

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

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

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Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public Inspection

For calendar year 2021 or tax year beginning **OCT 1, 2021**, and ending **SEP 30, 2022**

Name of foundation Endowment For Health, Inc.		A Employer identification number 02-0512290
Number and street (or P.O. box number if mail is not delivered to street address) One Pillsbury Street		B Telephone number 603-228-2448
City or town, state or province, country, and ZIP or foreign postal code Concord, NH 03301		C If exemption application is pending, check here <input type="checkbox"/>
G Check all that apply: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change </div> <div> <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change </div> </div>		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) \$ 94,601,301.	J Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	
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 (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)
Revenue	1 Contributions, gifts, grants, etc., received	6,941,155.			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	1,491.	1,491.		Statement 1
	4 Dividends and interest from securities	797,141.	1,189,109.		Statement 2
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	6,095,312.			
	b Gross sales price for all assets on line 6a	28,163,631.			
	7 Capital gain net income (from Part IV, line 2)		8,215,247.		
	8 Net short-term capital gain				
Operating and Administrative Expenses	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less: Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income	0.	798,997.		Statement 3
	12 Total. Add lines 1 through 11	13,835,099.	10,204,844.	0.	
	13 Compensation of officers, directors, trustees, etc.	321,156.	0.	0.	321,156.
	14 Other employee salaries and wages	464,387.	0.	0.	426,799.
	15 Pension plans, employee benefits	151,248.	0.	0.	151,248.
	16a Legal fees				
	b Accounting fees	28,464.	0.	0.	27,033.
	c Other professional fees	228,928.	154,565.	0.	75,124.
	17 Interest				
	18 Taxes	148,108.	0.	0.	53,786.
	19 Depreciation and depletion				
	20 Occupancy	60,072.	0.	0.	60,072.
	21 Travel, conferences, and meetings	22,295.	0.	0.	22,276.
22 Printing and publications	4,241.	0.	0.	4,070.	
23 Other expenses	102,382.	527,877.	0.	98,547.	
24 Total operating and administrative expenses. Add lines 13 through 23	1,531,281.	682,442.	0.	1,240,111.	
25 Contributions, gifts, grants paid	4,194,991.			3,417,307.	
26 Total expenses and disbursements. Add lines 24 and 25	5,726,272.	682,442.	0.	4,657,418.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	8,108,827.				
b Net investment income (if negative, enter -0-)		9,522,402.			
c Adjusted net income (if negative, enter -0-)			0.		

Part II 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	255,036.	422,888.	422,888.
	2 Savings and temporary cash investments	4,488,092.	3,925,693.	3,925,693.
	3 Accounts receivable ▶ 6,926,155. Less: allowance for doubtful accounts ▶		6,926,155.	6,926,155.
	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 ▶ 1,500,000. Less: allowance for doubtful accounts ▶ 0.	2,500,000.	1,500,000.	1,500,000.
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	51,407.	69,097.	69,097.
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds Stmt 8	6,533,440.	2,782,065.	2,782,065.
	11 Investments - land, buildings, and equipment: basis ▶ Less: accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other Stmt 9	90,438,491.	78,973,111.	78,973,111.
	14 Land, buildings, and equipment: basis ▶ 124,741. Less: accumulated depreciation Stmt 10 ▶ 124,741.			
15 Other assets (describe ▶ Deposits)	2,292.	2,292.	2,292.	
16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	104,268,758.	94,601,301.	94,601,301.	
Liabilities	17 Accounts payable and accrued expenses	647,093.	452,798.	
	18 Grants payable	770,900.	1,594,975.	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶)			
23 Total liabilities (add lines 17 through 22)	1,417,993.	2,047,773.		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 24, 25, 29, and 30.			
	24 Net assets without donor restrictions	100,439,895.	90,546,465.	
	25 Net assets with donor restrictions	2,410,870.	2,007,063.	
	Foundations that do not follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds			
	27 Paid-in or capital surplus, or land, bldg., and equipment fund			
	28 Retained earnings, accumulated income, endowment, or other funds			
	29 Total net assets or fund balances	102,850,765.	92,553,528.	
30 Total liabilities and net assets/fund balances	104,268,758.	94,601,301.		

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 29 (must agree with end-of-year figure reported on prior year's return)	1	102,850,765.
2 Enter amount from Part I, line 27a	2	8,108,827.
3 Other increases not included in line 2 (itemize) ▶ Deferred Excise Tax Benefit	3	237,275.
4 Add lines 1, 2, and 3	4	111,196,867.
5 Decreases not included in line 2 (itemize) ▶ Unrealized Loss	5	18,643,339.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	92,553,528.

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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 Publicly Traded Securities				
b Investment Income - K-1				
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 28,163,631.		22,068,319.	6,095,312.
b			2,119,935.
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			6,095,312.
b			2,119,935.
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** 8,215,247.

