

EXTENDED TO MARCH 16, 2020

Return of Private Foundation

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

OMB No 1545-0052

2018

Open to Public Inspection

Form 990-PF

Department of the Treasury
Internal Revenue ServiceDo not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

1904

For calendar year 2018 or tax year beginning MAY 1, 2018, and ending APR 30, 2019

Name of foundation
MEDTRONIC GLOBAL HEALTH FOUNDATION

Number and street (or P.O. box number if mail is not delivered to street address)
710 MEDTRONIC PKWY

City or town, state or province, country, and ZIP or foreign postal code
MINNEAPOLIS, MN 55432

G Check all that apply:
☐ Initial return
☐ Final return
☐ Address change
☐ Initial return of a former public charity
☐ Amended return
☐ Name change

H Check type of organization
☒ Section 501(c)(3) exempt private foundation
☐ Section 4947(a)(1) nonexempt charitable trust
☐ Other taxable private foundation

I Fair market value of all assets at end of year (from Part II, col. (c), line 16)
\$ 652,327.

J Accounting method:
☐ Cash
☒ Accrual
☐ Other (specify) _____

A Employer identification number
81-2307516

B Telephone number
763-505-2643

C If exemption application is pending, check here ☐

D 1. Foreign organizations, check here ☐
 2. Foreign organizations meeting the 85% test, check here and attach computation ☐

E If private foundation status was terminated under section 507(b)(1)(A), check here ☐

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

Part III Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1	Contributions, gifts, grants, etc., received	9,727,033.		N/A	
2	Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
3	Interest on savings and temporary cash investments				
4	Dividends and interest from securities				
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10				
b	Gross sales price for all assets on line 6a				
7	Capital gain net income (from Part IV, line 2)		0.		
8	Net short-term capital gain				
9	Income modifications				
10a	Gross sales less returns and allowances				
b	Less: Cost of goods sold				
c	Gross profit or (loss)				
11	Other income				
12	Total. Add lines 1 through 11	9,727,033.	0.		
13	Compensation of officers, directors, trustees, etc.	0.	0.		0.
14	Other employee salaries and wages				
15	Pension plans, employee benefits				
16a	Legal fees				
b	Accounting fees				
c	Other professional fees	3,563,343.	0.		3,521,501.
17	Interest				
18	Taxes				
19	Depreciation and depletion				
20	Occupancy				
21	Travel, conferences, and meetings	99,202.	0.		99,202.
22	Printing and publications				
23	Other expenses				
24	Total operating and administrative expenses. Add lines 13 through 23	3,662,545.	0.		3,620,703.
25	Contributions, gifts, grants paid	6,020,032.			6,020,032.
26	Total expenses and disbursements. Add lines 24 and 25	9,682,577.	0.		9,640,735.
27	Subtract line 26 from line 12	44,456.			
a	Excess of revenue over expenses and disbursements		0.		
b	Net investment income (if negative, enter -0-)		0.		
c	Adjusted net income (if negative, enter -0-)			N/A	

3/3
SCANNED SEP 17 2020

Part III Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing	581,328.	652,327.	652,327.
	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			
	7 Other notes and loans receivable ▶			
	Less: allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
	Liabilities	11 Investments - land, buildings, and equipment basis ▶		
Less: accumulated depreciation ▶				
12 Investments - mortgage loans				
13 Investments - other				
14 Land, buildings, and equipment: basis ▶				
Less: accumulated depreciation ▶				
15 Other assets (describe ▶)				
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)		581,328.	652,327.	652,327.
17 Accounts payable and accrued expenses				
18 Grants payable		548,500.	540,594.	
Net Assets or Fund Balances	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶ SERVICES PAYABLE)	0.	49,748.	
	23 Total liabilities (add lines 17 through 22)	548,500.	590,342.	
	24 Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31 <input checked="" type="checkbox"/>			
	25 Unrestricted	32,828.	61,985.	
26 Temporarily restricted				
27 Permanently restricted				
28 Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input type="checkbox"/>				
29 Capital stock, trust principal, or current funds				
30 Paid-in or capital surplus, or land, bldg, and equipment fund				
31 Retained earnings, accumulated income, endowment, or other funds				
32 Total net assets or fund balances	32,828.	61,985.		
33 Total liabilities and net assets/fund balances	581,328.	652,327.		

