionship | |
| | | | | | | | |
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| | nder penalties of persons | I doclaro that I ba | vo avaminad this retire | naludina sas | ı companyıng schedules and stater | nonto and to t | ha hast |
| 1 0 | inder penalties of perjury, | i deciale filat I fla | ve examined tills return, | mercuring acc | ompanying schedules and stater | nents, and to the | ווב מבצנ |

of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign Here May the IRS discuss this 2020-06-24 with the preparer shown Tıtle Signature of officer or trustee Date (see instr) Ves I No

Print/Type preparer's name Preparer's Signature PTIN Date Check if self-P02103452 employed ▶ □ ANAN SAMARA 2020-06-24 Paid

Preparer PKF O'CONNOR DAVIES LLP Firm's name ▶ Firm's EIN ▶27-1728945 **Use Only** 665 FIFTH AVENUE Fırm's address ▶ Phone no (212) 286-2600 NEW YORK, NY 10022

Form **990-PF** (2019)

| Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d | | | | | | | | | |
|--|---|-----------------------------------|-------------------------------------|-----------------------------|---|--|--|--|--|
| List and describe the l (a) 2-story brick warehou | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) | | | | | | |
| BLACKROCK RUSSELL 1000 IN | IDEX FUND B REALIZED GAINS THR | ROUGH K-1 | Р | | | | | | |
| BLACKROCK ACWI EX-US SUP | ERFUND B REALIZED GAINS THROU | JGH K-1 | P | | | | | | |
| AGGREGATE BOND INDEX (20 | ,400 SHARES) | | Р | | | | | | |
| BGI RUSSELL 1000 INDEX FUN | ND (55,683 SHARES) | | Р | | | | | | |
| BGI RUSSELL 1000 INDEX FUN | ND (112 SHARES) | | Р | | | | | | |
| BGI RUSSELL 1000 INDEX FUN | ND (63,723 SHARES) | | Р | | | | | | |
| BGI RUSSELL 1000 INDEX FUN | ND (113 SHARES) | | Р | | | | | | |
| BLACKROCK ACWI EX-US INDI | EX FUND (38,669 SHARES) | | Р | | | | | | |
| BLACKROCK ACWI EX-US INDI | EX FUND (191,939 SHARES) | | Р | | | | | | |
| BLACKROCK ACWI EX-US INDI | EX FUND (106,957 SHARES) | | Р | | | | | | |
| , Form 990PF Part IV - Capital (| Gains and Losses for Tax on | Investment I | ncome - Colum | ns e - h | | | | | |
| (e) Gross sales price | Depreciation allowed (f) (or allowable) | | r other basis pense of sale | Gain (h) (e) plus | or (loss) (f) minus (g) | | | | |
| | | | | | 7,897,445 | | | | |
| | | | | | 835,601 | | | | |
| 2,300,140 | | | 2,263,261 | | 36,879 | | | | |
| 2,100,000 | | | 2,063,291 | | 36,709 | | | | |
| 4,370 | | | 4,147 | | 223 | | | | |
| 2,500,000 | | | 2,361,208 | | 138,792 | | | | |
| 4,430 | | | 4,192 | | 238 | | | | |
| 1,145,512 | | | 1,234,094 | | -88,582 | | | | |
| 5,685,994 | | | 6,270,226 | | -584,232 | | | | |
| 3,168,494 | | | 3,297,113 | | -128,619 | | | | |
| Form 990PF Part IV - Capital (| Gains and Losses for Tax on | Investment I | ncome - Colum | ns i - I | | | | | |
| Complete only for assets show | ing gain in column (h) and owned b | y the foundation | on 12/31/69 | | (h) gain minus | | | | |
| (i) F M V as of 12/31/69 | Adjusted basis (j) as of 12/31/69 | | ss of col(၊) ol(ϳ), ıf any | | t less than -0-) or from col (h)) | | | | |
| | | | | | 7,897,445 | | | | |
| | | | | | 835,601 | | | | |
| | | | | | 36,879 | | | | |
| | | | | 36,709 | | | | | |
| | | | | | 223 | | | | |
| | | 138,792 | | | | | | | |
| | | | | | 238 | | | | |
| | | | | -88,582 | | | | | |
| | -584,232 | | | | | | | | |
| | | | | | -128,619 | | | | |

| Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d | | | | | |
|--|---|--|--|--|--|
| | kınd(s) of property sold (e g , real e use, or common stock, 200 shs MLC | | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
| BLACKROCK ACWI EX-US IND | EX FUND (103,361 SHARES) | | Р | | |
| BLACKROCK ACWI EX-US IND | EX FUND (175,011 SHARES) | | Р | | |
| BLACKROCK ACWI EX-US IND | EX FUND (29,153 SHARES) | | Р | | |
| BLACKROCK ACWI EX-US IND | EX FUND (313 SHARES) | | Р | | |
| BLACKROCK ACWI EX-US IND | EX FUND (126,621 SHARES) | | Р | | |
| BLACKROCK ACWI EX-US IND | EX FUND (191,578 SHARES) | | Р | | |
| BLACKROCK ACWI EX-US IND | EX FUND (124,247 SHARES) | | Р | | |
| BLACKROCK ACWI EX-US IND | EX FUND (121,287 SHARES) | | Р | | |
| BLACKROCK ACWI EX-US IND | EX FUND (79,333 SHARES) | | Р | | |
| BLACKROCK ACWI EX-US IND | EX FUND (288 SHARES) | | Р | | |
| Form 990PF Part IV - Capital | Gains and Losses for Tax on | Investment I | ncome - Colum | ns e - h | |
| (e) Gross sales price | Depreciation allowed (f) (or allowable) | Cost or other basis (g) plus expense of sale | | Gain or (loss) (h) (e) plus (f) minus (g) | |
| 3,024,938 | | 3,186,233 | | -161,295 | |
| 5,121,867 | | | 5,614,711 | -492,844 | |
| 853,194 | | | 966,555 | -113,361 | |
| 9,497 | | | 10,366 | -869 | |
| 3,839,585 | | | 4,198,038 | -358,453 | |
| 5,809,308 | | | 5,905,837 | -96,529 | |
| 3,767,605 | | | 3,848,412 | -80,807 | |
| 3,677,854 | | | 3,802,480 | -124,626 | |
| 2,405,650 | | | 2,486,918 | -81,268 | |
| 8,428 | | | 9,031 | -603 | |
| Form 990PF Part IV - Capital | Gains and Losses for Tax on | Investment I | ncome - Colum | ns i - I | |
| Complete only for assets show | ring gain in column (h) and owned b | y the foundation | on 12/31/69 | | (h) gain minus |
| (i) F M V as of 12/31/69 | Adjusted basis (j) as of 12/31/69 | | ss of col(၊) ol(ϳ), ıf any | | it less than -0-) or from col (h)) |
| | | | | | -161,295 |
| | | | | | -492,844 |
| | | | | | -113,361 |
| | | | | | -869 |
| | | | | | -358,453 |
| | | | | | -96,529 |
| | | | | | -80,807 |
| | | | | | -124,626 |
| | | | | | -81,268 |
| | | | | | -603 |
| | | | | | |

| Form 990PF Part IV - Capital | Gains and Losses for Tax on | Investment I | ncome - Colum | ns a - d | |
|-------------------------------|---|------------------|---|---|--|
| | List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) | | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) |
| BLACKROCK ACWI EX-US IND | EX FUND (29,722 SHARES) | | Р | | |
| BLACKROCK ACWI EX-US IND | EX FUND (92,771 SHARES) | | Р | | |
| BLACKROCK ACWI EX-US IND | EX FUND (79,388 SHARES) | | Р | | |
| BLACKROCK ACWI EX-US IND | EX FUND (51,941 SHARES) | | Р | | |
| BLACKROCK ACWI EX-US IND | EX FUND (52,606 SHARES) | | Р | | |
| BLACKROCK ACWI EX-US IND | EX FUND (50,259 SHARES) | | Р | | |
| BLACKROCK ACWI EX-US IND | EX FUND (58,896 SHARES) | | Р | | |
| BLACKROCK ACWI EX-US IND | EX FUND (47,192 SHARES) | | Р | | |
| BLACKROCK ACWI EX-US IND | EX FUND (416,325 SHARES) | | Р | | |
| BLACKROCK ACWI EX-US IND | EX FUND (102,104 SHARES) | | Р | | |
| Form 990PF Part IV - Capital | Gains and Losses for Tax on | Investment I | ncome - Colum | ns e - h | |
| (e) Gross sales price | Depreciation allowed (f) (or allowable) | | r other basis pense of sale | | or (loss) (f) minus (g) |
| 920,177 | | 931,712 | | | -11,535 |
| 2,872,178 | | | 3,026,283 | -154,105 | |
| 2,457,823 | | | 2,683,981 | -226,158 | |
| 1,608,065 | | | 1,750,580 | -142,515 | |
| 1,628,668 | | | 1,908,659 | -279,991 | |
| 1,555,997 | | | 1,740,162 | -184,165 | |
| 1,823,398 | | | 2,045,019 | | -221,621 |
| 1,461,039 | | | 1,672,925 | -211,886 -5,165,038 -1,078,480 | |
| 12,889,323 | | | 18,054,361 | | |
| 3,161,099 | | | 4,239,579 | | |
| Form 990PF Part IV - Capital | Gains and Losses for Tax on | Investment I | ncome - Colum | ns i - I | |
| Complete only for assets show | ing gain in column (h) and owned b | y the foundation | on 12/31/69 | | (h) gain minus |
| (i) F M V as of 12/31/69 | Adjusted basis (j) as of 12/31/69 | | ss of col(ı) ol(ʒ), ıf any | | it less than -0-) or from col (h)) |
| | | | | | -11,535 |
| | | | | | -154,105 |
| | | | | | -226,158 |
| | | | | | -142,515 |
| | | | | | -279,991 |
| | | | | | -184,165 |
| | | | | | -221,621 |
| | | | | | -211,886 |
| | | | | -5,165,038 | |
| | | | | | -1,078,480 |

List and describe the kind(s) of property sold (e g , real estate, (d) (b) (c) (a) 2-story brick warehouse, or common stock, 200 shs MLC Co) How acquired Date acquired Date sold P—Purchase (mo, day, yr) (mo, day, yr) D-Donation RUSSELL 1000 (3,500 SHARES) Ρ RUSSELL 1000 (10,000 SHARES) Ρ RUSSELL 1000 (11,000 SHARES) Ρ Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h (e) Gross sales price Depreciation allowed Cost or other basis Gain or (loss) (or allowable) (g) plus expense of sale (h) (e) plus (f) minus (g) (f) 596.061 241 743 354 318

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

| Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - I | | | | | |
|--|--|---------|-----------|--|--|
| 1,914,022 | | 746,137 | 1,167,885 | | |
| 1,703,033 | | 678,306 | 1,024,727 | | |
| 370,001 | | 271,773 | 557,510 | | |

| | 1,914,022 746,13 | | | 1,167,885 |
|------|-------------------------------|-----------------------------|---------------------------|---|
| Form | 990PF Part IV - Capital | Gains and Losses for Tax on | Investment Income - Colum | ns i - I |
| | Complete only for assets show | Gains (Col (h) gain minus | | |
| | (i) F M V as of 12/31/69 | Adjusted basis | Excess of col (ı) | col (k), but not less than -0-) or (I) Losses (from col (h)) |

| Complete only for assets show | Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 | | | | |
|-------------------------------|---|--|--|--|--|
| (i) F M V as of 12/31/69 | Adjusted basis (j) as of 12/31/69 | Excess of col(ı) (k) over col(ʒ), ıf any | col (k), but not less than -0-) or (I) Losses (from col (h)) | | |
| | | | | | |

| (i) F M V as of 12/31/69 | Adjusted basis Excess of col (i) (j) as of 12/31/69 (k) over col (j), if any | | col (k), but not less than -0-) or (I) Losses (from col (h)) |
|--------------------------|--|--|--|
| | | | 25/ 219 |

| (i) F M V as of 12/31/69 | Adjusted basis (j) as of 12/31/69 | Excess of col(ı) (k) over col(յ), ıf any | (I) Losses (from col (h)) |
|--------------------------|--|--|---------------------------|
| | | | 354,318 |

| (j) as of 12/31/69 | (k) over col (j), if any | (.,,, | | |
|---------------------------|--------------------------|-----------|--|--|
| | | 354,318 | | |
| | | 1,024,727 | | |