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** N/A

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

1a Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions)		1	132,361.
b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) 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-) _____		2	0.
3 Add lines 1 and 2 _____		3	132,361.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) _____		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- _____		5	132,361.
6 Credits/Payments:			
a 2021 estimated tax payments and 2020 overpayment credited to 2021 _____	6a	119,087.	
b Exempt foreign organizations - tax withheld at source _____	6b	0.	
c Tax paid with application for extension of time to file (Form 8868) _____	6c	0.	
d Backup withholding erroneously withheld _____	6d	0.	
7 Total credits and payments. Add lines 6a through 6d _____		7	119,087.
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached _____		8	0.
9 Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed _____		9	13,274.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid _____		10	
11 Enter the amount of line 10 to be: Credited to 2022 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>		11	

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Part VI-A Statements Regarding Activities

	Yes	No
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?		X
1b 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.		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ <u>0.</u> (2) On foundation managers. ▶ \$ <u>0.</u>		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ <u>0.</u>		
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.		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	X	
4b If "Yes," has it filed a tax return on Form 990-T for this year?	X	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i> .		X
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?	X	
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 XIV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ <u>NH, CA, NY, MD, MA, SC, GA, CO</u>		
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 <i>General Instruction G</i> ? If "No," attach explanation	X	
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 2021 or the tax year beginning in 2021? See the instructions for Part XIII. If "Yes," complete Part XIII		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X
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 <u>Statement 11</u> <u>Stmnt 12</u>	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		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ <u>www.endowmentforhealth.org</u>	X	
14 The books are in care of ▶ <u>Susan Fulton</u> Telephone no. ▶ <u>603-228-2448</u> Located at ▶ <u>One Pillsbury Street, Suite 301, Concord, NH</u> ZIP+4 ▶ <u>03301</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 ▶ <u>15</u> <u>N/A</u>		
16 At any time during calendar year 2021, 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?		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶		

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Part VI-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?	1a(1)	X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	1a(2)	X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)	X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)	X
(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)?		
(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.)	1a(5)	X
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	1a(6)	X
c Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>	1b	X
d 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 2021?	1d	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 2021, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2021?	2a	X
If "Yes," list the years <input type="checkbox"/>		
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. <input type="checkbox"/>		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	3a	X
b If "Yes," did it have excess business holdings in 2021 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 Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2021.)	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 2021?	4b	X

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Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

	Yes	No
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))?	5a(1)	X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?	5a(2)	X
(3) Provide a grant to an individual for travel, study, or other similar purposes?	5a(3)	X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	5a(4)	X
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	5a(5)	X
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	X
c Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
d 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 14	5d	X
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?	6a	X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.	6b	X
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	7a	X
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A	7b	
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?	8	X

Part VII 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 13		321,156.	51,964.	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
Kim Firth - One Pillsbury Street, Suite 301, Concord, NH 03301	Program Director 37.50	99,533.	34,611.	0.
Melina Hill Walker - One Pillsbury Street, Suite 301, Concord, NH 03301	Program Director 37.50	97,488.	23,351.	0.
Karen Ager - One Pillsbury Street, Suite 301, Concord, NH 03301	Director of Communications 37.50	99,755.	10,175.	0.
Cheryl Dempsey - One Pillsbury Street, Suite 301, Concord, NH 03301	Administrative Coordinator 37.50	65,577.	20,946.	0.
Andie Hession - One Pillsbury Street, Suite 301, Concord, NH 03301	Grants Program Associate 37.50	64,446.	10,216.	0.

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

Part VII**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
Prime Buchholz 273 Corporate Drive, Portsmouth, NH 03801	Investment Advisor	101,295.
Total number of others receiving over \$50,000 for professional services		0

Part VIII-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 See Statement 15	335,826.
2 See Statement 16	294,881.
3 See Statement 17	109,007.
4 See Statement 18	76,133.

Part VIII-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 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.

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Part IX 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	97,036,958.
b	Average of monthly cash balances	1b	2,274,623.
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	99,311,581.
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	99,311,581.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	1,489,674.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	97,821,907.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	4,891,095.

Part X 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 IX, line 6	1	4,891,095.
2a	Tax on investment income for 2021 from Part V, line 5	2a	132,361.
b	Income tax for 2021. (This does not include the tax from Part V.)	2b	
c	Add lines 2a and 2b	2c	132,361.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,758,734.
4	Recoveries of amounts treated as qualifying distributions	4	46,391.
5	Add lines 3 and 4	5	4,805,125.
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 XII, line 1	7	4,805,125.

Part XI 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	4,657,418.
b	Program-related investments - total from Part VIII-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 XII, line 4	4	4,657,418.

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Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2020	(c) 2020	(d) 2021
1 Distributable amount for 2021 from Part X, line 7				4,805,125.
2 Undistributed income, if any, as of the end of 2021:				
a Enter amount for 2020 only			4,211,991.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2021:				
a From 2016				
b From 2017				
c From 2018				
d From 2019				
e From 2020				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2021 from Part XI, line 4: ▶ \$ 4,657,418.				
a Applied to 2020, but not more than line 2a ...			4,211,991.	
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 2021 distributable amount				445,427.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2021 (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	0.			
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 2020. Subtract line 4a from line 2a. Taxable amount - see instr. ...			0.	
f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2022				4,359,698.
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 2016 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2022. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2017 ...				
b Excess from 2018 ...				
c Excess from 2019 ...				
d Excess from 2020 ...				
e Excess from 2021 ...				