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	32,828.
2 Enter amount from Part I, line 27a	2	44,456.
3 Other increases not included in line 2 (itemize) ▶	3	0.
4 Add lines 1, 2, and 3	4	77,284.
5 Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 2	5	15,299.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	61,985.

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Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a			
b	NONE		
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			
b			
c			
d			
e			

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

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c). If (loss), enter -0- in Part I, line 8		3	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes ☒ No

If "Yes," the foundation doesn't qualify under section 4940(e). Do not complete this part.

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2017	11,364,265.	0.	.000000
2016	11,346,429.	0.	.000000
2015			
2014			
2013			

2 Total of line 1, column (d)	2	.000000
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	.000000
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	
5 Multiply line 4 by line 3	5	0.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	0.
7 Add lines 5 and 6	7	0.
8 Enter qualifying distributions from Part XII, line 4 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	8	9,640,735.

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

1a Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1.
Date of ruling or determination letter _____ (attach copy of letter if necessary-see instructions)

b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b

c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)

2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)

3 Add lines 1 and 2

4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)

5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-

6 Credits/Payments

a 2018 estimated tax payments and 2017 overpayment credited to 2018

b Exempt foreign organizations - tax withheld at source

c Tax paid with application for extension of time to file (Form 8868)

d Backup withholding erroneously withheld

7 Total credits and payments. Add lines 6a through 6d

8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached

9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed

10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid

11 Enter the amount of line 10 to be: Credited to 2019 estimated tax

Refunded

Part VII-A Statements Regarding Activities

1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?

b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition. If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.

c Did the foundation file Form 1120-POL for this year?

d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year
(1) On the foundation. \$ 0. (2) On foundation managers. \$ 0.

e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ 0.

2 Has the foundation engaged in any activities that have not previously been reported to the IRS?
If "Yes," attach a detailed description of the activities.

3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes

4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?

b If "Yes," has it filed a tax return on Form 990-T for this year?

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?
If "Yes," attach the statement required by General Instruction T

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either
• By language in the governing instrument, or
• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?

7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV

8a Enter the states to which the foundation reports or with which it is registered. See instructions. MN

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

Part VII-A Statements Regarding Activities (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11	X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>FOUNDATION.MEDTRONIC.COM</u>	13	X
14 The books are in care of ► <u>THE FOUNDATION</u> Telephone no. ► <u>763-505-2643</u> Located at ► <u>710 MEDTRONIC PKWY, MINNEAPOLIS, MN</u> ZIP+4 ► <u>55432</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year	15	N/A
16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ►	16	X

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

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

	Yes	No
1a During the year, did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here	1b	X
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If "Yes," list the years ►		
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.)	2b	N/A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ►		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018)	3b	N/A
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b	X

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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year, did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions

☒ Yes ☐ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions
Organizations relying on a current notice regarding disaster assistance, check here☐**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

SEE STATEMENT 4

☒ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?
If "Yes" to 6b, file Form 8870☐ Yes ☒ No**7a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 3		0.	0.	0.

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

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

0

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

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
ABT ASSOCIATES 55 WHEELER ST, CAMBRIDGE, MD 02138	PROGRAM COORDINATOR OF GRANTEE PARTNERS	2133538.
PUBLIC HEALTH INSTITUTE 555 12TH ST, 10TH FLOOR, OAKLAND, CA 94607	PROGRAM IMPLEMENTATION	1067956.
RABIN MARTIN 104 W 40TH ST, 3RD FLOOR, NEW YORK, NY 10018	RESEARCH REPORT ON HEALTHCARE DELIVERY	100,000.
MATCHBOXOLOGY - 70 7TH AVE PARKTOWN N, JOHANNESBURG, SOUTH AFRICA 2193	RESEARCH REPORT ON HEALTHCARE DELIVERY	99,496.
UNIVERSITY OF WASHINGTON - 4300 ROOSEVELT WAY NE STE 300, SEATTLE, WA 98195	EVALUATE & VALIDATE PARTNER DATA	89,358.
Total number of others receiving over \$50,000 for professional services		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NONE	
	0.
2	
3	
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 NONE	
	0.
2	
All other program-related investments. See instructions.	
3 NONE	
	0.
Total. Add lines 1 through 3	0.

