

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

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

▶ **Do not enter social security numbers on this form as it may be made public.**
 ▶ **Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.**

OMB No 1545-0052
2017
Open to Public Inspection

For calendar year 2017, or tax year beginning 10-01-2017, and ending 09-30-2018

Name of foundation Wyandotte Health Foundation		A Employer identification number 48-0547722
Number and street (or P O box number if mail is not delivered to street address) 755 Minnesota Avenue	Room/suite	B Telephone number (see instructions) (913) 371-4031
City or town, state or province, country, and ZIP or foreign postal code Kansas City, KS 66117		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 39,654,069	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities	824,369	824,369		
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	5,395,653			
	b Gross sales price for all assets on line 6a	28,455,951			
	7 Capital gain net income (from Part IV, line 2)		5,395,653		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	37,270	37,270	37,270		
12 Total. Add lines 1 through 11	6,257,292	6,257,292	37,270		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	145,420	58,168	0	87,252
	14 Other employee salaries and wages	129,668	38,900	0	90,768
	15 Pension plans, employee benefits	65,884	27,671	0	38,213
	16a Legal fees (attach schedule)	64	64	0	0
	b Accounting fees (attach schedule)	51,243	25,621	0	25,622
	c Other professional fees (attach schedule)	7,190	0	0	7,190
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	67,908	0	0	0
	19 Depreciation (attach schedule) and depletion	38,174	0	0	
	20 Occupancy	58,719	9,395	0	49,324
	21 Travel, conferences, and meetings	16,847	0	0	16,847
	22 Printing and publications	1,751	0	0	1,751
	23 Other expenses (attach schedule)	179,360	104,008	0	75,352
	24 Total operating and administrative expenses. Add lines 13 through 23	762,228	263,827	0	392,319
	25 Contributions, gifts, grants paid	2,782,279			2,093,229
26 Total expenses and disbursements. Add lines 24 and 25	3,544,507	263,827	0	2,485,548	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	2,712,785				
b Net investment income (if negative, enter -0-)		5,993,465			
c Adjusted net income (if negative, enter -0-)			37,270		

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	75,169	65,927	65,927
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ _____ 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			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)	3,801,152	2,658,800	2,565,082
	b Investments—corporate stock (attach schedule)	17,516,343	0	0
	c Investments—corporate bonds (attach schedule)	4,551,085	5,946,868	5,745,477
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	8,941,523	30,122,208	30,745,109
	14 Land, buildings, and equipment basis ▶ _____ 1,126,674 Less accumulated depreciation (attach schedule) ▶ _____ 730,202	414,177	396,472	396,472
15 Other assets (describe ▶ _____)	85,290	136,002	136,002	
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	35,384,739	39,326,277	39,654,069	
Liabilities	17 Accounts payable and accrued expenses	43,273	23,493	
	18 Grants payable	742,501	1,431,550	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)	26,172	8,830	
	23 Total liabilities (add lines 17 through 22)	811,946	1,463,873	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	34,572,793	37,862,404	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
29 Retained earnings, accumulated income, endowment, or other funds				
30 Total net assets or fund balances (see instructions)	34,572,793	37,862,404		
31 Total liabilities and net assets/fund balances (see instructions) .	35,384,739	39,326,277		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	34,572,793
2 Enter amount from Part I, line 27a	2	2,712,785
3 Other increases not included in line 2 (itemize) ▶ _____	3	576,826
4 Add lines 1, 2, and 3	4	37,862,404
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	37,862,404

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1 a				
b				
c				
d				
e				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	28,455,951		23,060,298	5,395,653
b				
c				
d				
e				

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			5,395,653
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	5,395,653
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	5,395,653

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part Yes No

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	2,104,548	38,891,248	0 054114
2015	2,254,183	38,405,580	0 058694
2014	2,552,765	41,845,514	0 061005
2013	2,557,130	42,613,522	0 060007
2012	2,418,762	40,581,211	0 059603

