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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

2018

DLN: 93491027001090 OMB No 1545-0052

Return of Private Foundation

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

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public

						Tuspection
For	caler	ndar year 2018, or tax year beginning 10-01-20)18 , and	d ending 09-30-	2019	
		ındatıon e Health Foundation		A Employer id	entification numbe	-
•	yanaott	e nedan rodination		48-0547722		
		street (or PO box number if mail is not delivered to street address) lesota Avenue	Room/suite	B Telephone nu	mber (see instructior	ıs)
				(913) 371-4031		
		n, state or province, country, and ZIP or foreign postal code , KS 66117		C If exemption	application is pending	g, check here
-		l that apply	former public charity	D1 5		
or Cr	теск ат	I that apply ☐ Initial return ☐ Initial return of a ☐ Final return ☐ Amended return	former public charity		ganizations, check he ganizations meeting	▶ ∟
		☐ Address change ☐ Name change			k here and attach cor	
H C	neck ty	pe of organization Section 501(c)(3) exempt private	foundation		indation status was t n 507(b)(1)(A), chec	
	Section		e private foundation			
of	year (f	xet value of all assets at end from Part II, col (c), ▶\$ 38,144,425 J Accounting method Other (specify) (Part I, column (d) must	Cash Accrua		ation is in a 60-month n 507(b)(1)(B), checi	
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Davanus and			(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)				
	2	Check ► ☑ if the foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	871,331	871,331		
	5a	Gross rents				
٠.	b	Net rental income or (loss)	410 212			
Revenue	6a b	Net gain or (loss) from sale of assets not on line 10	419,212			
eve	"	Gross sales price for all assets on line 6a 4,872,016				
~	7	Capital gain net income (from Part IV, line 2)		419,212		
	8	Net short-term capital gain				
	10a	Gross sales less returns and allowances				
	ь	Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	40,061	40,061	40,061	
	12	Total. Add lines 1 through 11	1,330,604	1,330,604	40,061	
	13	Compensation of officers, directors, trustees, etc	151,750	60,700		91,050
	14 15	Other employee salaries and wages	135,783 65,955	40,735 27,701	0	95,048 38,254
Ses	16a	Legal fees (attach schedule)	9 38	38		30,23-
<u> </u>	b	Accounting fees (attach schedule)	9 53,703	26,852	0	26,852
Ě	c c	Other professional fees (attach schedule)	13,872	0	0	13,872
and Administrative Expenses	17	Interest				
stra	18	Taxes (attach schedule) (see instructions)	22,916	0	0	(
ੂ	19	Depreciation (attach schedule) and depletion	39,080	0	0	
Ē	20	Occupancy	50,116	8,019	0	42,097
ק פר	21	Travel, conferences, and meetings	15,175	0	0	15,175
ਰ ਹ	22	Printing and publications	1,271 146,520	82,788		1,271
Ē	24	Total operating and administrative expenses.	25			
Operating	- '	Add lines 13 through 23	696,179	246,833	0	387,351
ō	25	Contributions, gifts, grants paid	1,519,427			1,380,680
	26	Total expenses and disbursements. Add lines 24 and 25	2,215,606	246,833	0	1,768,031
	27	Subtract line 26 from line 12	2,213,006	240,033	0	1,700,03
	а	Excess of revenue over expenses and	205 255			
	ь	disbursements Net investment income (if negative, enter -0-)	-885,002	1,083,771		
	c	Adjusted net income (If negative, enter -0-)		_,,555,.71	40,061	
_					·	

39,326,277

1,431,550

1,463,873

37.862.404

37,862,404

39.326.277

23,493

8,830

136,002

ر**چ**و

<u>ر</u>چه

370,114

38,680,598

1,531,364

28,105

22,529

1,581,998

37.098.600

37,098,600

38.680.598

37,862,404

37,098,600

37,098,600

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-885,002

121,198

1

2

3

4

5 6 97,168

2,829,249

6,044,913

28,769,887

370,114

97,168

38,144,425

		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 ▶			
sets	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
As	10a	Investments—U S and state government obligations (attach schedule)	2,658,800	% J	2,773,691
	ь	Investments—corporate stock (attach schedule)			
	С	Investments—corporate bonds (attach schedule)	5,946,868	% J	5,881,215
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	30,122,208	% J	29,525,316
	14	Land, buildings, and equipment basis ► 1,082,472			

Less accumulated depreciation (attach schedule) ▶ 712,358

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). .