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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	0.
b	Average of monthly cash balances	1b	110,683.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	110,683.
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	110,683.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) STMT 5	4	110,683.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.

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	0.
2a	Tax on investment income for 2018 from Part VI, line 5	2a	
b	Income tax for 2018. (This does not include the tax from Part VI.)	2b	
c	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	0.
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	0.

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	9,640,735.
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	9,640,735.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	9,640,735.

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

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			0.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2018				
a From 2013				
b From 2014				
c From 2015				
d From 2016				
e From 2017				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2018 from Part XII, line 4: ► \$ 9,640,735.				
a Applied to 2017, 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 2018 distributable amount				0.
e Remaining amount distributed out of corpus	9,640,735.			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	9,640,735.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount - see instructions		0.		
e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019				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)	9,640,735.			
8 Excess distributions carryover from 2013 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019 Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2014				
b Excess from 2015				
c Excess from 2016				
d Excess from 2017				
e Excess from 2018				

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

Recipient Name and address (home or business)	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
a Paid during the year				
SEE ATTACHED STATEMENT				6,020,032.
Total			3a	6,020,032.
b Approved for future payment				
NONE				
Total			3b	0.

Form 990-PF (2018)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
		(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1	Program service revenue					
a	_____					
b	_____					
c	_____					
d	_____					
e	_____					
f	_____					
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash 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 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	_____					
b	_____					
c	_____					
d	_____					
e	_____					
12	Subtotal. Add columns (b), (d), and (e)		0.		0.	0.
13	Total. Add line 12, columns (b), (d), and (e)					0.

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

- | <p>1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)(3) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?</p> <p>a Transfers from the reporting foundation to a noncharitable exempt organization of:</p> <p>(1) Cash</p> <p>(2) Other assets</p> <p>b Other transactions:</p> <p>(1) Sales of assets to a noncharitable exempt organization</p> <p>(2) Purchases of assets from a noncharitable exempt organization</p> <p>(3) Rental of facilities, equipment, or other assets</p> <p>(4) Reimbursement arrangements</p> <p>(5) Loans or loan guarantees</p> <p>(6) Performance of services or membership or fundraising solicitations</p> <p>c Sharing of facilities, equipment, mailing lists, other assets, or paid employees</p> <p>d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received</p> | <table border="1"> <tr> <th></th> <th>Yes</th> <th>No</th> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td>1a(1)</td> <td></td> <td>X</td> </tr> <tr> <td>1a(2)</td> <td></td> <td>X</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td>1b(1)</td> <td></td> <td>X</td> </tr> <tr> <td>1b(2)</td> <td></td> <td>X</td> </tr> <tr> <td>1b(3)</td> <td></td> <td>X</td> </tr> <tr> <td>1b(4)</td> <td></td> <td>X</td> </tr> <tr> <td>1b(5)</td> <td></td> <td>X</td> </tr> <tr> <td>1b(6)</td> <td></td> <td>X</td> </tr> <tr> <td>1c</td> <td></td> <td>X</td> </tr> </table> | | Yes | No | | | | 1a(1) | | X | 1a(2) | | X | | | | 1b(1) | | X | 1b(2) | | X | 1b(3) | | X | 1b(4) | | X | 1b(5) | | X | 1b(6) | | X | 1c | | X |
|--|---|----|-----|----|--|--|--|-------|--|---|-------|--|---|--|--|--|-------|--|---|-------|--|---|-------|--|---|-------|--|---|-------|--|---|-------|--|---|----|--|---|
| | Yes | No | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1a(1) | | X | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1a(2) | | X | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1b(1) | | X | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1b(2) | | X | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1b(3) | | X | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1b(4) | | X | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1b(5) | | X | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1b(6) | | X | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1c | | X | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

**Sign
Here**

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.