1,167,885

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation (a) Name and address Title, and average (c) Compensation (If (d) Expense account, hours per week not paid, enter Contributions to (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation DAVID SANDMAN 491,907 48,304 PRESIDENT & CEO 40 00 1385 BROADWAY 23RD FLOOR NEW YORK, NY 10018 ROBERT G SMITH BOARD MEMBER n 3 00 1385 BROADWAY 23RD FLOOR NEW YORK, NY 10018 COURTNEY BURKE O BOARD MEMBER 3 00 1385 BROADWAY 23RD FLOOR NEW YORK, NY 10018 MARGARET I CUOMO 0 BOARD MEMBER 3 00 1385 BROADWAY 23RD FLOOR NEW YORK, NY 10018 FRANCIS J MCDONOUGH BOARD MEMBER n n 3 00 1385 BROADWAY 23RD FLOOR NEW YORK, NY 10018 **ELLEN RAUTENBERG** BOARD MEMBER 0 0 3 00 1385 BROADWAY 23RD FLOOR NEW YORK, NY 10018 MARY E CRAIG BOARD MEMBER 0 0 3 00 1385 BROADWAY 23RD FLOOR NEW YORK, NY 10018 KATHLEEN PRESTON BOARD MEMBER O 3 00 1385 BROADWAY 23RD FLOOR NEW YORK, NY 10018 MICHELLE A KOURY 0 0 BOARD MEMBER 3 00

1385 BROADWAY 23RD FLOOR NEW YORK, NY 10018

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| | or substantial continuator | | | |
|--|----------------------------|----|---------------------------------|--------|
| a Paid during the year | | | | |
| AARP FOUNDATION601 E STREET NW WASHINGTON, DC 20049 | N/A | PC | CONVENING OF A CAREGIVER SUMMIT | 10,000 |
| ACTIVE CITIZEN PROJECT INC 250 W 39TH ST 705 | N/A | PC | HEALTHY NEIGHBORHOODS FUND | 31,250 |

| ACTIVE CITIZEN PROJECT INC 250 W 39TH ST 705 NEW YORK, NY 10018 | N/A | PC | HEALTHY NEIGHBORHOODS FUND | 31,250 |
|---|-----|----|--|--------|
| AFRICAN HERITAGE ECONOMIC INITIATIVE 48 DORRIS AVENUE | N/A | PC | THE AFRICAN HERITAGE FOOD CO-OP OF NIAGARA FALLS | 60,000 |

| 250 W 39TH ST 705 NEW YORK, NY 10018 | , | | FUND | , |
|---|-----|----|---|------|
| AFRICAN HERITAGE ECONOMIC INITIATIVE 48 DORRIS AVENUE | N/A | PC | THE AFRICAN HERITAGE FOOD CO-OP OF NIAGARA FALLS | 60,0 |

| NEW YORK, NY 10018 | | | | |
|--|-----|----|---|-----------|
| AFRICAN HERITAGE ECONOMIC INITIATIVE 48 DORRIS AVENUE BUFFALO, NY 14215 | N/A | PC | THE AFRICAN HERITAGE FOOD CO-OP OF NIAGARA FALLS | 60,000 |
| Total | | | ▶ 3a | 9,036,431 |

| form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment | | | | |
|--|---|-------------------------|--|---------|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| AMERICAN ACADEMY OF PEDIATRICS NY CHAPTER 1 132 ALLENS CREEK ROAD SUITE 100 ROCHESTER, NY 14618 | N/A | PC | IMPROVING HPV VACCINATION RATES AMONG ADOLESCENTS IN NEW YORK STATE | 143,324 |
| AMERICAN CONGRESS OF OBSTETRICIANS AND GYNECOLOGISTS 100 GREAT OAKS BOULEVARD SUITE 109 ALBANY, NY 12203 | N/A | NC | WOMEN, PREGNANCY, & THE OPIOID EPIDEMIC IN UPSTATE NEW YORK A HEALTHCARE PROVIDER EDUCATIONAL APPROACH | 44,936 |
| ASIAN AMERICAN FEDERATION OF NEW | N/Δ | PC | IMPROVING MENTAL HEALTH | 160,000 |

| AMERICAN CONGRESS OF OBSTETRICIANS AND GYNECOLOGISTS 100 GREAT OAKS BOULEVARD SUITE 109 ALBANY, NY 12203 | N/A | NC | WOMEN, PREGNANCY, & THE OPIOID EPIDEMIC IN UPSTATE NEW YORK A HEALTHCARE PROVIDER EDUCATIONAL APPROACH | 44,936 |
|--|-----|----|--|---------|
| ASIAN AMERICAN FEDERATION OF NEW YORK 120 WALL STREET 9TH FLOOR NEW YORK, NY 100053904 | N/A | PC | IMPROVING MENTAL HEALTH SERVICES FOR ASIAN AMERICANS IN NEW YORK | 160,000 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year AVALERE HEALTH LLC N/A NC PROVIDING STRATEGIC 71.926 1350 CONNECTICUT AVENUE NW GUIDANCE AND TECHNICAL

| WASHINGTON, DC 20036 | | | CONNECTING CONSUMERS TO INFORMATION INITIATIVE | |
|---|-----|----|---|--------|
| BE MORE AMERICA INC 424 WEST 54TH STREET NEW YORK, NY 10019 | N/A | PC | BREAKING BIAS IN HEALTH CARE | 10,000 |

| 424 WEST 54TH STREET NEW YORK, NY 10019 | | CARE | 10,000 |
|--|-----|--|--------|
| BERTRAND CHAFFEE HOSPITAL 224 EAST MAIN STREET SPRINGVILLE, NY 14141 | N/A | VETERANS' HEALTH - CONFERENCE SCHOLARSHIP | 912 |

Total .

▶ 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, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BETH ISRAEL DEACONESS MEDICAL N/A PC SUPPORTING FQHCS OPEN 81,214 CENTER NOTES NYSHEALTH GRANTEES 133 BROOKLINE AVENUE HVMA SUITE

| 2200 BOSTON, MA 02215 | | | | |
|--|-----|----|---|---------|
| BOSTON COLLEGE TRUSTEES 140 COMMONWEALTH AVENUE HALEY HOUSE CHESTNUT HILL, MA 02467 | N/A | PC | EVALUATING SELF-DIRECTED CARE FOR PEOPLE WITH SERIOUS MENTAL ILLNESS IN NEW YORK STATE | 62,208 |
| BRAIN INJURY ASSOCIATION OF NEW | N/A | PC | IMPROVING CONCUSSION | 118,980 |

| 140 COMMONWEALTH AVENUE HALEY HOUSE CHESTNUT HILL, MA 02467 | | | CARE FOR PEOPLE WITH SERIOUS MENTAL ILLNESS IN NEW YORK STATE | |
|--|-----|----|---|--------|
| BRAIN INJURY ASSOCIATION OF NEW YORK STATE 4 PINE WEST PLAZA SUITE 402 | N/A | PC | IMPROVING CONCUSSION MANAGEMENT FOR NYS STUDENTS | 118,98 |

| | CHESTNUT HILL, MA 02467 | | | NEW YORK STATE | |
|---|--|-----|----|--|-------|
| 1 | BRAIN INJURY ASSOCIATION OF NEW YORK STATE 4 PINE WEST PLAZA SUITE 402 ALBANY, NY 12205 | N/A | PC | IMPROVING CONCUSSION MANAGEMENT FOR NYS STUDENTS | 118,9 |

9,036,431

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BRANDWORKERS INTERNATIONAL N/A PC **BUILDING HEALTHY** 1,257 PO BOX 1257 COMMUNITIES CONFERENCE LONG ISLAND CITY, NY 11101 **SCHOLARSHIP**

| BRONXCARE HEALTH INTEGRATED SERVICES SYSTEM INC 1650 SELWYN AVENUE APT 11H BRONX, NY 10457 | N/A | PC | BRONXCARE HEALTH INTEGRATED SERVICE SYSTEM OPENNOTES | 86,445 |
|---|-----|----|--|--------|
| BROOME COUNTY OFFICE FOR AGING PO BOX 1766 BINGHAMTON, NY 13902 | N/A | PC | CONSUMER EMPOWERMENT - CONFERENCE SCHOLARSHIP | 1,475 |

Total . .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | | |
|---|-----|----|-----------------------------------|--------|
| BROTHERHOODSISTER SOL INC 140 HAMILTON PLACE NEW YORK, NY 10031 | N/A | PC | THE GAIA FOOD EMPOWERMENT PROJECT | 15,000 |

| 6105 500 THE HOUSE 500 | | | C. D | 100.000 |
|--|-----|----|--|---------|
| BUILDING SERVICE 32BJ HEALTH FUND 25 WEST 18TH ST NEW YORK, NY 10011 | N/A | PC | EMPOWERING CONSUMERS WITH A HIGH VALUE MATERNITY NETWORK | 160,582 |
| NEW TORK, NT 10031 | | | | |

Total .

| 25 WEST 18TH ST NEW YORK, NY 10011 | | | WITH A HIGH VALUE MATERNITY NETWORK | |
|--|-----|----|--|---------|
| CARE FOR THE HOMELESS 30 EAST 33RD STREET 5TH FLOOR NEW YORK, NY 100165337 | N/A | PC | CARE FOR THE HOMELESS PILOT PROJECT IMPLEMENTING OPENNOTES | 100,000 |

| NEW YORK, NY 10011 | | | NETWORK | |
|--|-----|----|--|--------|
| CARE FOR THE HOMELESS 30 EAST 33RD STREET 5TH FLOOR NEW YORK, NY 100165337 | N/A | PC | CARE FOR THE HOMELESS PILOT PROJECT IMPLEMENTING OPENNOTES | 100,00 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CENTER FOR A NEW AMERICAN N/A PC NEW YORK STATE HEALTH 120.525 SECURITY INC FOUNDATION FOR A MINORITY 1152 15TH STREET NW VETERANS NEEDS ASSESSMENT

| WASHINGTON, DC 20005 | | | | |
|---|-----|----|--|-------|
| CENTER FOR ELDER LAW & JUSTICE 438 MAIN ST STE 1200 BUFFALO, NY 14202 | N/A | PC | CONSUMER EMPOWERMENT - CONFERENCE SCHOLARSHIP | 2,330 |
| CENTER FOR EXCELLENCE IN HEALTH CARE JOURNALISM 10 NEFF HALL COLUMBIA MO. 65211 | N/A | PC | 2019 NEW YORK STATE HEALTH JOURNALISM FELLOWSHIPS | 4,320 |

Total .

▶ 3a

N/A

CENTER FOR QUALITY SYSTEMS

Total .

| IMPROVEMENT 1688 ORVIETTO DRIVE ROSEVILLE, CA 95661 | | | NETWORK ACCESSIBILITY AND PERFORMANCE | |
|---|-----|----|--|--------|
| CLAYBRIDGE HEALTH EDUCATION FUND 7304 PLUM STREET | N/A | PC | THE SKIN YOU'RE IN USING FILM TO EMPOWER THE | 15,012 |

PC

ENGAGING CONSUMERS ABOUT

87,329

| CLAYBRIDGE HEALTH EDUCATION FUND 7304 PLUM STREET NEW ORLEANS, LA 70118 | N/A | PC | THE SKIN YOU'RE IN USING FILM TO EMPOWER THE RESIDENTS OF BROWNSVILLE | 15,012 |
|---|-----|----|---|--------|
| CLAYBRIDGE HEALTH EDUCATION FUND 7304 PLUM STREET NEW ORLEANS, LA 70118 | N/A | PC | BUILDING HEALTHY COMMUNITIES CONFERENCE SCHOLARSHIP | 1,905 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

| a Paid during the year | | | | |
|--------------------------------|-----|----|------------------------|--------|
| CLEAN AND HEALTHY NEW YORK INC | N/A | PC | PROTECTING NEW YORKERS | 25,000 |

| ALBANY, NY 12207 | | | TOXIC CHEMICALS | |
|---|-----|-----|--------------------------|--------|
| CLEARHEALTHCOSTS INCPO BOX 8124 PELHAM, NY 10803 | N/A | NC | PRICECHECK NEW YORK CITY | 61,727 |
| CLINTON COUNTY HEALTH | N/A | GOV | HEALTHY NEIGHBORHOODS | 75.000 |

| PELHAM, NY 10803 | N/A | I NC | PRICECHECK NEW YORK CITY | 61,727 |
|---|-----|------|-------------------------------------|--------|
| CLINTON COUNTY HEALTH DEPARTMENT 133 MARGARET STREET PLATTSBURGH, NY 12901 | N/A | GOV | HEALTHY NEIGHBORHOODS INITIATIVE | 75,000 |

| Total | | | ▶ 3a | 9,036,431 |
|---|------|-----|-------------------------------------|-----------|
| CLINTON COUNTY HEALTH DEPARTMENT 133 MARGARET STREET PLATTSBURGH, NY 12901 | N/A | GOV | HEALTHY NEIGHBORHOODS INITIATIVE | 75,000 |
| PELHAM, NY 10803 | 17/2 | IVC | PRICECIECK NEW TORK CITY | 01,727 |