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here

Capital stock, trust principal, or current funds

Paid-in or capital surplus, or land, bldg, and equipment fund

Retained earnings, accumulated income, endowment, or other funds

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

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances (see instructions) . . .

Total assets (to be completed by all filers—see the

Other assets (describe > _

Grants payable

Unrestricted

Temporarily restricted . Permanently restricted .

and complete lines 27 through 31.

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)

Deferred revenue .

Other liabilities (describe .

instructions Also, see page 1, item I)

Accounts payable and accrued expenses .

15

16

17

18

19

20

21

22

23

24

25

26

27 28

29

30

31 Part III

2

3

Liabilities

Net Assets or Fund Balances

	pe the kind(s) of property sold (e g , arehouse, or common stock, 200 shs	•	How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a			P		
b					
c					
d					
	(f)	(g	,	(1	h)
(e)	Depreciation allowed	Cost or oth			r (loss)
Gross sales price	(or allowable)	plus expen	se of sale	(e) plus (f) minus (g)
a 4,87	72,016		4,452,804	<u> </u>	419,212
b					
С					
d					
e					
Complete only for asset	s showing gain in column (h) and ow	ned by the foundation on	12/31/69	(I)
· · · · · ·	(i)	(k			h) gain minus
(i) FMV as of 12/31/69	Adjusted basis	Excess of	f col (ı)		less than -0-) or
	as of 12/31/69	over col (ງ), if any	Losses (fro	om col (h))
a					419,212
b					_
c					
d					
e					
2 Capital gain net income	e or (net capital loss)	If gain, also enter in Pari If (loss), enter -0- in Par		2	419,212
·	gain or (loss) as defined in sections : art I, line 8, column (c) (see instruction	ons) If (loss), enter -0-	}	3	419,212
Part V Qualification	Under Section 4940(e) for Re	educed Tax on Net I	nvestment Inc	come	
For optional use by domestic p	private foundations subject to the sec	ction 4940(a) tax on net i	investment incom	e)	
f section 4940(d)(2) applies, l	eave this part blank			_	_
	ne section 4942 tax on the distributal ot qualify under section 4940(e) Do		the base period?	,	es 🗹 No
 Enter the appropriate ar 	nount in each column for each year,	see instructions before m	naking 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 rati (col (b) divided by co	
2017	2,425,613	4	10,202,238	•	0 060335
2016	2,104,548	3	38,891,248		0 054114
2015	2,254,183		38,405,580		0 058694
2014	2,552,765	4	11,845,514		0 061005
2013	2,557,130	4	12,613,522		0 060007
2 Total of line 1, column (d)		2		0 294155
· ·	o for the 5-year base period—divide t		, or by the		
number of years the four	ndation has been in existence if less	than 5 years	3		0 058831
	oncharitable-use assets for 2018 from	•	4		37,570,754
5 Multiply line 4 by line 3			5		2,210,325
	ent income (1% of Part I, line 27b)		6	10,838	
7 Add lines 5 and 6			7		2,221,163
	ions from Part XII, line 4 ,				1,768,031
If line 8 is equal to or grinstructions	eater than line 7, check the box in Pa	art VI, line 1b, and compl	ete that part using	g a 1% tax rate Se	e the Part VI