Part XIV 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 Paid during the year				
Blue Cross Blue Shield of Massachusetts Foundation 101 Huntington Ave, Suite 300 Boston, MA 02199	N/A	PF	To help newspaper, radio, television, and online reporters and editors do a better job covering critical	20,000.
New Hampshire Public Radio 2 Pillsbury St., 6th Floor Concord, NH 03301	N/A	PC	To ensure quality advocacy, nonprofit capacity building and knowledge development for the health system	25,000.
New Hampshire Public Health Association #4 Park St., Suite 403 Concord, NH 03301	N/A	PC	To ensure quality advocacy, nonprofit capacity building and knowledge development for the health system	75,000.
Leadership New Hampshire PO Box 3446 Concord, NH 03302	N/A	PC	Build a community of informed leaders in NH to increase civic engagement and strengthen communities	10,000.
National Alliance on Mental Illness-New Hampshire 85 N. State Street Concord, NH 03301	N/A	PC	To ensure quality advocacy, knowledge development and nonprofit capacity building leadership	25,000.
Total	See continuation sheet(s)			3a 3,417,307.
b Approved for future payment				
Dartmouth-Hitchcock Clinic One Medical Drive Lebanon, NH 03756	N/A	PC	To develop interventions for perinatal persons experiencing symptoms of depression and	9,975.
Safari Youth Club 72 Concord St Manchester, NH 03101	N/A	PC	To build capacity of the organization for the future by developing a strategic plan and provide	15,000.
New Hampshire Public Radio 2 Pillsbury Street Concord, NH 03301	N/A	PC	To ensure quality advocacy, nonprofit capacity building and knowledge development for the health system	25,000.
Total	See continuation sheet(s)			3b 1,594,975.

Form 990-PF (2021)

Part XVI

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

- | | | | |
|----------|--|--------------|----|
| 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? | Yes | No |
| | | | |
| a | Transfers from the reporting foundation to a noncharitable exempt organization of: | | |
| | (1) Cash | 1a(1) | X |
| | (2) Other assets | 1a(2) | X |
| b | Other transactions: | | |
| | (1) Sales of assets to a noncharitable exempt organization | 1b(1) | X |
| | (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | X |
| | (3) Rental of facilities, equipment, or other assets | 1b(3) | X |
| | (4) Reimbursement arrangements | 1b(4) | X |
| | (5) Loans or loan guarantees | 1b(5) | X |
| | (6) Performance of services or membership or fundraising solicitations | 1b(6) | X |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | X |
| 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. | | |

[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

(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

2-14-23
Date

President

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

☒ Yes ☐ No

**Paid
Preparer
Use Only**

Print/Type preparer's name

Preparer's signature

Date

Check ☐ self-employed

PTIN

Melissa Magoon, CPA

Melissa Magoon, C

02/07/23

P01712842

Firm's name ▶ **Berry Dunn McNeil & Parker, LLC**

Firm's EIN ► 01-0523282

Firm's address ► 1000 Elm Street, 4th Floor
Manchester, NH 03101

Phone no. (603) 669-7337

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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
New Hampshire Fiscal Policy Institute 100 North Main Street, Suite 400 Concord, NH 03301	N/A	PC	To ensure quality advocacy and knowledge development for the health system in NH by sustaining the general	75,000.
New Hampshire Legal Assistance 117 North State Street Concord, NH 03301	N/A	PC	To ensure quality advocacy and nonprofit capacity building by sustaining the general operations of key NH	25,000.
New Hampshire Legal Assistance 117 North State Street Concord, NH 03301	N/A	PC	To ensure quality advocacy and nonprofit capacity building by sustaining the general operations of key NH	25,000.
Lamprey Health Care 207 South Main Street Newmarket, NH 03057	N/A	PC	To draw on the expertise of NHs Leaders of Color to train and develop a cohort of	35,000.
Maine Council on Aging P.O. Box 988 Brunswick, ME 04011	N/A	PC	To advance a regional approach to address the challenges and opportunities presented by an aging	15,000.
Grantmakers in Aging C/O: CliftonLarsonAllen LLP 901 North Glebe Road, Suite 200 Arlington, VA 22203	N/A	PC	To expand the field's ability to leverage local, regional, and national ideas and funding, through	2,408.
University of New Hampshire 73 Main Street Durham, NH 03820	N/A	PC	Advance a shared vision for age friendly communities in NH through a collective impact	227,000.
Health Strategies of New Hampshire One Pillsbury Street, Suite 301 Concord, NH 03301	N/A	POF	To strengthen the field of early childhood by strategically supporting technical	10,000.
New Futures 100 North Main Street Suite 400 Concord, NH 03301	N/A	PC	To create an advocacy structure that will serve as the foundation for achieving critical,	265,000.
New Futures 100 North Main Street Suite 400 Concord, NH 03301	N/A	PC	To create an advocacy structure that will serve as the foundation for achieving critical,	265,000.
Total from continuation sheets				3,262,307.