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Purpose of grant or contribution

a Paid during the year

| CLINTON COUNTY HEALTH DEPARTMENT 133 MARGARET STREET PLATTSBURGH, NY 12901 | N/A | GOV | IMPROVING THE NUTRITIONAL QUALITY OF FOOD PANTRY DONATIONS IN CLINTON COUNTY | 35,000 |
|---|-----|-----|--|---------|
| CLINTON COUNTY HEALTH DEPARTMENT 133 MARGARET STREET | N/A | GOV | IMPROVING RURAL TRANSPORTATION TO IMPROVE RURAL HEALTH | 148,000 |

| CLINTON COUNTY HEALTH DEPARTMENT 133 MARGARET STREET PLATTSBURGH, NY 12901 | N/A | GOV | IMPROVING RURAL TRANSPORTATION TO IMPROVE RURAL HEALTH | 148,000 |
|---|-----------|-----|--|---------|
| CLINTON COUNTY HEALTH DEPARTMENT 133 MARGARET STREET PLATTSBURGH, NY 12901 | N/A | GOV | OVERCOMING OBSTACLES TO FOOD ACCESS IN CLINTON COUNTY | 50,000 |
| Total | 9,036,431 | | | |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year COLLECTIVE FOR COMMUNITY CULTURE | N/A NC HEALTH-FORWARD URBAN 20,000 AND ENVIRONMENT DESIGN IN THE LOWER EAST

| 200 WILLOUGHBY AVENUE BROOKLYN, NY 11205 | | | SIDE NEIGHBORHOOD, NYC | |
|--|-----|----|-------------------------------------|--------|
| COMMON GROUND COMMUNITIES INC 505 8TH AVE 5TH FLOOR NEW YORK, NY 10018 | N/A | PC | BROWNSVILLE COMMUNITY ENGAGEMENT | 10,000 |

| COMMON GROUND COMMUNITIES INC 505 8TH AVE 5TH FLOOR NEW YORK, NY 10018 | N/A | PC | BROWNSVILLE COMMUNITY ENGAGEMENT | 10,000 |
|--|-----|----|---|--------|
| COMMON THREADS 3811 BEE CAVES ROADSUITE 108 AUSTIN, TX 78746 | N/A | PC | BUILDING HEALTHY COMMUNITIES CONFERENCE SCHOLARSHIP | 1,484 |

| NEW YORK, NY 10018 | | | | |
|--|-----|----|---|-----------|
| COMMON THREADS 3811 BEE CAVES ROADSUITE 108 AUSTIN, TX 78746 | N/A | PC | BUILDING HEALTHY COMMUNITIES CONFERENCE SCHOLARSHIP | 1,484 |
| Total | | | ▶ 3a | 9,036,431 |

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year COMMUNICATIONS NETWORK N/A PC PHILANTHROPIC SUPPORT 5,000 1717 NORTH NAPER BOULEVARD SUITE I GRANT JULY 1, 2019 - JUNE 30.

| 102 NAPERVILLE, IL 60563 | | | 2020 | |
|--|-----|----|---|--------|
| COMMUNITY CATALYST INC ONE FEDERAL STREET BOSTON, MA 02110 | N/A | PC | EMPOWERING NY CONSUMERS IN AN ERA OF HOSPITAL CONSOLIDATION | 20,000 |

| COMMUNITY CATALYST INC ONE FEDERAL STREET BOSTON, MA 02110 | N/A | PC | EMPOWERING NY CONSUMERS IN AN ERA OF HOSPITAL CONSOLIDATION | 20,000 |
|---|-----|----|---|--------|
| COMMUNITY FOOD ADVOCATES INC 110 WALL STREET NEW YORK, NY 10005 | N/A | PC | BUILDING HEALTHY COMMUNITIES CONFERENCE SCHOLARSHIP | 4,000 |

| BOSTON, MA 02110 | | | CONSOLIDATION | |
|---|-----|----|---|-----------|
| COMMUNITY FOOD ADVOCATES INC 110 WALL STREET NEW YORK, NY 10005 | N/A | PC | BUILDING HEALTHY COMMUNITIES CONFERENCE SCHOLARSHIP | 4,000 |
| Total | | | ▶ 3a | 9,036,431 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year COMMUNITY FOOD ADVOCATES INC. N/A PC ADVOCACY FOR HEALTHY. 60.000

| 110 WALL STREET NEW YORK, NY 10005 | .47. | | HUNGER-FREE KIDS | 55,555 |
|---|------|----|--------------------------------------|--------|
| COMMUNITY HEALTH CENTER OF RICHMOND INC 439 PORT RICHMOND AVENUE STATEN ISLAND, NY 10302 | N/A | PC | CHCR OPENNOTES SYSTEM IMPLEMENTATION | 96,000 |
| COMMUNITY HEALTHCARE NETWORK | N/A | PC | ENHANCING THE USE, ROLE | 35,433 |

| COMMUNITY HEALTH CENTER OF RICHMOND INC 439 PORT RICHMOND AVENUE STATEN ISLAND, NY 10302 | N/A | PC | CHCR OPENNOTES SYSTEM IMPLEMENTATION | 96,00 |
|---|-----|----|--|-------|
| COMMUNITY HEALTHCARE NETWORK INC 60 MADISON AVENUE | N/A | PC | ENHANCING THE USE, ROLE AND RETENTION OF NURSE PRACTITIONERS IN NEW YORK | 35,4 |

| 439 PORT RICHMOND AVENUE STATEN ISLAND, NY 10302 | | | IMPLEMENTATION | |
|--|-----|----|--|------|
| COMMUNITY HEALTHCARE NETWORK INC 60 MADISON AVENUE | N/A | PC | ENHANCING THE USE, ROLE AND RETENTION OF NURSE PRACTITIONERS IN NEW YORK | 35,4 |

| Total | | | ▶ 3a | 9,036,431 |
|--|-----|----|---|-----------|
| COMMUNITY HEALTHCARE NETWORK INC 60 MADISON AVENUE NEW YORK, NY 10010 | N/A | PC | ENHANCING THE USE, ROLE AND RETENTION OF NURSE PRACTITIONERS IN NEW YORK STATE | 35,433 |
| STATEN ISLAND, NY 10302 | | | | |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year COMMUNITY SERVICE SOCIETY OF NEW N/A PC WE THE PATIENTS NEW YORK 75,000 YORK (NY) 633 THIDD AVENUE 10TH ELOOP

| NEW YORK, NY 10017 | | | | |
|---|-----|----|--|---------|
| CONCRETE SAFARIS INC 158 EAST 115TH STREET SUITE 144 NEW YORK, NY 10029 | N/A | PC | CITY SURFERS BUILDING A HEALTHIER COMMUNITY FOR YOUTH IN EAST HARLEM | 100,000 |
| CORO NEW YORK LEADERSHIP CENTER 42 BROADWAY SUITE 2001 | N/A | PC | NYSHEALTH HEALTHY NEIGHBORHOODS GRANTEE | 7,980 |

9,036,431

| 158 EAST 115TH STREET SUITE 144 NEW YORK, NY 10029 | | | HEALTHIER COMMUNITY FOR YOUTH IN EAST HARLEM | , |
|---|-----|----|--|------|
| CORO NEW YORK LEADERSHIP CENTER 42 BROADWAY SUITE 2001 NEW YORK, NY 10004 | N/A | PC | NYSHEALTH HEALTHY NEIGHBORHOODS GRANTEE TRAINING CONSULTANCY | 7,98 |

Total .

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year COUNCIL ON THE ENVIRONMENT INC N/A PC PROVIDING HEALTHY & 160,000

| 100 GOLD ST SUITE 3300 NEW YORK, NY 10038 | | | INCOME NEW YORKERS | |
|---|-----|----|-------------------------------|--------|
| CREATE A HEALTHIER NIAGARA FALLS COLLABORATIVE INC 6225 SHERIDAN DRIVE SUITE 206 WILLIAMSVILLE, NY 14221 | N/A | PC | HEALTHY NEIGHBORHOODS FUND | 75,000 |
| 1 | | | | |

| CREATE A HEALTHIER NIAGARA FALLS COLLABORATIVE INC 6225 SHERIDAN DRIVE SUITE 206 WILLIAMSVILLE, NY 14221 | N/A | PC | HEALTHY NEIGHBORHOODS FUND | 75,00 |
|---|-----|----|---|-------|
| CREATE A HEALTHIER NIAGARA FALLS COLLABORATIVE INC 6225 SHERIDAN DRIVE SUITE 206 | N/A | PC | BUILDING HEALTHY COMMUNITIES CONFERENCE SCHOLARSHIP | 3,65 |

| 6225 SHERIDAN DRIVE SUITE 206 WILLIAMSVILLE, NY 14221 | | | Total | |
|---|-----|----|---|-------|
| CREATE A HEALTHIER NIAGARA FALLS COLLABORATIVE INC 6225 SHERIDAN DRIVE SUITE 206 WILLIAMSVILLE, NY 14221 | N/A | PC | BUILDING HEALTHY COMMUNITIES CONFERENCE SCHOLARSHIP | 3,650 |

Total .

▶ 3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year CVPH MEDICAL CENTER FOUNDATION N/A PC **EXPANDING THE SARANAC** 160,000

| INC 75 BEEKMAN STREET PLATTSBURGH, NY 12901 | | | RIVER TRAIL GREENWAY TO PROMOTE PHYSICAL ACTIVITY | · |
|--|-----|----|--|-------|
| DAVID LYNCH FOUNDATION FOR CONSCIOUSNESS BASED EDUCATION AND WORLD PEACE 228 E 45TH STREET 15TH FLOOR | N/A | PC | VETERANS' HEALTH - CONFERENCE SCHOLARSHIP | 2,537 |

| CONSCIOUSNESS BASED EDUCATION AND WORLD PEACE 228 E 45TH STREET 15TH FLOOR NEW YORK, NY 10017 | | | CONFERENCE SCHOLARSHIP | 2,557 |
|---|-----|----|--|-------|
| EMPIRE JUSTICE CENTER INC ONE WEST MAIN STREET SUITE 200 ROCHESTER NY 14614 | N/A | PC | CONSUMER EMPOWERMENT - CONFERENCE SCHOLARSHIP | 3,000 |

| NEW YORK, NY 10017 | | | |
|--|-----|--|-------|
| EMPIRE JUSTICE CENTER INC ONE WEST MAIN STREET SUITE 200 ROCHESTER, NY 14614 | N/A | CONSUMER EMPOWERMENT - CONFERENCE SCHOLARSHIP | 3,000 |
| | | | |

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor

| a Paid during the year | | | | |
|--|-----|-----|--|--------|
| ESSEX COUNTY PUBLIC HEALTH 132 WATER STREET PO BOX 217 ELIZABETHTOWN, NY 12932 | N/A | GOV | A COORDINATED RESPONSE TO THE OPIOID EPIDEMIC IN NORTH COUNTRY | 24,000 |
| | | | | |

| ELIZABETHTOWN, NY 12932 | | | NORTH COUNTRY | İ |
|--|--------|----|---|--------|
| FIELD & FORK NETWORK INC 487 MAIN STREET SUITE 200 BUFFALO, NY 14203 | N/A | PC | IMPLEMENTING THE NIAGARA FALLS LOCAL FOOD ACTION PLAN | 135,24 |
| FIELD & FORK NETWORK INC | NI / A | DC | LEVERACING FEDERAL FUNDS | 125.00 |

| 487 MAIN STREET SUITE 200 BUFFALO, NY 14203 | N/A | PC | FALLS LOCAL FOOD ACTION PLAN | 135,240 |
|--|-----|----|---|---------|
| FIELD & FORK NETWORK INC 487 MAIN STREET SUITE 200 BUFFALO, NY 14203 | N/A | PC | LEVERAGING FEDERAL FUNDS TO INCREASE ACCESS TO FRESH, AFFORDABLE FOODS ACROSS NEW YORK STATE | 125,000 |

| BUFFALO, NY 14203 | | | PLAN | |
|--|-----|----|---|-----------|
| FIELD & FORK NETWORK INC 487 MAIN STREET SUITE 200 BUFFALO, NY 14203 | N/A | PC | LEVERAGING FEDERAL FUNDS TO INCREASE ACCESS TO FRESH, AFFORDABLE FOODS ACROSS NEW YORK STATE | 125,000 |
| Total | | | ▶ 3a | 9.036.431 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FOOD BANK OF THE SOUTHERN TIER N/A PC **BUILDING HEALTHY** 3,660 388 UPPER OAKWOOD AVE COMMUNITIES CONFERENCE

| ELMIRA, NY 14903 | | | SCHOLARSHIP | |
|--|-----|----|---|-------|
| FOOD BANK OF WESTERN NEW YORK INC 91 HOLT STREET BUFFALO NY 14206 | N/A | PC | BUILDING HEALTHY COMMUNITIES CONFERENCE SCHOLARSHIP | 3,410 |

| INC 91 HOLT STREET BUFFALO, NY 14206 | N/A | rc | COMMUNITIES CONFERENCE SCHOLARSHIP | 3,410 |
|--|-----|----|---|--------|
| FOODCORPS INC 1201 BROADWAY SUITE 411 NEW YORK, NY 10001 | N/A | PC | CONNECTING KIDS TO HEALTHY FOOD IN SCHOOLS | 25,000 |

| BUFFALO, NY 14206 | | | | |
|--|-----|----|---|-----------|
| FOODCORPS INC 1201 BROADWAY SUITE 411 NEW YORK, NY 10001 | N/A | PC | CONNECTING KIDS TO HEALTHY FOOD IN SCHOOLS | 25,000 |
| Total | | | ▶ 3a | 9,036,431 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FOUNDATION FINANCIAL OFFICERS N/A PC PHILANTHROPIC SUPPORT 2.050 GROUP INC. GRANT JULY 1, 2019 - JUNE 30,

| 19 MANTUA ROAD MT ROYAL, NJ 08061 | | | 2020 | |
|--|-----|----|---|---------|
| FUND FOR PUBLIC HOUSING INC 250 BROADWAY 11TH FLOOR NEW YORK, NY 10007 | N/A | PC | FOOD ACCESS AND AFFORDABILITY PILOT | 25,000 |
| FUND FOR THE CITY OF NEW YORK INC 121 AVENUE OF THE AMERICAS 6TH FLOOR NEW YORK, NY 10013 | N/A | PC | ACTIVATING PUBLIC SPACES IN BROWNSVILLE | 127,500 |