Signature of officer or trustee

2172020
Date

► **PRESIDENT**
Title

May the IRS discuss this return with the preparer shown below? See instr

☒ Yes ☐ No

**Paid
Preparer
Use Only**

Print/Type preparer's name
LAWRENCE H. MOHR,
CPA

Preparer's signature
Lawrence H. Mohr CPA
 LAWRENCE H. MOHR,

Date
02/04/20

Check ☐ self-employed

PTIN	P00447603
------	-----------

Firm's name ► BAKER TILLY VIRCHOW KRAUSE, LLP

Firm's EIN ► 39-0859910

Firm's address ▶ 225 S 6TH ST #2300
MINNEAPOLIS, MN 55402

Phone no 612.876.4500

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

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

OMB No 1545-0047

2018

Name of the organization

MEDTRONIC GLOBAL HEALTH FOUNDATION

Employer identification number

81-2307516

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

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

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$ _____

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

Name of organization

Employer identification number

MEDTRONIC GLOBAL HEALTH FOUNDATION**81-2307516****Part I** **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>1</u>	<u>MEDTRONIC COMMUNITIES FOUNDATION</u> <u>710 MEDTRONIC PARKWAY</u> <u>MINNEAPOLIS, MN 55432</u>	\$ <u>9,727,033.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization

Employer identification number

MEDTRONIC GLOBAL HEALTH FOUNDATION**81-2307516****Part II** **Noncash Property** (see instructions) Use duplicate copies of Part II if additional space is needed

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

Name of organization

Employer identification number

MEDTRONIC GLOBAL HEALTH FOUNDATION

81-2307516

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

Use duplicate copies of Part III if additional space is needed.

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

FORM 990-PF	OTHER PROFESSIONAL FEES			STATEMENT 1
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OTHER PROFESSIONAL	28,995.	0.		28,995.
PROGRAM COORDINATION OF				
GRANTEE PARTNERS	2,133,538.	0.		2,091,696.
PROGRAM IMPLEMENTATION	1,067,956.	0.		1,067,956.
RESEARCH AND CONSULTING	332,854.	0.		332,854.
TO FORM 990-PF, PG 1, LN 16C	3,563,343.	0.		3,521,501.

FORM 990-PF	OTHER DECREASES IN NET ASSETS OR FUND BALANCES	STATEMENT 2
DESCRIPTION		AMOUNT
FOREIGN CURRENCY CONVERSION		299.
PRIOR PERIOD ADJUSTMENT		15,000.
TOTAL TO FORM 990-PF, PART III, LINE 5		15,299.

FORM 990-PF

PART VIII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 3

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
PAURVI BHATT 710 MEDTRONIC PARKWAY MINNEAPOLIS, MN 55432	PRESIDENT, VICE CHAIR 15.00	0.	0.	0.
HAL BECKHAM 710 MEDTRONIC PARKWAY MINNEAPOLIS, MN 55432	TREASURER 5.00	0.	0.	0.
MARTHA HA 710 MEDTRONIC PARKWAY MINNEAPOLIS, MN 55432	SECRETARY 0.20	0.	0.	0.
ADAM KRAUSS 710 MEDTRONIC PARKWAY MINNEAPOLIS, MN 55432	ASSISTANT SECRETARY 2.00	0.	0.	0.
LIZ LUND 710 MEDTRONIC PARKWAY MINNEAPOLIS, MN 55432	ASSISTANT SECRETARY 18.00	0.	0.	0.
CAROL SURFACE 710 MEDTRONIC PARKWAY MINNEAPOLIS, MN 55432	MEMBER OF BOARD OF DIRECTORS, CHAIR 0.20	0.	0.	0.
OMAR ISHRAK 710 MEDTRONIC PARKWAY MINNEAPOLIS, MN 55432	MEMBER OF BOARD OF DIRECTORS 0.20	0.	0.	0.
BRAD LERMAN 710 MEDTRONIC PARKWAY MINNEAPOLIS, MN 55432	MEMBER OF BOARD OF DIRECTORS 0.20	0.	0.	0.
KAREN PARKHILL 710 MEDTRONIC PARKWAY MINNEAPOLIS, MN 55432	MEMBER OF BOARD OF DIRECTORS 0.20	0.	0.	0.
GEOFF MARTHA 710 MEDTRONIC PARKWAY MINNEAPOLIS, MN 55432	MEMBER OF BOARD OF DIRECTORS 0.20	0.	0.	0.