2 Total of line 1, column (d)	2	0 293423
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 058685
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	40,202,238
5 Multiply line 4 by line 3	5	2,359,268
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	59,935
7 Add lines 5 and 6	7	2,419,203
8 Enter qualifying distributions from Part XII, line 4	8	2,485,548

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

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

Table with 11 rows for excise tax calculation. Includes fields for exempt foundations, tax under section 511, subtitle A tax, and total tax due. Subtotal table for 2017 estimated tax payments (6a-6d) is also included.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question number, 'Yes', and 'No' responses. Questions cover political campaign influence, political expenditures, and state reporting requirements.

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions). 11 No
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions) 12 No
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address wyhealthfnd.org 13 Yes
14 The books are in care of Wyandotte Health Foundation Telephone no (913) 371-4032

Located at 755 Minnesota Avenue Kansas City KS ZIP+4 661170241

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here 15

16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes," enter the name of the foreign country 16 Yes No

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a During the year did the foundation (either directly or indirectly)
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes No
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes No
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes No
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). Yes No
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here.
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))
a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? If "Yes," list the years 20, 20, 20, 20
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement-see instructions)
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20, 20, 20, 20
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes No
b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017).
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?

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

5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?			5b
	Organizations relying on a current notice regarding disaster assistance check here.			<input type="checkbox"/>
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870</i>			6b
				No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			7b

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

Part VIII Table 1: List all officers, directors, trustees, foundation managers and their compensation (see instructions). Columns: (a) Name and address, (b) Title and average hours per week, (c) Compensation, (d) Contributions to employee benefit plans, (e) Expense account.

Table 2: Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE." Columns: (a) Name and address, (b) Title and average hours per week, (c) Compensation, (d) Contributions to employee benefit plans, (e) Expense account.

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

Table 3: Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE." Columns: (a) Name and address, (b) Type of service, (c) Compensation.

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

Part IX-A Summary of Direct Charitable Activities. List the foundation's four largest direct charitable activities during the tax year. Columns: Description, Expenses.

Part IX-B Summary of Program-Related Investments (see instructions). Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Columns: Description, Amount.

Total. Add lines 1 through 3. 0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	40,338,582
b	Average of monthly cash balances.	1b	70,548
c	Fair market value of all other assets (see instructions).	1c	405,325
d	Total (add lines 1a, b, and c).	1d	40,814,455
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	40,814,455
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	612,217
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	40,202,238
6	Minimum investment return. Enter 5% of line 5.	6	2,010,112

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

1	Minimum investment return from Part X, line 6.	1	2,010,112
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	59,935
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	59,935
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	1,950,177
4	Recoveries of amounts treated as qualifying distributions.	4	164,652
5	Add lines 3 and 4.	5	2,114,829
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	2,114,829

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	2,485,548
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	2,485,548
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions).	5	59,935
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	2,425,613

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				2,114,829
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2017				
a From 2012.	437,893			
b From 2013.	454,011			
c From 2014.	516,791			
d From 2015.	344,290			
e From 2016.	199,108			
f Total of lines 3a through e.	1,952,093			
4 Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ _____ 2,485,548				
a Applied to 2016, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2017 distributable amount.				2,114,829
e Remaining amount distributed out of corpus	370,719			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))				0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,322,812			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).		0		
8 Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions).	437,893			
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	1,884,919			
10 Analysis of line 9				
a Excess from 2013.	454,011			
b Excess from 2014.	516,791			
c Excess from 2015.	344,290			
d Excess from 2016.	199,108			
e Excess from 2017.	370,719			

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. ▶

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

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year				(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					

3 Complete 3a, b, or c for the alternative test relied upon

a "Assets" alternative test—enter

(1) Value of all assets

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.

c "Support" alternative test—enter

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).