Total . .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FUND FOR THE CITY OF NEW YORK INC. N/A PC. HEALTHY NEIGHBORHOODS 93.750

| 121 AVENUE OF THE AMERICAS 6TH FLOOR NEW YORK, NY 10013 | | | FUND | 33,730 |
|--|-----|----|---|--------|
| FUND FOR THE CITY OF NEW YORK INC 121 AVENUE OF THE AMERICAS 6TH FLOOR NEW YORK, NY 10013 | N/A | PC | BUILDING HEALTHY COMMUNITIES CONFERENCE SCHOLARSHIP | 1,875 |
| | | 1 | | |

| FLOOR NEW YORK, NY 10013 | | | SCHOLARSHIP | |
|--|-----|----|---|--------|
| FUND FOR THE CITY OF NEW YORK INC 121 AVENUE OF THE AMERICAS 6TH FLOOR NEW YORK, NY 10013 | N/A | PC | COLLABORATIVE CONNECTIONS TO CARE FUND FOR MENTAL HEALTH, PHASE 2 | 40,000 |

9,036,431

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| GHVHS MEDICAL GROUP PC 707 E MAIN ST MIDDLETOWN, NY 10940 | N/A | PC | PROJECT GARNET OPENNOTES | 100,000 |
|---|-----|-----|---------------------------------------|---------|
| GLOBAL STRATEGY GROUP LLC 215 PARK AVENUE SOUTH 15TH FLOOR NEW YORK, NY 10003 | N/A | NC | ACCESS TO VETERAN TREATMENT COURTS | 120,000 |
| CRANTMAKERS IN HEALTH | N/A | DC. | DUTLANTUDODIC CURDORT | 12.000 |

| GLOBAL STRATEGY GROUP LLC 215 PARK AVENUE SOUTH 15TH FLOOR NEW YORK, NY 10003 | N/A | NC | ACCESS TO VETERAN TREATMENT COURTS | 120,000 |
|---|-----|----|--|---------|
| GRANTMAKERS IN HEALTH 1100 CONNECTICUT AVENUE NW SUITE 1200 WASHINGTON, DC 20036 | N/A | PC | PHILANTHROPIC SUPPORT GRANT JULY 1, 2019 - JUNE 30, 2020 | 13,800 |

9,036,431

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HCA EDUCATION AND RESEARCH N/A PC EXPANSION OF A COMMUNITY-29,950

| 194 WASHINGTON AVE STE 400 ALBANY, NY 12210 | | | BASED SEPSIS PREVENTION AND EARLY RECOGNITION SCREENING TOOL | |
|--|-----|----|--|-------|
| HEADSTRONG PROJECT INC 641 LEXINGTON AVE FLOOR 25 | N/A | PC | VETERANS' HEALTH - CONFERENCE SCHOLARSHIP | 1,000 |

| HEADSTRONG PROJECT INC 641 LEXINGTON AVE FLOOR 25 NEW YORK, NY 10022 | N/A | PC | VETERANS' HEALTH - CONFERENCE SCHOLARSHIP | 1,000 |
|--|-----|----|--|--------|
| HEALTH CAREER CONNECTION INC 300 FRANK H OGAWA PLAZA SUITE 243 | N/A | PC | HEALTH CAREER CONNECTION INTERNSHIP PROGRAM, CLASS | 43,257 |

9,036,431

| 641 LEXINGTON AVE FLOOR 25 NEW YORK, NY 10022 | | CONFERENCE SCHOLARSHIP | |
|--|-----|--|-------|
| HEALTH CAREER CONNECTION INC 300 FRANK H OGAWA PLAZA SUITE 243 OAKLAND, CA 94612 | N/A | HEALTH CAREER CONNECTION INTERNSHIP PROGRAM, CLASS OF 2019 | 43,25 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| HEALTH RESEARCH INC 150 BROADWAY SUITE 560 MENANDS, NY 122042719 | N/A | PC | NEXUS BRINGING CUTTING EDGE TRANSPARENCY TO ALL NEW YORKERS | 305,000 |
|--|-----|----|--|---------|
| HEALTH RESEARCH INC 150 BROADWAY SUITE 560 MENANDS, NY 122042719 | N/A | PC | REDUCING HIV/STDS IN WESTERN NEW YORK BY ENHANCING AND EXPANDING THE EMBEDDED PARTNER SERVICES PROGRAM | 47,167 |
| | | | | |

| 150 BROADWAY SUITE 560 MENANDS, NY 122042719 | | | WESTERN NEW YORK BY ENHANCING AND EXPANDING THE EMBEDDED PARTNER SERVICES PROGRAM | , |
|---|-----|----|---|-----------|
| HONESTHEALTH INC 1900 ADDISON STREET SUITE 100 BERKELEY, CA 94704 | N/A | NC | ARE WE THERE YET? AN ANALYSIS OF HEALTH CARE COST AND QUALITY CONSUMER TOOLS AND RECOMMENDATIONS FOR NEW YORK STATE | 17,250 |
| Total | | | ▶ 3a | 9,036,431 |

| Form 990PF Part XV Line 3 - Gran | ts and Contributions Paid | During the | Year or Approved for Future | Payment |
|---|---|-------------------------|---|---------|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| HUDSON CENTER FOR HEALTH EQUITY AND QUALITY 303 S BROADWAY SUITE 420 TARRYTOWN, NY 10591 | N/A | PC | IMPROVING NEW YORK STATE'S FAMILY FOSTER CARE PROCESS TO ENHANCE CHILDREN'S HEALTH | 169,325 |
| HUDSON RIVER HEALTHCARE INC 1037 MAIN STREET PEEKSKILL, NY 105662913 | N/A | PC | ADDRESSING OPIOIDS WITH INNOVATIVE ACCESS TO MEDICATION ASSISTED TREATMENT | 200,000 |
| | 1 | | | |

| TARRYTOWN, NY 10591 | | | HEALTH | |
|--|-----|----|---|---------|
| HUDSON RIVER HEALTHCARE INC 1037 MAIN STREET PEEKSKILL, NY 105662913 | N/A | PC | ADDRESSING OPIOIDS WITH INNOVATIVE ACCESS TO MEDICATION ASSISTED TREATMENT | 200,000 |
| HUDSON VALLEY COMMUNITY SERVICES INC 40 SAW MILL RIVER ROAD HAWTHORNE, NY 10532 | N/A | PC | CONSUMER EMPOWERMENT - CONFERENCE SCHOLARSHIP | 902 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year IM RESEARCH AND SERVICE N/A NC HELPING PHYSICIANS TO 30,700 CORPORATION EMPOWER CONSUMERS 744 BROADWAY

| ALBANY, NY 12207 | | | | |
|---|-----|----|--|---------|
| IMPAQ INTERNATIONAL LLC 1325 G STREET NW SUITE 900 WASHINGTON, DC 20005 | N/A | NC | HEALTH INSURANCE MARKETPLACE TRANSPARENCY TOOL OUT-OF-POCKET COSTS FOR SPECIALTY CONDITIONS | 55,776 |
| IN OUR BACKYARDS INC | N/A | PC | BRINGING NEIGHBORHOOD | 128,000 |

PROJECTS TO LIFE PHASE 3

▶ 3a

9,036,431

540 PRESIDENT STREET 3RD FLOOR

BROOKLYN, NY 11215

Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| IN OUR BACKYARDS INC 540 PRESIDENT STREET 3RD FLOOR BROOKLYN, NY 11215 | N/A | PC | RESIDENT-LED CHANGE FOR HEALTHY NEIGHBORHOODS | 24,000 |
|--|-----|----|--|---------|
| INSTITUTE FOR FAMILY HEALTH | N/A | PC | THE INSTITUTE FOR FAMILY | 100.000 |

| INSTITUTE FOR FAMILY HEALTH 2006 MADISON AVENUE NEW YORK, NY 10035 | N/A | PC | THE INSTITUTE FOR FAMILY HEALTH OPENNOTES IMPLEMENTATION | 100,000 |
|--|-----|----|--|---------|
| INSTITUTE FOR FAMILY-CENTERED CARE INC 6917 ARLINGTON ROAD SUITE 309 | N/A | PC | ELEVATING THE ROLE OF PATIENTS AND FAMILIES IN EDUCATION A NEW | 114,182 |

| Total | | | ▶ 3a | 9,036,431 |
|--|-----|----|---|-----------|
| INSTITUTE FOR FAMILY-CENTERED CARE INC 6917 ARLINGTON ROAD SUITE 309 BETHESDA, MD 20814 | N/A | PC | ELEVATING THE ROLE OF PATIENTS AND FAMILIES IN EDUCATION A NEW GENERATION OF PROVIDERS | 114,182 |
| 2006 MADISON AVENUE NEW YORK, NY 10035 | | | HEALTH OPENNOTES IMPLEMENTATION | |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year JEFFERSON COUNTY PUBLIC HEALTH N/A GOV BUILDING HEALTHY 2,000

| SERVICE 531 MEADE STREET WATERTOWN, NY 13601 | , | | COMMUNITIES CONFERENCE SCHOLARSHIP | , |
|--|-----|----|---|---------|
| KATAL CENTER FOR HEALTH EQUITY AND JUSTICE INC 147 PRINCE ST BROOKLYN, NY 11201 | N/A | PC | REPLICATING THE LAW ENFORCEMENT ASSISTED DIVERSION (LEAD) MODEL IN STATEN ISLAND | 44,997 |
| LENOX HILL NEIGHBORHOOD HOUSE | N/Δ | PC | IMPROVING THE QUALITY OF | 180 000 |

| AND JUSTICE INC 147 PRINCE ST BROOKLYN, NY 11201 | | | ENFORCEMENT ASSISTED DIVERSION (LEAD) MODEL IN STATEN ISLAND | |
|--|-----|----|---|-----------|
| LENOX HILL NEIGHBORHOOD HOUSE INC 331 EAST 70TH STREET NEW YORK, NY 10021 | N/A | PC | IMPROVING THE QUALITY OF INSTITUTIONAL FOOD IN NEW YORK STATE SCALING UP THE TEACHING KITCHEN | 180,000 |
| Total | | | ▶ 3a | 9,036,431 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year LENOX HILL NEIGHBORHOOD HOUSE N/A PC **BUILDING HEALTHY** 3.390 INC COMMUNITIES CONFERENCE **SCHOLARSHIP** 331 EAST 70TH STREET

| NEW YORK, NY 10021 | | | | |
|--|-----|----|--|--------|
| LENOX HILL NEIGHBORHOOD HOUSE INC 331 EAST 70TH STREET NEW YORK, NY 10021 | N/A | PC | EXPANSION OF THE TEACHING KITCHEN PROVIDING HEALTHY FOOD TO LOW INCOME NEW YORKERS | 44,600 |
| LOCAL INITIATIVES SUPPORT CORPORATION 501 7TH AVENUE NEW YORK, NY 10018 | N/A | PC | HOUSING AS HEALTH CARE A COLLABORATION BETWEEN DSRIP PERFORMING PROVIDER SYSTEMS AND COMMUNITY- | 25,000 |

Total .