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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
New Hampshire Legal Assistance 117 North State Street Concord, NH 03301	N/A	PC	To build advocacy capacity to advance the priorities and strategies of the New Hampshire Alliance for	65,000.
Granite State Organizing Project, Inc (GSOP) GSOP 1045 Elm Street Manchester, NH 03103	N/A	PC	To enhance leadership capabilities and educational attainment of primarily youth of color in the	30,000.
National Alliance on Mental Illness-New Hampshire 85 N. State Street Concord, NH 03301	N/A	PC	To continue cultivating and developing robust and resilient family and youth leaders, who are	119,806.
Health Strategies of New Hampshire One Pillsbury Street, Suite 301 Concord, NH 03301	N/A	POF	To provide policy and decision makers with information that helps them understand and address the underlying	28,000.
Conservation Law Foundation 62 Summer Street Boston, MA 02110	N/A	PC	To build advocacy capacity for environmental justice in NH.	25,000.
Foundation for Healthy Communities 125 Airport Road Concord, NH 03301	N/A	PC	To improve the health of NH residents by increasing the quality of crisis behavioral health services	67,900.
Health Strategies of New Hampshire One Pillsbury Street, Suite 301 Concord, NH 03301	N/A	POF	To strengthen the capacity of funders in NH to strategically coordinate and co-fund grantmaking by	10,000.
Behavioral Health Improvement Institute at Keene State College 229 Main Street Keene, NH 03435	N/A	PC	Assess the current status and progress in development of the Health Equity field.	35,000.
University of New Hampshire 73 Main Street Durham, NH 03820	N/A	PC	To engage a diverse set of constituents to find common ground around policy solutions addressing	270,000.
New Hampshire Legal Assistance 117 North State Street Concord, NH 03301	N/A	PC	To sustain an effective and sustainable statewide advocacy infrastructure that	25,000.
Total from continuation sheets				

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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
Massachusetts Immigrant and Refugee Advocacy Coalition 105 Chauncy Street, 9th Floor Boston, MA 02111	N/A	PC	To promote healthy NH communities which welcome immigrants and refugees by facilitating inclusive	60,000.
Trustees of Dartmouth College 11 Rope Ferry Road Hanover, NH 03755-1421	N/A	PC	To conduct a national and state-specific environmental scan related to the community placement	54,983.
Health Strategies of New Hampshire One Pillsbury Street, Suite 301 Concord, NH 03301	N/A	POF	To improve the supply of health care workers in New Hampshire by better aligning health care workforce	30,000.
Health Strategies of New Hampshire One Pillsbury Street, Suite 301 Concord, NH 03301	N/A	POF	To improve the supply of health care workers in New Hampshire by better aligning health care workforce	10,000.
Health Strategies of New Hampshire One Pillsbury Street, Suite 301 Concord, NH 03301	N/A	POF	To improve the supply of health care workers in New Hampshire by better aligning health care workforce	35,000.
New England Blacks in Philanthropy 101 Federal Street Boston, MA 02110	N/A	PC	To help individuals and philanthropic institutions and other funding organizations make better informed	2,500.
New Futures 100 North Main Street Suite 400 Concord, NH 03301	N/A	PC	To encourage alignment, coordination, and promotion of best practices across all	53,250.
New Hampshire Children's Trust, Inc. 10 Ferry St. Suite 307 Concord, NH 03301	N/A	PC	To strengthen families throughout New Hampshire and reduce incidences of abuse and neglect by	40,000.
Health Strategies of New Hampshire One Pillsbury Street, Suite 301 Concord, NH 03301	N/A	POF	To organize for systems change for racial and economic equity by using an Inclusive Recovery	6,000.
Safari Youth Club 72 Concord st Manchester, NH 03101	N/A	PC	To deepen and expand the array of programming the Safari Youth Club provides through organizational	10,000.
Total from continuation sheets				

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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
University of New Hampshire 73 Main Street Durham, NH 03820	N/A	PC	NH Listens will strengthen the field of people in NH giving sustained attention and taking action to	100,000.
University of New Hampshire 73 Main Street Durham, NH 03820	N/A	PC	To conduct research and convene stakeholders toward the development of a statewide fund that	35,000.
Marnita's Table Inc 1330 Lagoon Ave, 4th Floor Minneapolis, MN 55408	N/A	PC	To engage diverse individuals across the state to participate, learn, sustain, and grow their inclusive	35,600.
Marnita's Table Inc 1330 Lagoon Ave, 4th Floor Minneapolis, MN 55408	N/A	PC	To engage diverse individuals across the state to participate, learn, sustain, and grow their inclusive	114,400.
Marnita's Table Inc 1330 Lagoon Ave, 4th Floor Minneapolis, MN 55408	N/A	PC	To engage diverse individuals across the state to participate, learn, sustain, and grow their inclusive	50,000.
Marnita's Table Inc 1330 Lagoon Ave, 4th Floor Minneapolis, MN 55408	N/A	PC	To engage diverse individuals across the state to participate, learn, sustain, and grow their inclusive	100,000.
National Collaborative for Digital Equity 38 Eleanor Way Weare, NH 03281	N/A	PC	To address digital divide barriers to economic and educational opportunity by	12,650.
University of New Hampshire 73 Main Street Durham, NH 03820	N/A	PC	To promote behavioral health equity and cultural responsiveness of the children's mental	50,000.
New Hampshire Nurses Association 25 Hall Street Suite 1E Concord, NH 03301	N/A	PC	To improve staff and patient safety, promote cohesion among staff, retain a highly skilled workforce, and	17,682.
New Hampshire Community Loan Fund 7 Wall Street Concord, NH 03301	N/A	PC	To facilitate the resilience and growth of businesses owned by people of color that contribute to the	25,000.
Total from continuation sheets				