MEDTRONIC GLOBAL HEALTH FOUNDATION

81-2307516

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

0.

0.

0.

FORM 990-PF

EXPENDITURE RESPONSIBILITY STATEMENT
PART VII-B, LINE 5C

STATEMENT 4

GRANTEE'S NAME

SEE ATTACHED STATEMENT

GRANTEE'S ADDRESS

SEE ATTACHED STATEMENT

GRANT AMOUNTDATE OF GRANTAMOUNT EXPENDEDPURPOSE OF GRANT

SEE ATTACHED STATEMENT

DATES OF REPORTS BY GRANTEE

SEE ATTACHED STATEMENT

ANY DIVERSION BY GRANTEE

SEE ATTACHED STATEMENT

FORM 990-PF	CASH DEEMED CHARITABLE EXPLANATION STATEMENT	STATEMENT 5
	PART X, LINE 4	

THE SOLE CONTRIBUTOR TO MEDTRONIC GLOBAL HEALTH FOUNDATION IS THE MEDTRONIC COMMUNITIES FOUNDATION.

AS MEDTRONIC COMMUNITIES FOUNDATION IS ALSO A NON-OPERATING PRIVATE FOUNDATION, A GRANT AGREEMENT HAS BEEN EXECUTED THAT REQUIRES MEDTRONIC GLOBAL HEALTH FOUNDATION TO EXPEND ALL OF THE MONEY CONTRIBUTED BY THE END OF THE TAX YEAR FOLLOWING THE CONTRIBUTION AND TO TREAT THE EXPENDITURES AS OUT OF CORPUS.

ANY CASH AMOUNTS HELD AT YEAR-END HAVE ALREADY BEEN DESIGNATED FOR A CHARITABLE GRANT AND ARE AWAITING RECEIPT BY THE GRANTEE.

AS SUCH, NONE OF THE ASSETS HELD BY MEDTRONIC GLOBAL HEALTH FOUNDATION ARE DEEMED AS HELD FOR NON-CHARITABLE USE.

FORM 990-PF

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

STATEMENT 6

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

GRANT APPLICATIONS SHOULD BE SUBMITTED USING THE FOUNDATION'S ONLINE SYSTEM

FORM AND CONTENT OF APPLICATIONS

ORGANIZATIONS MUST APPLY FOR GRANTS USING THE FOUNDATION'S ONLINE APPLICATION SYSTEM. ADDITIONAL DOCUMENTS WILL BE REQUIRED WITH THE ONLINE APPLICATION. THE ONLINE APPLICATION PROCESS ALLOWS FOR THE ATTACHMENT OF REQUIRED DOCUMENTS IN AN ELECTRONIC FORMAT.

THE ADDITIONAL DOCUMENTS REQUIRED WITH THE ONLINE APPLICATION ARE AS FOLLOWS:

- PROJECT BUDGET FORM (A TEMPLATE WILL BE PROVIDED ONLINE)
- INTERIM/FINAL REPORT ON THE GRANT APPLICANT'S MOST RECENT GRANT FROM MEDTRONIC GLOBAL HEALTH FOUNDATION (ONLY REQUIRED IF THE GRANT APPLICANT HAS PREVIOUSLY RECEIVED FUNDING FROM THE FOUNDATION)

ANY SUBMISSION DEADLINES

DEADLINES VARY. MOST PROGRAMS ARE DUE BETWEEN SEPTEMBER 15 - JANUARY 31.