BASED ORGANIZATIONS

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year LONG TERM CARE COMMUNITY N/A PC CONSUMER EMPOWERMENT -3.798

| ONE PENN PLAZA SUITE 6252 NEW YORK, NY 10119 | | | CONFERENCE SCHOLARSHIP | |
|--|-----|----|--|--------|
| MANHATTAN INSTITUTE FOR POLICY RESEARCH INC 52 VANDERBILT AVENUE NEW YORK NY 100173808 | N/A | PC | ENHANCED DRUG PRICING TRANSPARENCY TO REDUCE COSTS FOR CONSUMERS AND THE STATE | 17,924 |

| MANHATTAN INSTITUTE FOR POLICY RESEARCH INC 52 VANDERBILT AVENUE NEW YORK, NY 100173808 | N/A | PC | ENHANCED DRUG PRICING TRANSPARENCY TO REDUCE COSTS FOR CONSUMERS AND THE STATE | 17,924 |
|--|-----|----|--|--------|
| MARYVALE MIDDLE SCHOOL 1050 MARYVALE DR | N/A | PC | BUILDING HEALTHY COMMUNITIES CONFERENCE | 3,820 |

| 52 VANDERBILT AVENUE NEW YORK, NY 100173808 | | | COSTS FOR CONSUMERS AND THE STATE | |
|--|-----|----|---|-----|
| MARYVALE MIDDLE SCHOOL 1050 MARYVALE DR | N/A | PC | BUILDING HEALTHY COMMUNITIES CONFERENCE | 3,8 |

Total .

| NEW YORK, NY 100173808 | | | THE STATE | |
|---|-----|----|---|-----|
| MARYVALE MIDDLE SCHOOL 1050 MARYVALE DR CHEEKTAWAGA, NY 14225 | N/A | PC | BUILDING HEALTHY COMMUNITIES CONFERENCE SCHOLARSHIP | 3,8 |

▶ 3a

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year MAYOR'S FUND TO ADVANCE NEW N/A PC **BUILDING HEALTHY** 2.000 YORK CITY COMMUNITIES CONFERENCE 253 BROADWAY 6TH FLOOR SCHOLARSHIP NEW YORK NY 10007

| NEW YORK, NY 10007 | | | | |
|--|-----|----|--|---------|
| MEDICARE RIGHTS CENTER INC 266 WEST 37TH STREET 3RD FLOOR NEW YORK, NY 10018 | N/A | PC | EMPOWERING NEW YORK MEDICARE BENEFICIARIES IN COMPLEX SITUATIONS | 148,997 |
| MEDICARE RIGHTS CENTER INC 266 WEST 37TH STREET 3RD FLOOR NEW YORK, NY 10018 | N/A | PC | AFTER FULLY INTEGRATED DUALS ADVANTAGE (FIDA) WHATS NEXT FOR NEW YORKS DUALLY ELIGIBLE POPULATION? | 25,290 |

▶ 3a

9,036,431

| NEW YORK, NY 10018 | | | MEDICARE BENEFICIARIES IN COMPLEX SITUATIONS | |
|--|-----|----|--|-------|
| MEDICARE RIGHTS CENTER INC 266 WEST 37TH STREET 3RD FLOOR NEW YORK, NY 10018 | N/A | PC | AFTER FULLY INTEGRATED DUALS ADVANTAGE (FIDA) WHATS NEXT FOR NEW YORKS DUALLY ELIGIBLE POPULATION? | 25,29 |

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

a Paid during the year

If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Foundation status of recipient

a Paid during the year

| METROPLUS HEALTH PLAN 160 WATER ST NEW YORK, NY 10038 | N/A | GOV | BUILDING HEALTHY COMMUNITIES CONFERENCE SCHOLARSHIP | 1,199 |
|---|-----|-----|---|--------|
| MISSIO CHURCH620 W GENESEE ST SYRACUSE, NY 13204 | N/A | PC | SUPPORTING YEAR-ROUND PHYSICAL ACTIVITY | 37,862 |

| 31KACU3E, NT 13204 | | | PROGRAMMING EXPANSION FOR YOUTH IN THE NEAR WESTSIDE | |
|---|-----|----|---|--------|
| MONTEFIORE MEDICAL CENTER 111 EAST 210TH STREET BRONX, NY 10467 | N/A | PC | USING A CONTINUUM BASED FRAMEWORK TO IMPLEMENT BEHAVIORAL HEALTH INTEGRATION IN PRIMARY CARE SETTINGS IN NEW YORK STATE | 43,134 |

9,036,431

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or cubetantial contributor

| | or substantial contributor | | | |
|------------------------------|----------------------------|----|---------------------------|--------|
| a Paid during the year | | | | |
| NATIONAL ACADEMY OF SCIENCES | N/A | PC | IMPLEMENTING HIGH-QUALITY | 80,000 |

| /ASHINGTON, DC 20001 | | | STUDY | |
|---|-----|----|--|--|
| ATIONAL ACADEMY OF SCIENCES 00 FIFTH STREET NW | N/A | PC | ROUNDTABLE ON POPULATION HEALTH IMPROVEMENT, PHASE | |

| 1 | | | 0.00. | |
|---|-----|----|--|---------|
| NATIONAL ACADEMY OF SCIENCES 500 FIFTH STREET NW WASHINGTON, DC 20001 | N/A | PC | ROUNDTABLE ON POPULATION HEALTH IMPROVEMENT, PHASE 2 | 45,000 |
| NATIONAL ACADEMY OF SCIENCES | N/A | PC | SUPPORTING THE ROUNDTABLE | 100,000 |

| NATIONAL ACADEMY OF SCIENCES 500 FIFTH STREET NW WASHINGTON, DC 20001 PC SUPPORTING THE ROUNDTABLE 100,000 IMPROVEMENT | WASHINGTON, DC 20001 | | | 2 | |
|--|----------------------|-----|----|----------------------|---------|
| | 500 FIFTH STREET NW | N/A | PC | ON POPULATION HEALTH | 100,000 |

| NATIONAL ACADEMY OF SCIENCES 500 FIFTH STREET NW WASHINGTON, DC 20001 | N/A | PC | SUPPORTING THE ROUNDTABLE ON POPULATION HEALTH IMPROVEMENT | 100,000 |
|---|-----|----|--|-----------|
| Total | | | > 3a | 9,036,431 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NATIONAL ASSOCIATION OF DRUG N/A PC. DEVELOPMENT OF NY VETERANS 25,955 COURT PROFESSIONALS TREATMENT COURT EXPANSION 625 N WASHINGTON STREET STE 212 LEGISLATION ALEVANDRIA VA 22214

| ALEXANDRIA, VA 22314 | | | | |
|---|-----|----|--|--------|
| NATIONAL CENTER FOR LAW AND ECONOMIC JUSTICE 275 SEVENTH AVENUE SUITE 1506 NEW YORK, NY 10001 | N/A | PC | CONSUMER EMPOWERMENT - CONFERENCE SCHOLARSHIP | 3,081 |
| NATIONAL PARTNERSHIP FOR WOMEN & FAMILIES INC 1875 CONNECTICUT AVENUE NW SUITE 650 WASHINGTON. DC 20009 | N/A | PC | GETMYHEALTHDATA CREATING DATA EXEMPLARS IN NEW YORK | 82,407 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Foundation Purpose of grant or Amount Recipient If recipient is an individual, show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NATURALLY OCCURRING CULTURAL N/A PC BUILDING HEALTHY 870 DISTRICTS NY COMMUNITIES CONFERENCE 88 PROSPECT PARK WEST 3D SCHOLARSHIP BROOKLYN, NY 11215 PC NEW YORK AND PRESBYTERIAN N/A IMPLEMENTING OPENNOTES AT 39,981

| HOSPITAL NY-PRESBYTERIAN DEVELOPMENT OFFICE 850 3RD AVE 12TH FLOOR NEW YORK, NY 10022 | | | AN ACCOUNTABLE CARE ORGANIZATION | |
|---|-----|----|--|-------|
| NEW YORK ASSOCIATION OF PSYCHIATRIC REHABILITATION SERVICES INC 194 WASHINGTON AVE SUITE 400 ALBANY, NY 12210 | N/A | PC | CONSUMER EMPOWERMENT - CONFERENCE SCHOLARSHIP | 1,500 |

Total . .

If recipient is an individual, Recipient Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NEW YORK CITY HEALTH AND N/A GOV CONSUMER EMPOWERMENT -23,958 HOSPITALS CORPORATION CONFERENCE SCHOLARSHIP

| NEW YORK, NY 10013 | | | | |
|--|-----|----|---|---------|
| NEW YORK FOUNDATION 150 WEST 30TH STREET SUITE 1401 NEW YORK, NY 10001 | N/A | PF | NEIGHBORHOODS FIRST FUND | 144,060 |
| NEW YORK IMMIGRATION COALITION INC 131 WEST 33RD STREET SUITE 610 | N/A | PC | SUPPORTING IMMIGRANT HEALTHCARE ACCESS IN THE NEW POLITICAL LANDSCAPE | 24,346 |

▶ 3a

9,036,431

NEW YORK, NY 10001

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NEW YORK LAWYERS FOR THE PUBLIC N/A PC DETAINED AND DENIED 40,000 INTEREST INC IMPROVING HEALTHCARE 151 WEST 30TH STREET 11TH FLOOR ACCESS FOR IMMIGRANT NEW YORK, NY 100014017 DETAINEES

| NEW YORK RESTORATION PROJECT 254 W 31ST STREET 10TH FLOOR NEW YORK, NY 10001 | N/A | PC | INCREASING PHYSICAL ACTIVITY IN EAST HARLEM AND THE SOUTH BRONX THROUGH IMPROVED ACCESS TO HIGH QUALITY GREEN SPACE | 24,000 |
|--|-----|----|---|--------|
| NEW YORK STATE ACADEMY OF FAMILY PHYSICIANS 260 OSBORNE RD ALBANY, NY 12211 | N/A | NC | NYSAFP PATIENT EMPOWERMENT | 30,377 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NEW YORK UNIVERSITY SCHOOL OF N/A PC **EVALUATION TECHNICAL** 133,787 MEDICINE ASSISTANCE FOR NYSHEALTH ONE PARK AVENUE 6TH FLOOR FOUNDATION GRANTEES NEW YORK, NY 10016 PHASE 11

| NEW YORK UNIVERSITY SCHOOL OF MEDICINE ONE PARK AVENUE 6TH FLOOR NEW YORK, NY 10016 | N/A | PC | EVALUATION TECHNICAL ASSISTANCE FOR NYSHEALTH GRANTEES PHASE 9 | 32,251 |
|---|-----|----|--|---------|
| NEW YORK UNIVERSITY ROBERT F WAGNER GRADUATE SCHOOL OF PUBLIC SERVICE 550 FIRST AVENUE VZ30 627B NEW YORK, NY 10016 | N/A | PC | ESTABLISHING A MEDICAID EVALUATION CONSORTIUM | 170,703 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NEW YORK UNIVERSITY STUDENT N/A PC INCREASING IMMUNIZATION 77,478 HEALTH CENTER RATES ON NEW YORK STATE 665 BROADWAY SUITE 801 COLLEGE CAMPUSES USING THE

| NEW YORK, NY 10012 | | | BREAKTHROUGH SERIES MODEL | |
|---|-----|-----|--|--------|
| NIAGARA FALLS COMMUNITY DEVELOPMENT 1022 MAIN STREET NIAGARA FALLS, NY 14301 | N/A | GOV | NIAGARA FOR ALL IMPROVING THE PARK SYSTEM FOR LOCAL CHILDREN | 11,992 |
| NIAGARA FALLS MEMORIAL MEDICAL CENTER 621 TENTH STREET | N/A | PC | KNOW YOUR NOTES | 25,000 |

| DEVELOPMENT 1022 MAIN STREET NIAGARA FALLS, NY 14301 | | | THE PARK SYSTEM FOR LOCAL CHILDREN | |
|---|-----|----|------------------------------------|-----------|
| NIAGARA FALLS MEMORIAL MEDICAL CENTER 621 TENTH STREET NIAGARA FALLS, NY 14302 | N/A | PC | KNOW YOUR NOTES | 25,000 |
| Total | | | ▶ 3a | 9,036,431 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year NIAGARA FALLS NATIONAL HERITAGE N/A PC THE WALK TO FREEDOM A 119,906 AREA INC HERITAGE WALKING TRAIL FOR 116 TIMON HALL PO BOX 1932 NIAGARA FALLS

| NIAGARA UNIVERSITY, NY 14109 | | | | |
|--|-----|----|---|---------|
| NONPROFIT FINANCE FUND 5 HANOVER SQUARE FLOOR 9 NEW YORK, NY 10004 | N/A | PC | BUILDING EQUITABLE PARTNERSHIPS SUPPORTING CBO NETWORKS TO INTEGRATE WITH HEALTH CARE | 220,000 |
| NORTH STAR FUND INC | N/A | PC | PHILANTHROPIC SUPPORT | 5,000 |