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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
Health Strategies of New Hampshire One Pillsbury Street, Suite 301 Concord, NH 03301	N/A	POF	To provide consultant support for development of a messaging framework for different	25,000.
Health Strategies of New Hampshire One Pillsbury Street, Suite 301 Concord, NH 03301	N/A	POF	To provide consultant support for development of a messaging framework for different	75,000.
NH Peace Action Education Fund 4 Park Street, Suit 304 Concord, NH 03301	N/A	PC	To raise public awareness about the negative health impacts caused by pollution from the	5,000.
University of New Hampshire 73 Main Street Durham, NH 03820	N/A	PC	To address disparities and advance behavioral health equity in underserved and disproportionately	53,578.
Conservation Law Foundation 62 Summer Street Boston, MA 02110	N/A	PC	Build an environmental justice movement in New Hampshire that engages low-income communities and	50,000.
Resist, Inc. PO Box 301240 Boston, MA 02130	N/A	PC	To improve the quality of life in Manchester by bringing people together from diverse cultural backgrounds	10,000.
Health Strategies of New Hampshire One Pillsbury Street, Suite 301 Concord, NH 03301	N/A	POF	To create a shared narrative and messaging for a more welcoming state by supporting a community	10,000.
Cooperative Alliance for Seacoast Transportation (COAST) 42 Sumner Drive Dover, NH 03820	N/A	PC	To allow older adults and individuals with disabilities to remain living in their communities by	8,000.
Lamprey Health Care 207 South Main Street Newmarket, NH 03057	N/A	PC	To increase health care workforce by providing bridge funding for NH Needs Caregivers Program.	8,900.
Marguerite's Place, Inc. 87 Palm Street Nashua, NH 03060	N/A	PC	To enhance the capacity of Marguerite's Place to evaluate existing program efficacy and	20,000.
Total from continuation sheets				

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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
Nackey S. Loeb School of Communication 749 East Industrial Drive Manchester, NH 03109	N/A	PC	To support the development of the Solutions Journalism Lab at the Nackey S. Loeb School of	15,000.
New Hampshire Public Broadcasting 268 Mast Road Durham, NH 03824	N/A	PC	To fill in coverage and data gaps that impact New Hampshire specifically related to the Collaborative's	10,000.
Bowler-Bartlett Foundation at the NH Medical Society 7 North State Street Concord, NH 03301	N/A	PC	To increase the number of climate-informed health care settings and health care workers equipped to	20,000.
New Futures 100 North Main Street Suite 400 Concord, NH 03301	N/A	PC	To promote pro-public health and vaccination information messages by supporting a campaign.	30,000.
New Hampshire Recreation and Park Association 172 Pembroke Rd Concord, NH 03301	N/A	PC	To build understanding of equity among NH Recreation and Parks professionals by providing DEJI	2,000.
Reach for the Top Therapy 61 Locust Street, Suite 331 Dover, NH 03820	N/A	PC	To enhance the capacity of Reach by conducting an organizational assessment.	18,600.
Victory Women of Vision 50 Bridge St STE 203 Manchester, NH 03101	N/A	PC	To support culturally appropriate advocacy training for victims of domestic violence by strategically	5,000.
Health Strategies of New Hampshire One Pillsbury Street, Suite 301 Concord, NH 03301	N/A	POF	To strengthen the field of healthy aging by leveraging funding from federal sources.	9,488.
Community Health Institute/JSI Research & Training 501 South Street Bow, NH 03304	N/A	PC	To expand and support New Hampshire's healthcare workforce by launching a foundational	53,855.
Health Strategies of New Hampshire One Pillsbury Street, Suite 301 Concord, NH 03301	N/A	POF	To ensure effective messaging on welcoming, racial justice and equity in New Hampshire that	39,900.
Total from continuation sheets				

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

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
NH Black Women Health Project P.O. Box 5932 Manchester, NH 03108	N/A	PC	To address historical trauma and ongoing systemic racism by facilitating a discussion about the	3,950.
Greater Tilton Area Family Resource Center/Archways 5 Prospect Street Tilton, NH 03276	N/A	PC	To elevate a NH developed promising practice that combines the principles of Family Support and	10,000.
American Friends Service Committee-NH 4 Park Street #304 Concord, NH 03301	N/A	PC	To build community among BIPOC activists, emerging leaders, and community members, with a focus on	10,000.
Child Trends Inc. 7315 Wisconsin Ave, suite 1200W Bethesda, MD 20814	N/A	PC	To provide policy and decision makers with information that helps them understand and address the underlying	50,000.
New Hampshire Center for Justice & Equity 30 Amherst Street Manchester, NH 03104	N/A	PC	To advance issues of racial and economic justice for all residents of New Hampshire through a	200,000.
Keene Family YMCA (Keene Young Men's Christian Organization) 200 Summit Road Keene, NH 03431	N/A	PC	To increase awareness and public engagement with the Monadnock DEIB Coalition by developing a	16,524.
Health Strategies of New Hampshire One Pillsbury Street, Suite 301 Concord, NH 03301	N/A	POF	To enhance access to a high quality system of care for early childhood mental health services by	40,333.
Total from continuation sheets				