(3) Largest amount of support from an exempt organization

(4) Gross investment income

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

Via online grant portal - questions
Wyandotte Health Foundation PO Box
171242 755 Minnesota Ave
Kansas City, KS 66117
(913) 371-4031
rlopez@wyhealthfdn.org

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

The online application will be available six weeks prior to the deadline. Complete and submit the online grant application

c Any submission deadlines

Proposals must be submitted via the Foundation's online grant portal by noon on 4th Friday of June

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

To be considered as a potential grantee, your organization must: 1 Be a 501 (c) (3) organization or government 2 Be located within Wyandotte County or Johnson County Kansas, or Jackson County, Missouri 3 Demonstrate that all funding will be used to serve Wyandotte county residents 4 In general, the Wyandotte Health Foundation will not award grants to the following: 1 direct support to individuals for projects or scholarships 2 budget deficits or debt reduction 3 activities that exclusively benefit members of sectarian or religious organizations 4 directly influence legislation or support candidates for office 5 annual fund drives or events 6 building/capital campaigns 7 Medical research. There is no minimum or maximum size for grants. Generally, multi-year grants will not be considered.

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total ▶ 3a				2,093,229
b <i>Approved for future payment</i>				
Total ▶ 3b				0

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Part XVII

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code... 1a(1) Cash... 1a(2) Other assets... 1b(1) Sales of assets... 1b(2) Purchases of assets... 1b(3) Rental of facilities... 1b(4) Reimbursement arrangements... 1b(5) Loans or loan guarantees... 1b(6) Performance of services... 1c Sharing of facilities...

Table with 4 columns: (a) Line No, (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements.

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code... 2b If "Yes," complete the following schedule

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best 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, Signature of officer or trustee, Date, Title, May the IRS discuss this return with the preparer shown below, Print/Type preparer's name, Preparer's Signature, Date, Check if self-employed, PTIN, Firm's name, Firm's address, Firm's EIN, Phone no.

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
William C Tempel 755 Minnesota Avenue Kansas City, KS 66117	Director 1 00	0	0	0
Trudie Hall 755 Minnesota Avenue Kansas City, KS 66117	Chairman 1 00	0	0	0
Ramon Murguia 755 Minnesota Avenue Kansas City, KS 66117	Director 1 00	0	0	0
John J Jurczyk Jr 755 Minnesota Avenue Kansas City, KS 66117	Director 1 00	0	0	0
Charles W Thurston Jr 755 Minnesota Avenue Kansas City, KS 66117	Treasurer 1 00	0	0	0
Raymond L Daniels 755 Minnesota Avenue Kansas City, KS 66117	Director 1 00	0	0	0
Rebecca Schwietz 755 Minnesota Avenue Kansas City, KS 66117	Second Vice Chairman 1 00	0	0	0
Leon C Logan 755 Minnesota Avenue Kansas City, KS 66117	Director 1 00	0	0	0
James M White 755 Minnesota Avenue Kansas City, KS 66117	Director 1 00	0	0	0
Clarence L Small 755 Minnesota Avenue Kansas City, KS 66117	Secretary 1 00	0	0	0
Cathy Harding 755 Minnesota Avenue Kansas City, KS 66117	President and CEO 40 00	145,420	18,485	0
Dr Karol Davis 755 Minnesota Avenue Kansas City, KS 66117	First Vice Chairman 1 00	0	0	0
Lisa Garcia-Stewart 755 Minnesota Avenue Kansas City, KS 66117	Director 1 00	0	0	0
Wayne Sims 755 Minnesota Avenue Kansas City, KS 66117	Director 1 00	0	0	0
Irene Caudillo 755 Minnesota Avenue Kansas City, KS 66117	Director 1 00	0	0	0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Caritas Clinic Inc636 Tauomee Kansas City, KS 66101		PC	Primary medical care for uninsured of Wyandotte County	248,347
Children's Mercy Hospitals and Clinics 2401 Gillham Road Kansas City, MO 64108		PC	Children's Mercy West Cordell D Meeks, Jr Clinic 4313 State Ave , Kansas City, KS 66102	83,214
Grants under 5000755 Minnesota Ave Kansas City, KS 66117		PC	Various grants under \$5,000	17,165
Total ▶ 3a				2,093,229