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE FOUNDATION FUNDS:

- IN THE U.S.: 501(C)(3) ORGANIZATIONS (AN IRS DETERMINATION LETTER VERIFYING THE STATUS IS REQUIRED)
- OUTSIDE THE U.S.: ORGANIZATIONS REGISTERED AS NONPROFITS, OR IN SOME CASES, ORGANIZATIONS THAT FUNCTION AS NONPROFITS, WHICH COULD INCLUDE SCHOOLS AND GOVERNMENT INSTITUTIONS.

THE FOUNDATION DOES NOT FUND:

- CONTINUING MEDICAL EDUCATION (CME) GRANTS
- 501(C)(3) TYPE 509(A)(3) SUPPORTING ORGANIZATIONS
- CAPITAL OR CAPITAL PROJECTS
- GENERAL OPERATING SUPPORT

**Medtronic Global Health Foundation
Form 990-PF
For the Year Ended April 26, 2019**

81-2307516

Statement of Expenditure Responsibility Pursuant to 53.4945-5(D)

Grantee: Africa Health Business Limited
Grant Amount: \$15,000
Purpose: Africa Health Business Symposium
Final Report: Received 12/9/2019

Grantee: Charities Aid Foundation America
Grant Amount: \$575,775.00
Purpose: Medtronic Global Health Foundation Opportunity Grants
Amount of grant spent by grantee: \$468,687.72
Interim Report: Received 1/30/2020

Grantee: Development Ex. Washington, DC
Date Paid: 4/27/2018
Grant Amount: \$60,000.00
Purpose: Highlight unheard voices of patients, caregivers, and health workers
Final Report: Due 12/31/2018

Grantee: Impact Investing Exchange
Grant Amount: \$125,000.00
Purpose: Medtronic Global Health Foundation Opportunity Grants
Amount of grant spent by grantee: \$125,000.00
Final Report: Received 11/10/2019

Grantee: NCD Alliance Geneva, Switzerland
Date Paid: 4/27/2018
Grant Amount: \$50,000.00
Purpose: Expanding Access to Care, Supporting Global, Regional and Country level NCD Action
Final Report: Received 1/31/2019

Grantee: NCD Alliance Geneva, Switzerland
Date Paid: 4/27/2018
Grant Amount: \$50,000.00
Purpose: Supporting the Meaningful involvement of People Living with NCDs
Final Report: Received 2/28/2019

Grantee: Telethon Kids Institute
Date Paid: 4/2/2018
Grant Amount: \$541,000.00
Purpose: RhEACH (Rheumatic Heart Disease. Evidence. Advocacy. Communication. Hope.)
Final Report: Due 4/1/2019

Grantee: Telethon Kids Institute
Date Paid: 4/17/2019
Grant Amount: \$540,594.00
Purpose: RhEACH (Rheumatic Heart Disease. Evidence. Advocacy. Communication. Hope.)
Final Report: Due 5/30/2020