Part XIV Supplementary Information**3 Grants and Contributions Approved for Future Payment (Continuation)**

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
Early Learning NH 2 Delta Drive Concord, NH 03301	N/A	PC	To strengthen the childcare sector and support its workforce by improving business and management	30,000.
Behavioral Health Improvement Institute at Keene State College 229 Main Street Keene, NH 03435	N/A	PC	Assess the current status and progress in development of the Health Equity field.	35,000.
New Hampshire Center for Nonprofits 194 Pleasant Street Concord, NH 03301	N/A	PC	To ensure quality advocacy, nonprofit capacity building and knowledge development for the health system	55,000.
New Hampshire Children's Trust, Inc. 10 Ferry Street Concord, NH 03301	N/A	PC	To encourage alignment, coordination, and promotion of best practices across all	55,000.
Marnita's Table Inc 1330 Lagoon Ave, 4th Floor Minneapolis, MN 55408	N/A	PC	To engage diverse individuals across the state to participate, learn, sustain, and grow their inclusive	100,000.
University of New Hampshire 73 Main Street Durham, NH 03820	N/A	PC	To engage a diverse set of constituents to find common ground around policy solutions addressing	270,000.
New Hampshire Center for Justice & Equity 30 Amherst Street Manchester, NH 03104	N/A	PC	To advance issues of racial and economic justice for all residents of New Hampshire through a	1,000,000.
Total from continuation sheets				1,545,000.

Part XIV Supplementary Information**3a** Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

Name of Recipient - Blue Cross Blue Shield of Massachusetts Foundation
To help newspaper, radio, television, and online reporters and editors
do a better job covering critical health care issues by participating
in a comprehensive curriculum designed to enhance their knowledge of
complex health policy issues.

Name of Recipient - New Hampshire Public Radio
To ensure quality advocacy, nonprofit capacity building and knowledge
development for the health system in NH by sustaining the general
operations of key NH nonprofits.

Name of Recipient - New Hampshire Public Health Association
To ensure quality advocacy, nonprofit capacity building and knowledge
development for the health system in NH by sustaining the general
operations of key NH nonprofits.

Name of Recipient - Leadership New Hampshire
Build a community of informed leaders in NH to increase civic
engagement and strengthen communities through connecting and educating
a diverse pool of engaged, or emerging, leaders about the State of New
Hampshire.

Name of Recipient - National Alliance on Mental Illness-New Hampshire
To ensure quality advocacy, knowledge development and nonprofit
capacity building leadership for the mental health system which
supports NH's children and their families by providing general
operating support.

Part XIV Supplementary Information**3a** Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

Name of Recipient - New Hampshire Fiscal Policy Institute

To ensure quality advocacy and knowledge development for the health system in NH by sustaining the general operations of key NH nonprofits.

Name of Recipient - New Hampshire Legal Assistance

To ensure quality advocacy and nonprofit capacity building by sustaining the general operations of key NH nonprofits.

Name of Recipient - New Hampshire Legal Assistance

To ensure quality advocacy and nonprofit capacity building by sustaining the general operations of key NH nonprofits.

Name of Recipient - Lamprey Health Care

To draw on the expertise of NHs Leaders of Color to train and develop a cohort of promising/rising minority community leaders with an equity frame knowledge base and concrete skills for participating in leadership (committees, boards, mainstream leadership development programs) while building collective impact capacity in communities of color.

Name of Recipient - Maine Council on Aging

To advance a regional approach to address the challenges and opportunities presented by an aging Northern New England by providing learning opportunities, facilitating opportunities for networking and encouraging cross-sector collaboration among municipal, policy, advocacy and business leaders working across Maine, New Hampshire and Vermont.

Part XIV Supplementary Information**3a** Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

Name of Recipient - Grantmakers in Aging

To expand the field's ability to leverage local, regional, and national ideas and funding, through enhanced relationships with those in the field of philanthropy focused on healthy aging.

Name of Recipient - University of New Hampshire

Advance a shared vision for age friendly communities in NH through a collective impact approach by providing backbone support to the NH Alliance of Healthy Aging (NH AHA).

Name of Recipient - Health Strategies of New Hampshire

To strengthen the field of early childhood by strategically supporting technical assistance to leverage funding from federal and/or national foundation sources.

Name of Recipient - New Futures

To create an advocacy structure that will serve as the foundation for achieving critical, multi-issue policy goals and provide training and mentoring to the field, thereby enhancing strategic leadership and advocacy capacity in critical organizations.

Name of Recipient - New Futures

To create an advocacy structure that will serve as the foundation for achieving critical, multi-issue policy goals and provide training and mentoring to the field, thereby enhancing strategic leadership and advocacy capacity in critical organizations.

Name of Recipient - New Hampshire Legal Assistance

123655 11-18-21

Part XIV Supplementary Information**3a** Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

To build advocacy capacity to advance the priorities and strategies of the New Hampshire Alliance for Healthy Aging and its partners.