Page **6**

Pa	Statements Regard	ling Activities for Which	n Form 4720 May Be	Required (continued)			
Ба	During the year did the foundation p	pay or incur any amount to				Yes	No
	(1) Carry on propaganda, or otherw	rise attempt to influence legis	lation (section 4945(e))?	☐ Yes ✓	No		
	(2) Influence the outcome of any sp	pecific public election (see sec	tion 4955), or to carry	□ fes ⊡	NO		
	on, directly or indirectly, any voter registration drive?						
	(3) Provide a grant to an individual	for travel, study, or other sim	nılar purposes?	Yes V	No		
	(4) Provide a grant to an organizati		· -	d			
	in section 4945(d)(4)(A)? See in			· · · · Yes 🗹	No		
	(5) Provide for any purpose other th	- ·	• • • • • • • • • • • • • • • • • • • •				
L	educational purposes, or for the			∟ Yes 🖭	No		
D	If any answer is "Yes" to 5a(1)–(5), Regulations section 53 4945 or in a	=			5b		
	Organizations relying on a current n				30		
С	If the answer is "Yes" to question 5a						
٠	tax because it maintained expenditu		•				
	If "Yes," attach the statement require			· · □ Yes □	No		
= -		· -		ume an			
5a	Did the foundation, during the year,			uilis oii			
h	a personal benefit contract? Did the foundation, during the year,			Yes V	No 6b		No
ь	If "Yes" to 6b, file Form 8870	pay premiums, directly or mo	ulrectly, on a personal be	enent contract?	80		NO
7a	At any time during the tax year, was	the foundation a party to a	prohibited tay chalter tra	neaction? \square			
	If yes, did the foundation receive an			∟ tes 🖭	No 7b		
	Is the foundation subject to the sect				/6		
,	excess parachute payment during th						
	<u> </u>			Yes 🗸	No L		<u> </u>
Pa	and Contractors	Officers, Directors, Trus	tees, Foundation Ma	anagers, Hignly Paid En	npioyees	,	
1	List all officers, directors, trustee				1		
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plans and	(e) Expe		
	. ,	devoted to position	-0-)	deferred compensation	other a	llowand	ces
ee .	Additional Data Table						
2	Compensation of five highest-pa	id employees (other than t	hose included on line	1—see instructions). If nor	ne, enter "	NONE	."
_ \	Name - and address of angle amounts.	(b) Title, and average		(d) Contributions to	(a) Funan		
a)	Name and address of each employee more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expen other al		
		devoted to position		compensation			
ON	E						
ota	I number of other employees paid over	er \$50,000					(
				L	Form 00	O-DE	(2019

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Part VIII Information About Officers, Directors, Trus and Contractors (continued)	stees, Foundation Managers, Highly Paid E	imployees,
3 Five highest-paid independent contractors for professiona	l services (see instructions). If none, enter "NO	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Creative Planning	Investment management	75,464
5454 W 110th		
Overland Park, KS 66211		
	_	
Total number of others receiving over \$50,000 for professional service	es	0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Incorpanizations and other beneficiaries served, conferences convened, research papers		Expenses
1 N/A	ers produced, etc	0
2		
_ <u></u>		
3		
4		<u> </u>
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	<u> </u>	<u> </u>
		Form 990-PF (2018)

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

Amounts set aside for specific charitable projects that satisfy the

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

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

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

3

4

5

2

За 3h

4

5

1.768.031

1.768.031

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1,768,031

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145,026

(d)

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Part XIII	Uı

ndistributed Income (see instructions)

b Total for prior years

a From 2013.

b From 2014. c From 2015. . .

d From 2016.

e From 2017.

f Total of lines 3a through e.

d Applied to 2018 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

5 Excess distributions carryover applied to 2018

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 2017 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 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 2013 not

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . .

c Excess from 2016. . . .

d Excess from 2017. . . e Excess from 2018. . .

b Excess from 2015. .

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

6 Enter the net total of each column as

indicated below:

4 Qualifying distributions for 2018 from Part XII, line 4 > \$ 1,768,031 a Applied to 2017, 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).