▶ 3a

9,036,431

| 5 HANOVER SQUARE FLOOR 9 NEW YORK, NY 10004 | | | PARTNERSHIPS SUPPORTING CBO NETWORKS TO INTEGRATE WITH HEALTH CARE | |
|---|-----|----|--|------|
| NORTH STAR FUND INC 520 EIGHTH AVENUE SUITE 1800 NEW YORK, NY 10018 | N/A | PC | PHILANTHROPIC SUPPORT GRANT JULY 1, 2019 - JUNE 30, 2020 | 5,00 |

| | | WITH HEALTH CARE | |
|---|-----|--|-----|
| NORTH STAR FUND INC 520 EIGHTH AVENUE SUITE 1800 NEW YORK, NY 10018 | N/A | PHILANTHROPIC SUPPORT GRANT JULY 1, 2019 - JUNE 30, 2020 | 5,0 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| NORTHEAST BUSINESS GROUP ON HEALTH INC 80 PINE STREET - 29TH FLOOR NEW YORK, NY 10005 | N/A | PC | SAFE BIRTH NY EMPOWERING WOMEN TO USE HOSPITAL QUALITY DATA WHEN DECIDING WHERE TO GIVE BIRTH | 45,000 |
|--|-----|----|--|--------|
| PACE UNIVERSITY | N/A | PC | PACE-NRDC FOOD LAW | 20,000 |

| NEW YORK, NY 10005 | | | WHERE TO GIVE BIRTH | |
|--|-----|----|--|--------|
| PACE UNIVERSITY 80 NORTH BROADWAY WHITE PLAINS, NY 10603 | N/A | PC | PACE-NRDC FOOD LAW INITIATIVE | 20,000 |
| PARTICIPATORY BUDGETING PROJECT 540 PRESIDENT ST 3RD FLOOR | N/A | PC | BUILDING HEALTHY COMMUNITIES CONFERENCE | 1,000 |

| PACE UNIVERSITY 80 NORTH BROADWAY WHITE PLAINS, NY 10603 | N/A | PC | PACE-NRDC FOOD LAW INITIATIVE | 20,00 |
|--|-----|----|---|-------|
| PARTICIPATORY BUDGETING PROJECT 540 PRESIDENT ST 3RD FLOOR | N/A | PC | BUILDING HEALTHY COMMUNITIES CONFERENCE | 1,00 |

| WHITE PLAINS, NY 10603 | | | | |
|---|-----|----|---|-----------|
| PARTICIPATORY BUDGETING PROJECT 540 PRESIDENT ST 3RD FLOOR BROOKLYN, NY 11215 | N/A | PC | BUILDING HEALTHY COMMUNITIES CONFERENCE SCHOLARSHIP | 1,000 |
| Total | | | > 3a | 9,036,431 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year PARTNERSHIP FOR THE PUBLIC GOOD N/A PC ADDRESSING PUBLIC SAFETY 100,000 INC THROUGH PUBLIC HEALTH 617 MAIN STREET SUITE 300 BRINGING LAW ENFORCEMENT BUFFALO, NY 14203 ASSISTED DIVERSION (LEAD)

| <u>'</u> | | | TO BUFFALO ` ´ | |
|--|-----|----|--|--------|
| PEAK GRANTMAKING INC 1666 K STREET NW SUITE 440 WASHINGTON, DC 20006 | N/A | PC | PHILANTHROPIC SUPPORT GRANT JULY 1, 2019 - JUNE 30, 2020 | 3,000 |
| PHILANTHROPY NEW YORK INC 320 EAST 43RD STREET | N/A | PC | PHILANTHROPIC SUPPORT GRANT JULY 1, 2019 - JUNE 30, | 20,000 |

▶ 3a

9,036,431

| 1666 K STREET NW SUITE 440 WASHINGTON, DC 20006 | N/A | ۲ | GRANT JULY 1, 2019 - JUNE 30, 2020 | 3,01 |
|---|-----|----|--|-------|
| PHILANTHROPY NEW YORK INC 320 EAST 43RD STREET NEW YORK, NY 10017 | N/A | PC | PHILANTHROPIC SUPPORT GRANT JULY 1, 2019 - JUNE 30, 2020 | 20,00 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount contribution show any relationship to status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year PHYSICIANS FOR HUMAN RIGHTS N/A PC TRAINING CLINICIANS TO 103.952 256 W 38TH STREET 9TH FLOOR PROVIDE EVALUATIONS AND NEW YORK, NY 10018 ADVOCACY IN ASYLUM CASES 000 000

| PRIMARY CARE DEVELOPMENT CORPORATION 45 BROADWAY SUITE 530 NEW YORK, NY 10006 | N/A | PC | A BLUEPRINT FOR IMPLEMENTING CO-LOCATED AND INTEGRATED PRIMARY CARE AND BEHAVIORAL HEALTH CARE | 20,00 |
|--|-----|----|--|-------|
| PROJECT HOPE - THE PEOPLE-TO- PEOPLE HEALTH FOUNDATION INC 7500 OLD GEORGETOWN ROAD SUITE 600 | N/A | PC | HEALTH AFFAIRS THEME ISSUES ON PATIENT ENGAGEMENT AND VETERANS/MILITARY HEALTH | 30,00 |

BETHESDA, MD 20814

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| PSYCHARMOR INSTITUTE 11199 SORRENTO VALLEY ROAD 203 SAN DIEGO, CA 92121 | N/A | PC | VETERANS' HEALTH - CONFERENCE SCHOLARSHIP | 2,000 |
|---|-----|----|---|---------|
| PSYCHARMOR INSTITUTE 11199 SORRENTO VALLEY ROAD 203 SAN DIEGO, CA 92121 | N/A | PC | DEVELOPING AN ONLINE TRAINING CENTER FOR VETERANS TREATMENT COURT PEER MENTORS | 10,002 |
| PUBLIC GOOD PROJECTS 2404 BROADWAY 2ND FLOOR | N/A | PC | PROJECT VCTR (VACCINE COMMUNICATION TRACKING | 172,172 |

| SAN DIEGO, CA 92121 | | | VETERANS TREATMENT COURT PEER MENTORS | |
|--|-----|----|---|---------|
| PUBLIC GOOD PROJECTS 2404 BROADWAY 2ND FLOOR SAN DIEGO, CA 92102 | N/A | PC | PROJECT VCTR (VACCINE COMMUNICATION TRACKING AND RESPONSE) COUNTERING HEALTH DISINFORMATION IN NEW YORK STATE | 172,172 |
| Total | | | 9,036,431 | |

| Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment | | | | |
|--|---|-------------------------|---|--------|
| Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | | |
| a Paid during the year | | | | |
| RAND CORPORATION 1776 MAIN STREET SANTA MONICA, CA 90401 | N/A | PC | MODELING THE IMPACTS OF A SINGLE-PAYER SYSTEM IN NEW YORK STATE | 99,992 |
| RAND CORPORATION | N/A | PC | UNDERSTANDING PROVIDER | 74,000 |

| RAND CORPORATION 1776 MAIN STREET SANTA MONICA, CA 90401 | N/A | PC | UNDERSTANDING PROVIDER CAPACITY TO DELIVER HIGH QUALITY CARE TO VETERANS IN NEW YORK STATE | 74,000 |
|---|-----|----|--|--------|
| RANDALL'S ISLAND PARK ALLIANCE INC 24 WEST 61ST STREET 4TH FLOOR NEW YORK, NY 10023 | N/A | PC | IMPROVING HEALTH AND WELLNESS IN EAST HARLEM AND THE SOUTH BRONX THROUGH PROGRAMMING AT RANDALLS ISLAND PARK | 34,920 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year RESEARCH FOUNDATION FOR MENTAL N/A PC LEARNING FROM LOSS USING 170,753 HYGIENE INC SUICIDE FATALITY REVIEWS 150 BDOADWAY SHITE 201 EOD EFFECTIVE DREVENTION

| MENANDS, NY 12204 | | | ACTIVITIES | |
|--|-----|-----|---|---------|
| RESEARCH FOUNDATION FOR THE STATE UNIVERSITY OF NEW YORK 750 E ADAMS STREET WH 1111E SYRACUSE, NY 132102306 | N/A | PC | REDUCING AVOIDABLE MEDICATION RELATED HEALTH PROBLEMS AMONG OLDER ADULTS IN LONG TERM CARE | 175,000 |
| RESEARCH FOUNDATION OF CITY UNIVERSITY OF NEW YORK | N/A | GOV | SHARING IS CARING EXPANDING PATIENT AND | 19,934 |

| STATE UNIVERSITY OF NEW YORK 750 E ADAMS STREET WH 1111E SYRACUSE, NY 132102306 | 17/0 | | MEDICATION RELATED HEALTH PROBLEMS AMONG OLDER ADULTS IN LONG TERM CARE | 173,00 |
|--|------|-----|---|--------|
| RESEARCH FOUNDATION OF CITY UNIVERSITY OF NEW YORK 2180 THIRD AVENUE 8TH FLOOR NEW YORK, NY 10035 | N/A | GOV | SHARING IS CARING EXPANDING PATIENT AND CAREGIVER ACCESS TO HEALTH INFORMATION IN THE AGE OF | 19,93 |

| 750 E ADAMS STREET WH 1111E SYRACUSE, NY 132102306 | | | PROBLEMS AMONG OLDER ADULTS IN LONG TERM CARE | |
|--|-----|-----|--|------|
| RESEARCH FOUNDATION OF CITY UNIVERSITY OF NEW YORK 2180 THIRD AVENUE 8TH FLOOR NEW YORK, NY 10035 | N/A | GOV | SHARING IS CARING EXPANDING PATIENT AND CAREGIVER ACCESS TO HEALTH INFORMATION IN THE AGE OF HIPAA | 19,9 |

Recipient
Name and address (home or business)

Recipient
If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Purpose of grant or contribution
recipient

Purpose of grant or contribution

| RESEARCH FOUNDATION OF THE CITY UNIVERSITY OF NEW YORK 230 W 41ST ST 7TH FLR NEW YORK, NY 10036 | N/A | GOV | CONFERENCE SCHOLARSHIP | 2,500 |
|--|-----|-----|------------------------|--------|
| ROCHESTER REGIONAL HEALTH 100 KINGS HIGHWAY S ROCHESTER, NY 14617 | N/A | PC | OPENNOTES ROCHESTER | 24,814 |
| | | | | |

| ROCHESTER REGIONAL HEALTH 100 KINGS HIGHWAY S ROCHESTER, NY 14617 | N/A | PC | OPENNOTES ROCHESTER | 24,814 |
|---|-----|----|--|-----------|
| ROCKLAND INDEPENDENT LIVING CENTER INC 873 ROUTE 45 SUITE 108 NEW CITY, NY 10956 | N/A | PC | VETERANS' HEALTH - CONFERENCE SCHOLARSHIP | 1,640 |
| Total | | | | 9,036,431 |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

| PO BOX 4757 POUGHKEEPSIE, NY 12602 | N/A | PC | COMMUNITIES CONFERENCE SCHOLARSHIP | 1,25/ |
|---|-----|----|--|--------|
| RURAL HEALTH NETWORK OF SOUTH CENTRAL NEW YORK 455 COURT STREET | N/A | PC | MAKING THE CASE FOR INVESTING IN SOCIAL DETERMINANTS OF HEALTH | 71,091 |

| RURAL HEALTH NETWORK OF SOUTH CENTRAL NEW YORK 455 COURT STREET BINGHAMTON, NY 13904 | N/A | PC | MAKING THE CASE FOR INVESTING IN SOCIAL DETERMINANTS OF HEALTH INTERVENTIONS BY RURAL PROVIDERS | 71,091 |
|---|-----|----|---|--------|
| SAVVY COOP LTD4119 41ST ST APT 4H | N/A | NC | CONSUMER EMPOWERMENT - | 2,000 |

CONFERENCE SCHOLARSHIP

9,036,431

| 1 | 455 COURT STREET BINGHAMTON, NY 13904 | | | DETERMINANTS OF HEALTH INTERVENTIONS BY RURAL PROVIDERS | |
|---|--|-----|----|---|------|
| 1 | CAVAY COOR LTD4110 41CT CT ART 4H | N/A | NC | CONCLIMED EMPOWERMENT | 2.00 |

SUNNYSIDE, NY 11104

Purpose of grant or Recipient If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SCAN-NEW YORK VOLUNTEER PARENT-N/A PC GET HEALTHY, EAST HARLEM 15,000 AIDES ASSOCIATION INC 345 EAST 102ND ST 3RD FLOOR

| SCHUYLER CENTER FOR ANALYSIS AND ADVOCACY INC 540 BROADWAY ALBANY, NY 12207 | N/A | PC | EXPANDING COMMUNITY WATER FLUORIDATION AND DEVELOPING A BLUEPRINT FOR SUSTAINABLE SUCCESS | 45,256 |
|--|-----|----|--|--------|
| NEW YORK, NY 10029 | | | | |