Name of Recipient - Granite State Organizing Project, Inc (GSOP)

To enhance leadership capabilities and educational attainment of primarily youth of color in the Manchester/Nashua School Districts by supporting leadership training and student directed educational equity activities.

Name of Recipient - National Alliance on Mental Illness-New Hampshire

To continue cultivating and developing robust and resilient family and youth leaders, who are full partners in transforming and strengthening the infrastructure of NHs childrens behavioral health system, by providing opportunities for leadership development, community engagement, education, training, and advocacy and by strengthening communication capacity.

Name of Recipient - Health Strategies of New Hampshire

To provide policy and decision makers with information that helps them understand and address the underlying structural factors that perpetuate inequities by amplifying diverse voices and perspectives to examine how social and structural determinants impact childrens outcomes in New Hampshire.

Name of Recipient - Foundation for Healthy Communities

To improve the health of NH residents by increasing the quality of crisis behavioral health services provided in hospital emergency care departments and aligned community settings.

Part XIV Supplementary Information**3a** Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

Name of Recipient - Health Strategies of New Hampshire

To strengthen the capacity of funders in NH to strategically coordinate and co-fund grantmaking by completing a baseline report that maps the states philanthropic landscape.

Name of Recipient - University of New Hampshire

To engage a diverse set of constituents to find common ground around policy solutions addressing health, social, and public health systems in NH by identifying key health policy shifts, researching and analyzing impacts using focused data points, disseminating information to describe implications of policies, and developing processes to shape policy pathways.

Name of Recipient - New Hampshire Legal Assistance

To sustain an effective and sustainable statewide advocacy infrastructure that promotes healthy aging in New Hampshire.

Name of Recipient - Massachusetts Immigrant and Refugee Advocacy Coalition

To promote healthy NH communities which welcome immigrants and refugees by facilitating inclusive community collaboration, through a learning collaborative of integration practitioners and community leaders who share best practices and collectively address ongoing challenges experienced by immigrants and refugees in NH.

Name of Recipient - Trustees of Dartmouth College

To conduct a national and state-specific environmental scan related to

Part XIV Supplementary Information**3a** Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

the community placement process that supports clinical training experiences in New Hampshire.

Name of Recipient - Health Strategies of New Hampshire

To improve the supply of health care workers in New Hampshire by better aligning health care workforce initiatives, addressing gaps and minimizing redundancies through a comprehensive plan for the state.

Name of Recipient - Health Strategies of New Hampshire

To improve the supply of health care workers in New Hampshire by better aligning health care workforce initiatives, addressing gaps and minimizing redundancies through implementation of a comprehensive plan for the state.

Name of Recipient - Health Strategies of New Hampshire

To improve the supply of health care workers in New Hampshire by better aligning health care workforce initiatives, addressing gaps and minimizing redundancies through implementation of a comprehensive plan for the state.

Name of Recipient - New England Blacks in Philanthropy

To help individuals and philanthropic institutions and other funding organizations make better informed decisions within communities of color and with direct input from representatives of those diverse populations by providing tools and resources needed to enhance knowledge.

Name of Recipient - New Futures

123655 11-18-21

Part XIV Supplementary Information**3a** Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

To encourage alignment, coordination, and promotion of best practices across all early childhood coalitions in the state by facilitating a community of practice (COP) and supporting regional coalitions with Alliance leadership.

Name of Recipient - New Hampshire Children's Trust, Inc.

To strengthen families throughout New Hampshire and reduce incidences of abuse and neglect by implementing a public awareness campaign focused on Family Resource Centers and the programs they offer.

Name of Recipient - Health Strategies of New Hampshire

To organize for systems change for racial and economic equity by using an Inclusive Recovery Framework.

Name of Recipient - Safari Youth Club

To deepen and expand the array of programming the Safari Youth Club provides through organizational capacity-building.

Name of Recipient - University of New Hampshire

NH Listens will strengthen the field of people in NH giving sustained attention and taking action to address race, equity and justice issues in the state by supporting and cultivating relationships and infrastructure among field actors, in addition to providing programmatic design, facilitation, affinity and multiracial group support to address this work.

Name of Recipient - University of New Hampshire

To conduct research and convene stakeholders toward the development of

Part XIV Supplementary Information**3a** Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

a statewide fund that engages Community Development Finance Institutions in projects supported and aligned with hospital community benefit priorities.

Name of Recipient - Marnita's Table Inc

To engage diverse individuals across the state to participate, learn, sustain, and grow their inclusive community of practice, while focusing on building trust across differences.

Name of Recipient - Marnita's Table Inc

To engage diverse individuals across the state to participate, learn, sustain, and grow their inclusive community of practice, while focusing on building trust across differences.

Name of Recipient - Marnita's Table Inc

To engage diverse individuals across the state to participate, learn, sustain, and grow their inclusive community of practice, while focusing on building trust across differences.

Name of Recipient - Marnita's Table Inc

To engage diverse individuals across the state to participate, learn, sustain, and grow their inclusive community of practice, while focusing on building trust across differences.