1 Distributable amount for 2018 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only.

Excess distributions carryover, if any, to 2018

454.011 516,791

370,719

516.791 344,290

199.108

370.719

344 290 199,108

1.884.919

(a)

Corpus

145,026

1,739,893

308,985

1,430,908

(b)

Years prior to 2017

(c)

2017

orr	n 990-PF (2018)					Page 10
1	art XIV Private Operating Found	ations (see ınstr	uctions and Part V	'II-A, question 9)		
	If the foundation has received a ruling or defoundation, and the ruling is effective for 20	18, enter the date	of the ruling	▶∟_		
b	Check box to indicate whether the organization	on is a private oper	atıng foundatıon des	cribed in section L	l 4942(j)(3) or ∟	4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(c) rotar
	year listed					
b	85% of line 2a					
С	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					
е	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					
а	"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					
С	"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					
Pa	rt XV Supplementary Information			foundation had	\$5,000 or more i	n
	assets at any time during th Information Regarding Foundation Mana		tructions.)			
a	List any managers of the foundation who have		than 2% of the total	contributions receiv	ved by the foundation	ı
	before the close of any tax year (but only if	_				
b	List any managers of the foundation who own ownership of a partnership or other entity) of				arge portion of the	
2	Information Regarding Contribution, Gra					
			• • • •	-		
	Check here ▶ ☐ If the foundation only mak unsolicited requests for funds If the foundation					
	other conditions, complete items 2a, b, c, ai			als of organizations	under	
а	The name, address, and telephone number of	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 sub					
	The online application will be available six w	eeks prior to the de	adline Complete and	a submit the online o	grant application	
С	Any submission deadlines	to and a sub-		- Fd6.3		
	Proposals must be submitted via the Founda		•	·		
d	Any restrictions or limitations on awards, sur factors	, , , , , ,	·	·	·	
	To be considered as a potential grantee, you County or Johnson County Kansas, or Jackson					
	residents 4 In general, the Wyandotte Heal	th Foundation will r	not award grants to t	he following 1 dire	ct support to individu	uals for projects or
	scholarships 2 budget deficits or debt reduc					
	influence legislation or support candidates for no minimum or maximum size for grants. Ge				ampaigns / Medical	research There is



Part XVI	I-A Analysis of Income-Producing			I		rage 12
Enter gross	amounts unless otherwise indicated	Unrelated b	usiness income (b)	Excluded by section (c)	n 512, 513, or 514 (d)	(e) Related or exempt function income
1 Program	n service revenue	Business code	Amount	Exclusion code	Amount	(See instructions)
	and contracts from government agencies					
	t on savings and temporary cash					
	nds and interest from securities			14	871,331	
	financed property					
	ebt-financed property					
7 Other i	ital income or (loss) from personal property nvestment income.					
8 Gain or invento	(loss) from sales of assets other than			14	419,212	
	ome or (loss) from special events					
l 0 Gross p l 1 Other r	profit or (loss) from sales of inventory					
a Misc re			0		0	40,061
						,
с						
	al Add columns (b), (d), and (e).		0		1,290,543	40,06
	Add line 12, columns (b), (d), and (e)				1,290,545	1,330,604
(See wo	orksheet in line 13 instructions to verify calcu	lations)				
Part XVI						
Line No. ▼	Explain below how each activity for which the accomplishment of the foundation's exinstructions)					
1a	Refunds and miscellaneous revenues related	I to exempt purp	ose			
	1				Fo	rm 990-PF (2018

. ,	/
П	Information Regarding Transfers To and Transactions and Relationships With Noncharitable
	Exempt Organizations