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Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Kansas Association for the Medically Underserved 1129 S Kansas Ave Topeka, KS 66612		PC	To educate individuals and communities in Wyandotte County and statewide about the ACA	25,000
Kansas City Care Clinic 3515 Broadway Kansas City, MO 64111		PC	To support primary health care services provided to Wyandotte County residents	10,000
Kansas Department of Health and Environment 1000 SW Jackson Topeka, KS 66612		GOV	To support Turner House Children's Clinic in Wyandotte County	17,500
Total 3a 				2,093,229

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 <i>Paid during the year</i>				
Kansas University Endowment Assoc - JayDoc Clinic 3300 Southwest Boulevard Kansas City, KS 66103		PC	To fund a student-run multi-disciplinary free clinic in Wyandotte County	11,000
Kansas University Endowment Assoc - Silver City PO Box 928 Lawrence, KS 66044		PC	Silver City Health Center and JayDoc free clinic in Kansas City, KS	90,000
Mid America Regional Council 600 Broadway Blvd Ste 200 Kansas City, MO 64105		PC	An initiative to assist Wyandotte County safety net clinics connect to the Kansas HIE	10,000
Total 3a				2,093,229

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 <i>Paid during the year</i>				
Samuel U Rodgers Health Center 825 Euclid Avenue Kansas City, MO 64124		PC	To support primary health care services provided to Wyandotte County residents	10,000
Southwest Boulevard Family Health Care 300-340 Southwest Boulevard Kansas City, KS 66103		PC	Safety net healthcare (family health care clinics)	317,000
Swope Health Services 12 East 12 Street Kansas City, MO 64106		PC	To support primary medical care services at their two Wyandotte County locations	195,300
Total 				2,093,229
3a				

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Name and address (home or business)				
a <i>Paid during the year</i>				
Turner House Children's Clinic 21 North 12th Street Kansas City, KS 66102				
Unified Government Health Department 619 Ann Kansas City, KS 66101				
University of Kansas Medical Center Research Institute 33901 Rainbow Boulevard Kansas City, KS 66160				
Total 3a	▶			2,093,229

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 <i>Paid during the year</i>				
Bethel Neighborhood Center 14 S 7th St Trafficway Kansas City, KS 66101		PC	To make BNC and its employees a trauma informed organization, to understand better the trauma experiences of BNC children/youth and their families, to adopt a trauma informed approach in dealing with our clients, to achieve significant change in our children/youth's behaviors, and to break the cycle of trauma	10,153
Avenue of Life 721 N 31st St Kansas City, KS 66102		PC	To increase organizational capacity to become a TISC (Trauma-informed systems of care) Center for families in Wyandotte County	10,000
Donnelly College 608 N 18th St Kansas City, KS 66102		PC	To train all faculty and staff to adopt a trauma-informed approach in	5,016
Total 3a				2,093,229

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 <i>Paid during the year</i>					
KC Healthy Kids 650 Minnesota Ave Kansas City, KS 66101					24,089
PACES Inc 6801 E Frontage RD Merriam, KS 66204					21,026
Saint Francis Community Services 803 Armstrong Ave Kansas City, KS 66101					7,332
Total 3a					2,093,229

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 <i>Paid during the year</i>					
The Family Conservancy 444 Minnesota Ave Kansas City, KS 66101					165,000
Mercy & Truth Medical Missions 721 N 31st St Kansas City, KS 66102					23,976
Grant returns 755 Minnesota Ave Kansas City, KS 66117					-164,652
Total ▶ 3a				2,093,229	