▶ 3a

9,036,431

| ADVOCACY INC 540 BROADWAY ALBANY, NY 12207 | | | FLUORIDATION AND DEVELOPING A BLUEPRINT FOR SUSTAINABLE SUCCESS | |
|---|-----|----|---|-------|
| ST BARNABAS HOSPITAL 4422 THIRD AVENUE BRONN, NY, 10457 | N/A | PC | SPREADING OPEN NOTES IN THE BRONX | 25,00 |

| ALBANY, NY 12207 | | | SUSTAINABLE SUCCESS | |
|--|-----|----|-----------------------------------|------|
| ST BARNABAS HOSPITAL 4422 THIRD AVENUE BRONX. NY 10457 | N/A | PC | SPREADING OPEN NOTES IN THE BRONX | 25,0 |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ST JOSEPHS REHABILITATION CENTER N/A PC SCALING A MULTI-PRONGED 120,000 INC RESPONSE TO OPIODS IN THE 151 GLENWOOD DR PO BOX 470 NORTH COUNTRY

| N/A | PC | BUILDING HEALTHY COMMUNITIES CONFERENCE SCHOLARSHIP | 4,000 |
|-----|----|--|---|
| N/A | PC | STRENGTHENING SUICIDE PREVENTION PROGRAMS FOR STUDENTS OF COLOR ON COLLEGE CAMPUSES | 127,010 |
| | | | N/A PC STRENGTHENING SUICIDE PREVENTION PROGRAMS FOR STUDENTS OF COLOR ON |

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year SUNY NEW PALTZ FOUNDATION INC. N/A PC INCREASING HEALTH CARE 26,974

1 HAWK DRIVE

Total .

| NEW PALTZ, NY 12561 | | | ABILITY TO SERVE RETURNING VETERANS | |
|--|-----|----|--|-------|
| TEACHERS COLLEGE COLUMBIA UNIVERSITY 525 WEST 120TH STREET BOX 137 | N/A | PC | RETURN TO SCRATCH COOKING DEVELOPMENT STUDY | 5,037 |

| UNIVERSITY 525 WEST 120TH STREET BOX 137 NEW YORK, NY 10027 | 1976 | FC | DEVELOPMENT STUDY | 3,637 |
|--|------|----|--|--------|
| TEACHERS COLLEGE COLUMBIA UNIVERSITY 525 WEST 120TH STREET BOX 137 | N/A | PC | EXPANDING CULTURALLY COMPETENT CARE TO VETERANS AT NON-V PROVIDERS | 98,595 |

PROVIDERS READINESS AND

| 525 WEST 120TH STREET BOX 137 NEW YORK, NY 10027 | | | | |
|--|-----|----|--|-----|
| TEACHERS COLLEGE COLUMBIA UNIVERSITY 525 WEST 120TH STREET BOX 137 NEW YORK, NY 10027 | N/A | PC | EXPANDING CULTURALLY COMPETENT CARE TO VETERANS AT NON-V PROVIDERS | 98, |

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year THE NEW YORK STATE ASSOCIATION N/A PC **BUILDING HEALTHY** 4.000 OF COUNTY HEALTH OFFICIALS INC COMMUNITIES CONFERENCE 1 UNITED WAY SCHOLARSHIP ALBANY, NY 12005

| 1 | | | | |
|---|-----|----|--|---------|
| THIRD SECTOR NEW ENGLAND INC 89 SOUTH STREET SUITE 700 BOSTON, MA 02111 | N/A | PC | HEALTHY NEIGHBORHOODS INITIATIVE TECHNICAL ASSISTANCE, PHASE 2 | 112,496 |
| TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA | N/A | PC | FROM CRISIS TO SOLUTIONS COST ANALYSIS AND | 21,426 |

| BOSTON, MA 02111 | | | ASSISTANCE, PHASE 2 | |
|---|-----|----|---|--------|
| TRUSTEES OF THE UNIVERSITY OF PENNSYLVANIA 3701 LOCUST WALK PHILADELPHIA, PA 19104 | N/A | PC | FROM CRISIS TO SOLUTIONS COST ANALYSIS AND INTERVENTIONS FOR AGING HOMELESS ADULTS | 21,426 |
| | | | | ĺ |

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year UNITED HOSPITAL FUND OF NEW YORK N/A PC PROMOTING PATIENT-43,922 1411 BROADWAY 12 FLOOR CENTERED DISCHARGE NEW YORK, NY 10018 PLANNING FOR POST-ACUTE CARE SETTINGS

| UNITED HOSPITAL FUND OF NEW YORK 1411 BROADWAY 12 FLOOR NEW YORK, NY 10018 | N/A | PC | HOWS MY HEALTH DASHBOARD EMPOWERING PATIENTS WITH INFORMATION TO BETTER MANAGE THEIR CARE | 200,660 |
|---|-----|----|--|---------|
| UNITED STATES CONFERENCE OF CATHOLIC BISHOPS 992 NORTH VILLAGE AVENUE ROCKVILLE CENTRE, NY 11570 | N/A | PC | NIAGARA FALLS LOCAL FOOD ACTION PLAN | 3,000 |

▶ 3a

9,036,431

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year UNIVERSITY SETTLEMENT SOCIETY OF N/A PC HEALTHY NEIGHBORHOODS 75 NON I

| NEW YORK INC 184 ELDRIDGE STREET NEW YORK, NY 10002 | | | FUND | 75,000 |
|---|-----|----|----------------|--------|
| UPSTATE FAMILY HEALTH CENTER INC 1001 NOYES ST | N/A | PC | UFHC OPENNOTES | 62,500 |

| UPSTATE FAMILY HEALTH CENTER INC 1001 NOYES ST UTICA, NY 13502 | N/A | PC | UFHC OPENNOTES | 62,500 |
|--|-----|----|---|--------|
| VERA INSTITUTE OF JUSTICE INC 233 BROADWAY 12TH FLOOR NEW YORK, NY 10279 | N/A | PC | PLANNING MEDICAL PAROLE TO REDUCE HEALTH COSTS FOR AGING AND INFIRM INMATES | 49,836 |

Total .

| form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment | | | | | | |
|--|--|--------------------------------------|--|--------|--|--|
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of recipient | Purpose of grant or contribution | Amount | | |
| Name and address (home or business) | | | | | | |
| a Paid during the year | | | | | | |
| WE RUN BROWNSVILLE INC 1219 EAST 80TH STREET BROOKLYN, NY 11236 | N/A | PC | BUILDING HEALTHY COMMUNITIES CONFERENCE SCHOLARSHIP | 4,000 | | |
| WEST SIDE CENTER FOR COMMUNITY LIFE INC 263 WEST 86TH STREET NEW YORK, NY 10024 | N/A | PC | COLLECTIVE PURCHASING | 4,000 | | |
| WESTERN NEW YORK GRANTMAKERS ASSOCIATION INC THE CENTRAL NEW YORK | N/A | PC | PHILANTHROPIC SUPPORT GRANT JULY 1, 2019 - JUNE 30, 2020 | 5,500 | | |

| LIFE INC 263 WEST 86TH STREET NEW YORK, NY 10024 | , | | | , |
|---|-----|----|--|------|
| WESTERN NEW YORK GRANTMAKERS ASSOCIATION INC THE CENTRAL NEW YORK PHILANTHROPY | N/A | PC | PHILANTHROPIC SUPPORT GRANT JULY 1, 2019 - JUNE 30, 2020 | 5,50 |

CENTER431 E FAYETTE STREET

9,036,431

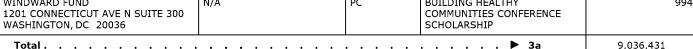
SYRACUSE, NY 13020

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

| WINDWARD FUND | N/A | DC. | BUILDING HEALTHY | 004 |
|------------------------|----------------------------|-----|------------------|-----|
| a Paid during the year | | | | |
| , , | or substantial contributor | | | |

| NDWARD FUND | N/A | PC | BUILDING HEALTHY |
|--------------------------------|-----|----|------------------------|
| D1 CONNECTICUT AVE N SUITE 300 | | | COMMUNITIES CONFERENCE |
| SHINGTON, DC 20036 | | | SCHOLARSHIP |

Name and address (home or business)



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|--------------------------------|---------|---------------------|--------------------------|------------------------|---|
| TY 2019 Accounting Fo | ees Sch | edule | | | |
| 3 | | | | | |
| | | NEW YOR 30-01278 | RK STATE HEALTH 392 | FOUNDATION | |
| Category | Amo | ount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
| ACCOUNTING FEES | | 37,726 | 0 | | 37,026 |

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

TY 2019 Expenditure Responsibility Statement

Name: NEW YORK STATE HEALTH FOUNDATION

EIN: 30-0127892

| 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 |
|---|--|------------|-----------------|--|----------------------------------|--|-----------------------------------|-------------------------|----------------------------|
| AMERICAN CONGRESS OF OBSTETRICIANS AND GYNECOLOGISTS | 100 GREAT OAKS BOULEVARD SUITE 109 ALBANY, NY 12203 | 2016-10-25 | 224,681 | WOMEN, PREGNANCY, & THE OPIOID EPIDEMIC IN UPSTATE NEW YORK A HEALTHCARE PROVIDER EDUCATIONAL APPROACH | 224,681 | TO OUR KNOWLEDGE, THE GRANTEE HAS NOT DIVERTED ANY PORTION OF THE FUNDS | 7/30/2019 | | |
| AVALERE HEALTH LLC | 1350 CONNECTICUT AVENUE NW WASHINGTON, DC 20036 | 2019-04-12 | 89,907 | PROVIDING STRATEGIC GUIDANCE AND TECHNICAL ASSISTANCE TO NYSHEALTH'S CONNECTING CONSUMERS TO INFORMATION INITIATIVE | 89,857 | TO OUR KNOWLEDGE, THE GRANTEE HAS NOT DIVERTED ANY PORTION OF THE FUNDS | 1/17/2020 | | |
| BUILDING SERVICE 32BJ HEALTH FUND | 25 WEST 18TH ST NEW YORK, NY 10011 | 2019-10-07 | 200,727 | EMPOWERING CONSUMERS WITH A HIGH VALUE MATERNITY NETWORK | 133,027 | TO OUR KNOWLEDGE, THE GRANTEE HAS NOT DIVERTED ANY PORTION OF THE FUNDS | 12/24/2019 | | |
| CLEAR HEALTHCOSTS INC | PO BOX 8124 PELHAM, NY 10803 | 2019-10-15 | 123,453 | PRICECHECK NEW YORK CITY | 61,106 | TO OUR KNOWLEDGE, THE GRANTEE HAS NOT DIVERTED ANY PORTION OF THE FUNDS | 2/6/2020 | | |
| COLLECTIVE FOR COMMUNITY CULTURE AND ENVIRONMENT | 200 WILLOUGHBY AVENUE BROOKLYN, NY 11205 | 2019-09-17 | 25,000 | HEALTH-FORWARD URBAN DESIGN IN THE LOWER EAST SIDE NEIGHBORHOOD, NYC | 5,193 | TO OUR KNOWLEDGE, THE GRANTEE HAS NOT DIVERTED ANY PORTION OF THE FUNDS | 1/15/2020 | | |
| GLOBAL STRATEGY GROUP LLC | 215 PARK AVENUE SOUTH 15TH FLOOR NEW YORK, NY 10003 | 2019-01-16 | 150,000 | ACCESS TO VETERAN TREATMENT COURTS | 120,000 | TO OUR KNOWLEDGE, THE GRANTEE HAS NOT DIVERTED ANY PORTION OF THE FUNDS | 1/27/2020 | | |
| HONESTHEALTH INC | 1900 ADDISON STREET - SUITE 100 BERKELEY, CA 94704 | 2017-07-31 | 228,388 | ARE WE THERE YET? AN ANALYSIS OF HEALTH CARE COST AND QUALITY CONSUMER TOOLS AND RECOMMENDATIONS FOR NEW YORK STATE | 240,221 | TO OUR KNOWLEDGE, THE GRANTEE HAS NOT DIVERTED ANY PORTION OF THE FUNDS | 11/21/2018 | | |
| IM RESEARCH AND SERVICE CORPORATION | 744 BROADWAY ALBANY, NY 12207 | 2018-02-21 | 249,626 | HELPING PHYSICIANS TO EMPOWER CONSUMERS | 262,344 | TO OUR KNOWLEDGE, THE GRANTEE HAS NOT DIVERTED ANY PORTION OF THE FUNDS | 1/31/2020 | | |
| IMPAQ INTERNATIONAL LLC | 10420 LITTLE PATUXENT PARKWAY SUITE 300 COLUMBIA, MD 21044 | 2016-11-17 | 286,380 | HEALTH INSURANCE MARKETPLACE TRANSPARENCY TOOL OUT-OF-POCKET COSTS FOR SPECIALTY CONDITIONS | 286,380 | TO OUR KNOWLEDGE, THE GRANTEE HAS NOT DIVERTED ANY PORTION OF THE FUNDS | 12/26/2018 | | |
| NEW YORK FOUNDATION - FISCAL SPONSOR FOR NEIGHBORHOODS FIRST FUND | 150 WEST 30TH STREET NEW YORK, NY 10001 | 2019-07-08 | 180,075 | COMMUNITY BASED PLANNING AND HEALTH FOCUSED INITIATIVES | 144,060 | TO OUR KNOWLEDGE, THE GRANTEE HAS NOT DIVERTED ANY PORTION OF THE FUNDS | PENDING | | |

| 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 |
|---|--|------------|-----------------|--|----------------------------------|---|-----------------------------------|-------------------------|----------------------------|
| NEW YORK STATE ACADEMY OF FAMILY PHYSICIANS | 260 OSBORNE RD ALBANY, NY 12211 | 2018-03-09 | 210,377 | NYSAFP PATIENT EMPOWERMENT | 200,972 | TO OUR KNOWLEDGE, THE GRANTEE HAS NOT DIVERTED ANY PORTION OF THE FUNDS | 1/27/2020 | | |
| SAWY COOP LTD | 4119 41ST ST APT 4H SUNNYSIDE, NY 11104 | 2019-05-10 | | CONSUMER EMPOWERMENT - CONFERENCE SCHOLARSHIP | 2,000 | TO OUR KNOWLEDGE, THE GRANTEE HAS NOT DIVERTED ANY PORTION OF THE FUNDS | 2/26/2019 | | |