Part XVII	Exempt Organi	zations			io ana itolatio		.c.iai itabic		
1 Did the or (c) (other	rganization directly or in than section 501(c)(3)	directly engage	in any of the	following with any 527, relating to pol	other organization	n described in sections?	on 501	Yes	No
a Transfers	from the reporting foun	dation to a nonc	harıtable ex	empt organization	of				
(1) Cash									No
(2) Othe	er assets						. 1a(2)		No
b Other tran	nsactions								
(1) Sales	s of assets to a nonchari	itable exempt or	ganızatıon.				. 1b(1)		No
(2) Purcl	hases of assets from a n	oncharitable exe	empt organiz	zation			1b(2)		No
(3) Rental of facilities, equipment, or other assets							1b(3)		No
(4) Reimbursement arrangements							. 1b(4)		No
` '	s or loan guarantees.						. 1b(5)		No
(6) Perfo	rmance of services or m	embership or fui	ndraising sol	licitations			. 1b(6)		No
-	f facılıtıes, equipment, n	-	•						No
of the god	wer to any of the above ods, other assets, or ser nsaction or sharing arra	vices given by th	ne reporting	foundation If the f	oundation receive	d less than fair mark	ket value		
(a) Line No	(b) Amount involved	(c) Name of non	charitable eve	mpt organization	(d) Description of	transfers, transactions,	and sharing arra	ındemen	ts
LINE INC	(b) ranount involved	(c) Nume of hom	charteable exc	inpe organization	(a) Bescription of	cransiers, transactions,	una sharing arre	ingemen	
described	ndation directly or indire in section 501(c) (other complete the following se	than section 50 chedule	01(c)(3)) or i	in section 527? .		□Ye			
	(a) Name of organization	on	(1	b) Type of organizatio	n	(c) Description	of relationship		
of m	ler penalties of perjury, ny knowledge and belief ch preparer has any kno	, it is true, corre							
Sign Here	*****			2020-01-24	*****		May the IRS d return with the prepa		
	Signature of officer or to	rustee		Date	Title		below (see instr)?	✓ Yes [□No
		Print/Type preparer's name Prepa		eparer's Signature		Check if self- employed ▶ □	PTIN P0064	2974	
Paid Preparer	Stanley H House C	PA se Park Dobratz	8. Wichia - D	2020-01-2					
Jse Only		se Park Dodratz	a wiedier PC	-		F	Firm's EIN ▶43	-15622	209
7		5 W 47th Street	Suite 301						
	Ka	insas City, MO 6	54112			P	Phone no (816) 931-3393		

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 William C Tempel Director 0 0 1 00 755 Minnesota Avenue Kansas City, KS 66117 Trudie Hall Chairperson 0 0 n 1 00 755 Minnesota Avenue Kansas City, KS 66117 Ramon Murguia 0 0 Director 1 00 755 Minnesota Avenue Kansas City, KS 66117 Charles W Thurston Jr 0 0 Treasurer 1 00 755 Minnesota Avenue Kansas City, KS 66117 Raymond L Daniels 0 0 Director 1 00 755 Minnesota Avenue Kansas City, KS 66117 Lisa Gonzales Director 0 0 0 1 00 755 Minnesota Avenue Kansas City, KS 66117 Leon C Logan 0 0 Director 0 1 00 755 Minnesota Avenue Kansas City, KS 66117 James M White 0 0 Director 1 00 755 Minnesota Avenue Kansas City, KS 66117 Clarence L Small 0 0 0 Secretary 1 00 755 Minnesota Avenue Kansas City, KS 66117 Cathy Harding President and CEO 151,750 19,738 0 40 00 755 Minnesota Avenue Kansas City, KS 66117 Dr Karol Davis First Vice Chairman 0 0 1 00 755 Minnesota Avenue Kansas City, KS 66117 Lisa Garcia-Stewart 0 0 Director 1 00 755 Minnesota Avenue Kansas City, KS 66117 Wayne Sims Second Vice Chairman 0 0 1 00 755 Minnesota Avenue Kansas City, KS 66117 0 Irene Caudillo Director 0 0 1 00 755 Minnesota Avenue Kansas City, KS 66117 Carol Levers Director 0 0

1 00

755 Minnesota Avenue Kansas City, KS 66117

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 -0-1 employee henefit plans