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 <i>Paid during the year</i>				
Wyandotte Economic Development Council workplace solutions 727 Minnesota Ave Kansas City, KS 66101		PC	To continue its work through its Workforce Solutions initiative in connecting WyCo residents with higher-wage jobs to result in improved health outcomes over time, and to serve as the lead agency for the Jobs & Education Work Group of the WyCo Community Health Improvement Plan	10,000
KC Healthy Kids650 Minnesota Ave Kansas City, KS 66101		PC	To support hiring a Community Navigator in Wyandotte County to work with families in	13,395
The Family Conservancy 444 Minnesota Ave Kansas City, KS 66101		PC	To teach child care care providers what trauma-informed care is and to help them understand how various traumatic events and Adverse Childhood Experiences (ACEs) can impact and impede child development, teach providers trauma-informed approaches to build resilience for children in the classroom	23,265
Total ▶				2,093,229
3a				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Saint Francis Community Services 803 Armstrong Ave Kansas City, KS 66101		PC	To increase the mental health of Wyandotte residents by providing Neurosequential Model of Therapeutics (NMT) assessments and mental health therapy sessions	43,660
Total 3a			▶	2,093,229

TY 2017 Accounting Fees Schedule**Name:** Wyandotte Health Foundation**EIN:** 48-0547722**Accounting Fees Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Accounting	51,243	25,621	0	25,622

TY 2017 Investments Corporate Bonds Schedule**Name:** Wyandotte Health Foundation**EIN:** 48-0547722**Investments Corporate Bonds Schedule**

Name of Bond	End of Year Book Value	End of Year Fair Market Value
Fixed income corporate bonds	5,946,868	5,745,477

TY 2017 Investments Government Obligations Schedule**Name:** Wyandotte Health Foundation**EIN:** 48-0547722**US Government Securities - End
of Year Book Value:**

2,658,800

**US Government Securities - End
of Year Fair Market Value:**

2,565,082

**State & Local Government
Securities - End of Year Book
Value:**

0

**State & Local Government
Securities - End of Year Fair
Market Value:**

0

TY 2017 Investments - Other Schedule**Name:** Wyandotte Health Foundation**EIN:** 48-0547722**Investments Other Schedule 2**

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
Exchanged traded and closed-end funds	AT COST	12,085,824	12,631,956
Money market mutual funds	AT COST	951,111	951,111
Mutual funds	AT COST	14,955,021	15,097,564
Asset backed securities	AT COST	2,130,252	2,064,478

TY 2017 Legal Fees Schedule**Name:** Wyandotte Health Foundation**EIN:** 48-0547722

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Legal	64	64	0	0

TY 2017 Other Assets Schedule**Name:** Wyandotte Health Foundation**EIN:** 48-0547722**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
Interest/dividends receivable	53,323	104,035	104,035
Miscellaneous assets	1,760	1,760	1,760
Deposit	30,207	30,207	30,207

TY 2017 Other Expenses Schedule**Name:** Wyandotte Health Foundation**EIN:** 48-0547722**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Investment expense	97,789	97,789	0	0
Insurance	11,105	6,219	0	4,886
Office expense	25,880	0	0	25,880
Computer repairs, service and software	22,062	0	0	22,062
Membership	22,524	0	0	22,524

TY 2017 Other Income Schedule**Name:** Wyandotte Health Foundation**EIN:** 48-0547722**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
Misc revenue	37,270	37,270	37,270

TY 2017 Other Increases Schedule**Name:** Wyandotte Health Foundation**EIN:** 48-0547722

Description	Amount
Correction of prior year unrealized gains	576,826

TY 2017 Other Liabilities Schedule**Name:** Wyandotte Health Foundation**EIN:** 48-0547722

Description	Beginning of Year - Book Value	End of Year - Book Value
Federal excise tax payable	26,172	8,830

TY 2017 Other Professional Fees Schedule**Name:** Wyandotte Health Foundation**EIN:** 48-0547722

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Other professional fees	7,190	0	0	7,190

TY 2017 Taxes Schedule**Name:** Wyandotte Health Foundation**EIN:** 48-0547722

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Federal excise tax	67,908	0	0	0