Medtronic Global Health Foundation
FY 2019 Paid Grants

81-2307516

Legal Name	Project Title	Amount	Date Paid	Public Charity or Expenditure Responsibility
Global Health Council Inc	UNGA74 Side Event	\$15,000 00	3/28/2019	Public Charity
Women In Global Health Inc	Heroines of Health	\$15,000 00	3/28/2019	Public Charity
Core Inc	Global Health Practitioner Conference- Nairobi, Kenya	\$5,000 00	4/25/2019	Public Charity
Core Inc	CORE Group Global Health Practitioner Conference May 2019	\$5,000 00	4/25/2019	Public Charity
Minnesota Community Health Worker Alliance	MN Community Health Worker State Wide Conference	\$10,000 00	4/18/2019	Public Charity
Last Mile Health Tiyaten Health	Driving, Measuring, & Elevating the Impact of Community & Frontline Health Workers	\$100,000 00	4/18/2019	Public Charity
Telethon Institute for Child Health Research	Reach - RHD Action	\$540,594 00	4/18/2019	Expenditure Responsibility
The World Heart Federation	Year 5 of RHD Action - World Heart Federation	\$133,211 00	4/18/2019	Public Charity
Intrahealth International Inc	SwitchPoint 2019	\$15,000 00	3/7/2019	Public Charity
Healthfinders Collaborative Inc	Shifting the center of gravity to patient-engagement, scaling FLHWs as backbone to clinical care coordination	\$125,000 00	4/18/2019	Public Charity
Intrahealth International Inc	Advancing Storytelling & Private Sector Collaboration for Frontline Health Workforce Advocacy	\$100,000 00	4/25/2019	Public Charity
Childrens Heartlink	Engaging Frontline Health Workers in Kerala to Enhance CHD Patient Care Continuum	\$101,200 00	4/18/2019	Public Charity
Childrens Heartlink	Workforce and Infrastructure Development for CHD in Kerala, India	\$148,120 00	4/18/2019	Public Charity
Touch Foundation Inc	Combating Rheumatic Heart Disease (RHD) A Health Systems Strengthening Approach	\$250,000 00	4/18/2019	Public Charity
Healthfinders Collaborative Inc	2019 Annual Spring Gala The Power of Partnerships	\$5,000 00	3/28/2019	Public Charity
University of Washington Institute for Health Metrics and Evaluation IHME	HealthRise	\$268,354 30	3/21/2019	Public Charity
University of Washington Institute for Health Metrics and Evaluation IHME	HealthRise	\$346,698 83	3/21/2019	Public Charity
Chanties Aid Foundation America (CAF America)	Transition Grant Admin	\$25,584 80	3/28/2019	Expenditure Responsibility
Chanties Aid Foundation America (CAF America)	Transition Grant (3) Funds	\$447,195 95	3/21/2019	Expenditure Responsibility
Grameen America Inc	Adding Clinical Biomarker Collection to Phase III of Grameen Promotoras Program	\$125,000 00	4/25/2019	Public Charity
The Morehouse School Of Medicine Inc	Global Health Equity Envisioning the Future	\$5,000 00	3/28/2019	Public Charity
University of Washington Institute for Health Metrics and Evaluation IHME	HealthRise	\$89,358 00	11/1/2018	Public Charity
Wellshare International	Bridge to Health Luncheon	\$2,500 00	10/12/2018	Public Charity
Healthfinders Collaborative Inc	Rice County Health System Summit	\$2,500 00	10/25/2018	Public Charity
Research Triangle Institute	HeartRescue Global Implementation of expanding access to Acute CVD Care for select populations in China and India Adding developing and disseminating policy briefs on HeartRescue Topics and integrating new partner into the Global Partners Team	\$46,014 00	9/21/2018	Public Charity
University of Washington Institute for Health Metrics and Evaluation IHME	HealthRise	\$153,980 20	7/20/2018	Public Charity
Research Triangle Institute	HeartRescue Global Implementation of expanding access to Acute CVD Care for select populations in China and India Adding developing and disseminating policy briefs on HeartRescue Topics and integrating new partner into the Global Partners Team	\$1,688,513 00	7/27/2018	Public Charity
University of Washington	US HeartRescue Consortium	\$500,000 00	7/20/2018	Public Charity
Iix Foundation	IIX/Medtronic Foundation Health Outcomes Partnership	\$125,000 00	7/6/2018	Expenditure Responsibility
Duke University	IMPROVE Stroke Care Program	\$500,000 00	3/21/2019	Public Charity
Unreconciled Immaterial Difference*		\$126,207 43		
Grand Total		\$6,020,031 51		

*NOTE Individual grants listed here may have an immaterial difference due to timing differences between when Medtronic Global Health Foundation posts a grant to its trial balance and when the grants are paid by the third party vendor