	(b) devoted to position	,	and deferred compensation	
Jayson Strickland	Director	0	0	0
	1 00			

755 Minnesota Avenue

Kansas City, KS 66117

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			
Caritas Clinic Inc636 Tauromee Kansas City, KS 66101	PC	Primary medical care for uninsured of Wyandotte County	60,000
Caritas Clinic Inc636 Tauromee Kansas City, KS 66101	PC	Continue guiding, planning and implementing a trauma-informed organization and staff, including environmental safety, staff/leadership training, as well as staff self-care, to advance to a trauma-responsive	46,398

		environmental safety, staff/leadership training, as well as staff self-care, to advance to a trauma-responsive organization on the TIC continuum	
Children's Mercy Hospitals and Clinics	PC	Support board diversity through	5,00

		organization on the TIC continuum	
Children's Mercy Hospitals and Clinics 2401 Gillham Road Kansas City, MO, 64108	PC	Support board diversity through training and recruitment events	5,000

		continuum	
Children's Mercy Hospitals and Clinics 2401 Gillham Road Kansas City, MO 64108		Support board diversity through training and recruitment events	5,00

1,380,680

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)

a Paid during the year			
El Centro650 Minnesota Ave Kansas City, KS 66101		Support the creation of a plan for the Census implementation in	15,000

Kansas City, KS 66101		Wyandotte County	
Grant returns755 Minnesota Ave Kansas City, KS 66117	PC	Grant return	-56

Grant returns755 Minnesota Ave Kansas City, KS 66117	PC	Grant return	-56,194
Grants under 5000755 Minnesota Ave	PC	Various grants under \$5,000	9,25

Kansas City, KS 66117			,
Grants under 5000755 Minnesota Ave	PC	Various grants under \$5,000	9,257

irants under 5000755 Minnesota Ave ansas City, KS 66117	PC	Various grants under \$5,000	9,25

1,380,680

Grants under 5000755 Minnesota Ave	F	PC	Various grants under \$5,000	9
Kansas City, KS 66117				

sas City, KS 66117		1	. ,

Total .

or substantial contributor

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			
Historic NE Midtown Assoc PO Box 172175 Kansas City, KS 66117	PC	To support their efforts to establish a grocery store in the northeast area of Wyandotte	10,000

		County	
Kansas Association for the Medically Underserved 1129 S Kansas Ave Topeka, KS 66612		To educate individuals and communities in Wyandotte County and statewide about the ACA	20,000

Underserved 1129 S Kansas Ave Topeka, KS 66612	PC	communities in Wyandotte County and statewide about the ACA	20,000
Kansas City KS Public Schools 2010 N 59th Street	GOV	Provide training and support to create a trauma-informed school	175,000

1129 S Kansas Ave Topeka, KS 66612		County and statewide about the ACA	
Kansas City KS Public Schools 2010 N 59th Street	GOV	Provide training and support to create a trauma-informed school	175,00
Kansas City, KS 66104		district	

Торска, ко осота		ACA	I
Kansas City KS Public Schools 2010 N 59th Street Kansas City, KS 66104	GOV	Provide training and support to create a trauma-informed school district	175,00
Total		▶ 3a	1,380,680

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 cubetantial contributor

	or substantial contributor			
a Paid during the year				
Kansas City Medical Society Fndt 10000 Marshall Drive Lenexa, KS 66215		PC	Provide support for increasing board diversity	5,000

Lenexa, No collo			
Kansas Department of Health and Environment 1000 SW Jackson Topeka, KS 66612	GOV	To Support Turner House Children's Clinic School Based Dental program in Wyandotte County	17,500
	DC	6 11 41 1	66.067

Environment 1000 SW Jackson Topeka, KS 66612	GOV	Children's Clinic School Based Dental program in Wyandotte County	17,300
Kansas University Endowment Assoc - Project Eagle PO Box 928 Lawrence, KS 66044	PC	Support the Attachment Biobehavioral Catch-up (ABC) Program which helps caregivers to provide predictable, stable home environments	66,067