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| | | |

TY 2019 General Explanation Attachment

Name: NEW YORK STATE HEALTH FOUNDATION

EIN: 30-0127892

| General E | xplanation | n Attachmen | t |
|------------|---------------------|--|--|
| Identifier | Return Reference | Explanation | |
| 1 | | FORM 990- PF, PAGE 7, PART IX-A, LINES 1, 2, AND 3 | 1) LEARNING AND EVALUATION - \$1,215,037ACTIVITIES TO LEARN FROM AND COMMUNICATE GRANTMAKING RESULTS ONE OF THE FOUNDATION'S GUIDING PRINCIPLES IS TO "BE A LEARNING ORGANIZATION INTERESTED IN MEASURING OUTCOMES, COMMUNICATING RESULTS, AND DIFFUSING SUCCESSFUL IDEAS FOR IMPLEMENTATION THROUGHOUT NEW YORK STATE AND BEY OND "THESE LEARNING AND EVALUATION ACTIVITIES INCREASE THE IMPACT OF THE FOUNDATIONS GRANTMAKING FOUNDATION STAFF DEVILOP GRANT OUTCOME REPORTS TO CAPTURE AND SHARE THE LESSONS OF NEARLY EVERY GRANT AWARDED AND MAINTAIN A VIBRANT WEBSITE TO DISSEMINATE THESE LESSONS STAFF ALSO SPEND TIME DEVELOPING AND SHARING FOLICY ANALY SES AND REPORTS ON KEY TOPICS AFFECTING NEW YORK'S HEALTH SYSTEM 2) LEVERAGE - \$183,960 ACTIVITIES TO RAISE FUNDS AND CREATE PARTINERSHIPS WITH OTHER ORGANIZATIONS TO INCREASE THE ABILITY OF GRANTEES TO IMPROVE THE HEALTH OF NEW YORKERS A KEY STRATEGY FOR THE FOUNDATION IS TO ATTRACT AND LEVERAGE PUBLIC AND PRIVATE FUNDS TO COMPLEMENT AND AMPLIFY ITS OWN GRANT DOLLARS IN 2019, MY SHEALTH LEVERAGED NEARLY S82 MILLION FROM PUBLIC AND PRIVATE SOUNCES, INCLUDING DIRECT CO-FUNDING AND MONEY RAISED AS ONE EXAMPLE, ON THE HEELS OF A SUCCESSFUL CAMPAIGN TO SECURE UNIVERSAL FREE SCHOOL LUNCH FOR ALL NEW YORK CITY SCHOOL CHILDREN, THE FOUNDATION IS NOW SUPPORTING EFFORTS TO IMPROVE THE QUALITY AND APPEAL OF SCHOOL FOOD AND ENSURE THAT STUDENTS ARE EATING IT NUMBEROUS OTHER FUNDERS, INCLUDING THE RESTAURANT CHAIN SWEETGREEN AND THE NEW YORK CITY DEPARTMENT OF EDUCATION, HAVE JOINED THE EFFORT TO REDESIGN SCHOOL CAFETERIAS TO ENCOURAGE HEALTHER EATING IN NEW YORK SCHOOLS SIMILARLY, PUBLIC AND PRIVATE SOURCES, AND OTHER ADDITIONS FOR PUBLIC AND PROVETTE QUALITY AND APPEAL OF SCHOOL FOOD AND ENSURE THAT STUDENTS ARE EATING IT NUMBEROUS OTHER FUNDERS, INCLUDING THE RESTAURANT CHAIN SWEETGREEN AND THE NEW YORK CITY DEPARTMENT OF EDUCATION, HAVE JOINED THE EFFORT TO REDESIGN SCHOOL CAFETERIAS TO ENCOURAGE HEALTHIES FATING IN NEW YORK SCHOOLS. SIMILARLY, PUBLIC AND PRIVATE SOURCES, SHOULD THE MEDIA |

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| | | |
| TV 2010 Investments - Other 9 | Schodulo | |

Name: NEW YORK STATE HEALTH FOUNDATION EIN: 30-0127892

| Investments Other Schedule 2 | | | |
|--------------------------------------|-----------------------|-------------|----------------------------------|
| Category/ Item | Listed at Cost or FMV | Book Value | End of Year Fair Market Value |
| ISHARES CORE U.S. AGGREGATE BOND ETF | FMV | 104,863,684 | 104,863,684 |
| BGI RUSSELL 1000 INDEX FUND B | FMV | 132,701,466 | 132,701,466 |
| ISHARES MSCI CORE EAFE ETF | FMV | 30,832,424 | 30,832,424 |
| ISHARES RUSSELL 1000 ETF | FMV | 25,121,536 | 25,121,536 |
| VANGUARD SHORT TERM TREASURY ETF | FMV | 11,314,380 | 11,314,380 |

| <u>, </u> | | |
|--|--|--|
| TY 2019 Land, Etc. | | |
| Schedule | | |

DLN: 93491182009180

End of Year Fair Market Value

15,771

70,884

15,771

Name: NEW YORK STATE HEALTH FOUNDATION

518,980

Category / Item Cost / Other Basis Depreciation Book Value

LEASEHOLD IMPROVEMENTS 160,291 89,407 70,884

534,751

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EQUIPMENT

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| TY 2019 Legal Fees Sched | ule | | | _ |
| | | | | |
| Nai | me: NEW YORK S | STATE HEALTH FO | UNDATION | |
| E | IN: 30-0127892 | | | |
| 2.1 | | | A -11 -1 -1 -1 -1 | D |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable |
| | | | | Purposes |
| | | | | |

| | <u>a -</u> | AS FIIED Data | PROCESS | print - DO NOT | efile GRAPHIC |
|-------------------------------|------------|---------------|-----------|----------------|---------------|
| TY 2019 Other Assets Schedule | | | Calcadada | | TV 2010 0 |

DLN: 93491182009180

Name: NEW YORK STATE HEALTH FOUNDATION EIN: 30-0127892

| Other Assets Schedule | | | | | |
|----------------------------|-----------------------------------|-----------------------------|------------------------------------|--|--|
| Description | Beginning of Year - Book Value | End of Year - Book Value | End of Year - Fair Market Value | | |
| ACCRUED INVESTMENT INCOME | 4,053 | 6,939 | 6,939 | | |
| PREPAID FEDERAL EXCISE TAX | 143,456 | 73,901 | 73,901 | | |
| OTHER RECEIVABLES | 382 | 16,400 | 16,400 | | |

| file GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491182009180 TY 2019 Other Decreases Schedule | | | | | | | |
|---|--------------|-----------------------|--------|--|--|--|--|
| i i 2019 Other Decreases Sch | euuie | | | | | | |
| Name: | NEW YORK STA | ATE HEALTH FOUNDATION | | | | | |
| EIN: | 30-0127892 | | | | | | |
| D | escription | | Amount | | | | |

DEFERRED FEDERAL EXCISE TAX PROVISION

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | DLN: | : 93491182009180 | | |
|--------------------------------------|--------------------------------------|--------------------------|---------------------------------------|---|--|--|
| TY 2019 Other Expenses Schedule | | | | | | |
| | | | | | | |
| Name: | NEW YORK STA | TE HEALTH FOUN | NDATION | | | |
| EIN: 30-0127892 | | | | | | |
| Other Expenses Schedule | | | | | | |
| Description | Revenue and Expenses per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | |
| OFFICE EXPENSES & IT | 158,711 | 11,535 | | 156,593 | | |
| INSURANCE | 40,118 | 0 | · · · · · · · · · · · · · · · · · · · | 40,118 | | |

87,361

12,447

795

275,230

87,361

11,652

OUTREACH AND PUBLIC EVENTS

OTHER EXPENSES THROUGH K-1

MISCELLANEOUS

| ellie GRAPHIC | print - DO NOT PROCESS | AS FIIEU Data - | DLN: 93491182009180 |
|---------------|------------------------|-----------------|---------------------|
| | | | _ |
| | | | |

TY 2019 Other Income Schedule

Name: NEW YORK STATE HEALTH FOUNDATION

EIN: 30-0127892

| Other Income Schedule | | | | | |
|--------------------------|-----------------------------------|--------------------------|---------------------|--|--|
| Description | Revenue And Expenses Per Books | Net Investment Income | Adjusted Net Income | | |
| OTHER PARTNERSHIP INCOME | | 45,714 | | | |
| RENTAL INCOME | 198,478 | 198,478 | 198,478 | | |
| GRANTS RESCINDED | 150,000 | | 150,000 | | |
| GRANTS REFUND | 15 404 | | 15 404 | | |

| _ | | | | | | |
|----------------------------------|--|--|--|--|--|--|
| TY 2019 Other Increases Schedule | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Amount | | | | | | |
| _ | | | | | | |

UNREALIZED GAIN ON INVESTMENTS

27,965,604

| efile GRAPHIC print - DO NOT PROCESS | As Filed Data - | | D | LN: 93491182009180 | | | |
|--|--|------------|-----------------------------------|-----------------------------|--|--|--|
| TY 2019 Other Liabilities Schedule | | | | | | | |
| | | | | | | | |
| Name | NEW YORK ST | ΔΤΕ ΗΕΔΙΤΗ | FOUNDATION | | | | |
| | Name: NEW YORK STATE HEALTH FOUNDATION | | | | | | |
| EIN: | 30-0127892 | | | | | | |
| | | | | | | | |
| | | | | 1 | | | |
| Description | n | | Beginning of Year - Book Value | End of Year - Book Value | | | |
| Description DEFERRED FEDERAL EXCISE TAX | n | | | | | | |

| efile GRAPHIC print - DO NOT PROCES | SS As Filed Data | - | DLI | N: 93491182009180 | |
|--|------------------|--------------------------|------------------------|---------------------------------|--|
| TY 2019 Other Professional Fees Schedule | | | | | |
| | | | | | |
| Name: NEW YORK STATE HEALTH FOUNDATION | | | | | |
| EIN: 30-0127892 | | | | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable | |

| | 22111 30 0127032 | | | |
|---------------------------|------------------|--------------------------|------------------------|---|
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
| INVESTMENT MANAGEMENT AND | 166,599 | 166,599 | | 0 |

75,000

86,699

75,000

91,105

ADVISORY

HR SEARCH FIRM FEES

MEDIA CONSULTING FEES AND OTHER

| efile GRAPHIC print - DO NOT PROCES | S As Filed Data | - | DLI | N: 93491182009180 | | |
|--|-----------------|--------------------------|------------------------|---|--|--|
| TY 2019 Taxes Schedule | | | | | | |
| | | | | | | |
| Name: NEW YORK STATE HEALTH FOUNDATION | | | | | | |
| EIN: 30-0127892 | | | | | | |
| | | | | 1 | | |
| Category | Amount | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes | | |
| FEDERAL EXCISE TAX | 169,555 | 0 | | 0 | | |

163,849

| Category | |
|----------|--|
| | |

FOREIGN TAXES PAID