Торека, к.5. 66612		County	<u> </u>
Kansas University Endowment Assoc - Project Eagle PO Box 928 Lawrence, KS 66044		Support the Attachment Biobehavioral Catch-up (ABC) Program which helps caregivers to provide predictable, stable home environments	66,06
Total	 	▶ 3a	1,380,680

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 KU EndowmentPO Box 928 PC Support the Bulldoc school-50,000 Lawrence, KS 66044 based clinic addressing persistent social and behavioral health needs of traumatized adolescents

Mercy & Truth Medical Missions 721 N 31st St Kansas City, KS 66102	PC	To receive an assessment and training to become a trauma informed clinic	40,335
PACES Inc6801 E Frontage RD Merriam, KS 66204	PC	To provide schools and organizations in Wyandotte County with specialized Trauma-Informed Care (TIC) trainings to increase awareness and understanding about how trauma and high ACE scores impact children and their families	69,760
Total		▶ 3a	1,380,680

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 contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year Southwest Boulevard Family Health PC Provide direct primary care to 90,000 Care Wyandotte County residents 300-340 Southwest Boulevard

Kansas City, KS 66103			
Swope Health Services12 East 12 Street Kansas City, MO 64106	PC	To support primary medical care services at their two Wyandotte County locations	55,300
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	50,000

444 Minnesota Ave		providers what trauma-informed	
Kansas City, KS 66101		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	

▶ 3a

1,380,680

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

The Family Conservancy 444 Minnesota Ave Kansas City, KS 66101	PC	To expand access of full-day, full year child care and increase the quality of care through three programming components Capacity Building, Systems Support, and Professional and Educational Incentives	43,100
Turner House - Vibrant Health 21 North 12th Street Kansas City, KS 66102	PC	Full integration of trauma informed principles into all clinic practices providing positive	38,267

		Educational Incentives	
Furner House - Vibrant Health 21 North 12th Street Kansas City, KS 66102	PC	Full integration of trauma informed principles into all clinic practices providing positive impact in the lives with whom the clinic serves	38,267
Furner House Clinic21 North 12th Street Kansas City, KS 66102	PC	Expanding Vibrant Health integrated and outreach	87,140

		the clinic serves	
Turner House Clinic21 North 12th Street Kansas City, KS 66102	PC	Expanding Vibrant Health integrated and outreach behavioral health services	87,140
Total		▶ 3a	1,380,680

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			
Turner House- Vibrant Health 21 North 12th Street Kansas City, KS 66102	PC	Provide direct medical, dental, and mental health care services to Wyandotte County residents at their multiple clinic locations	59,875

isas City, KS 66102		to Wyandotte County residents at their multiple clinic locations	
fied Government Health Department Ann Isas City, KS 66101	GOV	Support the Radiology Voucher Program to assist Wyandotte County residents	

Jnified Government Health Department 519 Ann Kansas City, KS 66101	GOV	Support the Radiology Voucher Program to assist Wyandotte County residents	
United Way of WyCo434 Minnesota Ave Kansas City, KS 66117	PC	Support the lead agencies in implementation of the Community Health Improvement	10

619 Ann Kansas City, KS 66101		Program to assist Wyandotte County residents	
United Way of WyCo434 Minnesota Ave Kansas City, KS 66117	PC	Support the lead agencies in implementation of the Community Health Improvement	1

ansas City, KS 66101		County residents	
United Way of WyCo434 Minnesota Ave Cansas City, KS 66117	PC	Support the lead agencies in implementation of the Community Health Improvement Plan	100,000

50,000

Kansas City, KS 66117		implementation of the Community Health Improvement Plan	

		Plan	
Total		▶ 3a	1.380.680

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				
Wyandot Behavioral Health Network 757 Armstrong Kansas City, KS 66101		PC	Support Alive & Thrive Initiative creating a trauma-informed environment that fosters	250,000

Kansas City, KS 66101		prevention, healing and resilience in Wyandotte County	
WyJo Cares6419 Metcalf Ave Mission, KS 66202		To support and connect Wyandotte County residents and uninsured clients with volunteer	23,87

		resilience in Wyandotte County	
WyJo Cares6419 Metcalf Ave Mission, KS 66202	PC	To support and connect Wyandotte County residents and uninsured clients with volunteer	23,8

Total . .

/yJo Cares6419 Metcalf Ave	PC	To support and connect	23,875
ission, KS 66202		Wyandotte County residents and	
		uninsured clients with volunteer	
		specialist physicians	

1,380,680

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TY 2018 Accounting Fe	ees Schedule			_
	Name: Wyandot EIN: 48-0547	te Health Foundatio 722	n	
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Accounting	53,703	26,852	0	26,852

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TY 2018 Investments Corporate Bonds Schedule					
Name: \	Wyandotte Healtl	h Foundation			

6,044,913

5,881,215

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

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491027001090	
TY 2018 Investments Government Obligations Schedule				
Name:	Wyandotte He	alth Foundation		
EIN:	48-0547722			
US Government Securities - End of Year Book Value:		2,773,691		
US Government Securities - End of Year Fair Market Value:		2,829,249		
State & Local Government Securities - End of Year Book Value:		0		
State & Local Government Securities - End of Year Fair Market Value:		0		

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TY 2018 Investments - Other S	Schedule	

Name: Wyandotte Health Foundation

	,
FTN:	48-0547722

Investments Other Schedule 2					
Exchanged traded and closed-end funds	AT COST	11,065,804	11,673,883		
Money market mutual funds	AT COST	530,167	530,167		
Mutual funds	AT COST	16,227,542	14,866,065		
Asset backed securities	AT COST	1,701,803	1,699,772		

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DLN	l: 93491027001090
TY 2018 Legal Fees Schedul	le			
	ne: Wyandotte H N: 48-0547722	Health Foundation		
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Legal	38	38	0	0

har Accate Schadul	

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	104,035	64,792	64,792	
Miscellaneous assets	1,760	1,932	1,932	
Deposit	30,207	30,444	30,444	

DLN: 93491027001090

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TY 2018 Other Expenses Sche	edule				
EIN:	Wyandotte Heal	lth Foundation			
Other Expenses Schedule Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
Investment expense	76,094	76,094	0	0	

19,857

16,025

22,590

6,694

0

5,260

19,857

16,025

22,590

Insurance

Office expense

Membership

Computer repairs, service and software

As Filed Data -

Name: Wyandotte Health Foundation

Revenue And

Expenses Per Books

40,061

40 054777

	ETIM:	48-054/722	
a a			

Description

efile GRAPHIC print - DO NOT PROCESS

Misc revenue

Other Income Schedule	
	-

Net Investment

Income

40,061

DLN: 93491027001090

Adjusted Net Income

40,061

Description		Amount	
EIN:	48-0547722		
Name:	Wyandotte He	alth Foundation	
TY 2018 Other Increases Sche	edule		
efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491027001090

Correction of prior year unrealized gains

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		D	LN: 93491027001090		
TY 2018 Other Liabilities Schedule						
Name:	Wyandotte He	alth Foundat	ion			
EIN:	48-0547722					
Description	n		Beginning of Year - Book Value	End of Year - Book Value		
Federal excise tax payable			8,830	22,529		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLI	N: 93491027001090	
TY 2018 Other Professional Fees Schedule					
Name: Wyandotte Health Foundation					
EIN: 48-0547722					
Category	Amount	Net Investment	Adjusted Net	Disbursements	

			1	
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable
				Purposes

13,872

Other professional fees

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	-]	DLN	N: 93491027001090	
TY 2018 Taxes Schedule					
Name: Wyandotte Health Foundation EIN: 48-0547722					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

Federal excise tax