Name of Recipient - National Collaborative for Digital Equity

To address digital divide barriers to economic and educational opportunity by providing low- and moderate-income children and their families with computer equipment.

Part XIV Supplementary Information**3a** Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

Name of Recipient - University of New Hampshire

To promote behavioral health equity and cultural responsiveness of the children's mental health delivery system by creating a user-friendly, searchable online resource for training and technical support.

Name of Recipient - New Hampshire Nurses Association

To improve staff and patient safety, promote cohesion among staff, retain a highly skilled workforce, and ensure the highest quality of patient care by creating a culture of transparent reporting that documents the prevalence of aggression in the workplace.

Name of Recipient - New Hampshire Community Loan Fund

To facilitate the resilience and growth of businesses owned by people of color that contribute to the vitality and health of New Hampshire by establishing a platform from which minority-owned businesses can access capital and technical assistance.

Name of Recipient - Health Strategies of New Hampshire

To provide consultant support for development of a messaging framework for different audiences.

Name of Recipient - Health Strategies of New Hampshire

To provide consultant support for development of a messaging framework for different audiences.

Name of Recipient - NH Peace Action Education Fund

To raise public awareness about the negative health impacts caused by

Part XIV Supplementary Information**3a** Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

pollution from the Merrimack Generating Station on community members by producing informational videos.

Name of Recipient - University of New Hampshire

To address disparities and advance behavioral health equity in underserved and disproportionately affected populations by producing and disseminating videos that lift and amplify community voices with lived experience.

Name of Recipient - Conservation Law Foundation

Build an environmental justice movement in New Hampshire that engages low-income communities and communities of color by establishing and supporting environmental advocacy communities throughout the state.

Name of Recipient - Resist, Inc.

To improve the quality of life in Manchester by bringing people together from diverse cultural backgrounds to create a strategic plan for the Manchester Community Action Coalition.

Name of Recipient - Health Strategies of New Hampshire

To create a shared narrative and messaging for a more welcoming state by supporting a community of practice.

Name of Recipient - Cooperative Alliance for Seacoast Transportation (COAST)

To allow older adults and individuals with disabilities to remain living in their communities by providing free transportation to medical care.

Part XIV Supplementary Information**3a** Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

Name of Recipient - Marguerite's Place, Inc.

To enhance the capacity of Marguerite's Place to evaluate existing program efficacy and need for expansion by developing and implementing a database that captures the breadth of client experiences and measures outcomes.

Name of Recipient - Nackey S. Loeb School of Communication

To support the development of the Solutions Journalism Lab at the Nackey S. Loeb School of Communications into a Center of Excellence.

Name of Recipient - New Hampshire Public Broadcasting

To fill in coverage and data gaps that impact New Hampshire specifically related to the Collaborative's race and equity initiative by sustaining the general operations of the Granite State News Collaborative.

Name of Recipient - Bowler-Bartlett Foundation at the NH Medical Society

To increase the number of climate-informed health care settings and health care workers equipped to discuss the health effects of climate change with patients and to advocate for sustainable climate policies by supporting a six session ECHO series.

Name of Recipient - New Hampshire Recreation and Park Association

To build understanding of equity among NH Recreation and Parks professionals by providing DEJI training.

Name of Recipient - Victory Women of Vision

Part XIV Supplementary Information**3a** Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

To support culturally appropriate advocacy training for victims of domestic violence by strategically supporting technical assistance to leverage funding from federal and/or national foundation sources.

Name of Recipient - Community Health Institute/JSI Research & Training
To expand and support New Hampshire's healthcare workforce by launching a foundational governance entity for statewide planning, collaboration, coordination, and dissemination of strategic actions and best practices.

Name of Recipient - Health Strategies of New Hampshire
To ensure effective messaging on welcoming, racial justice and equity in New Hampshire that resonates with Granite Staters across ideologies and demographics by conducting qualitative message testing research.

Name of Recipient - NH Black Women Health Project
To address historical trauma and ongoing systemic racism by facilitating a discussion about the Harm Report.

Name of Recipient - Greater Tilton Area Family Resource Center/Archways
To elevate a NH developed promising practice that combines the principles of Family Support and Strengthening and Peer Recovery Support to an evidence based designation by supporting evaluation services.

Name of Recipient - American Friends Service Committee-NH
To build community among BIPOC activists, emerging leaders, and community members, with a focus on self-care and nurturing collective

Part XIV Supplementary Information**3a** Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

liberation, by holding a healing retreat centered on Black and Brown peoples safety, joy, and healing through storytelling, reflection, movement, art, and fellowship.

Name of Recipient - Child Trends Inc.

To provide policy and decision makers with information that helps them understand and address the underlying structural factors that perpetuate inequities by amplifying diverse voices and perspectives to examine how social and structural determinants impact childrens outcomes in New Hampshire.

Name of Recipient - New Hampshire Center for Justice & Equity

To advance issues of racial and economic justice for all residents of New Hampshire through a collective impact approach by providing backbone support to the NH Center for Justice & Equity.

Name of Recipient - Keene Family YMCA (Keene Young Men's Christian Organization)

To increase awareness and public engagement with the Monadnock DEIB Coalition by developing a communications strategy.

Name of Recipient - Health Strategies of New Hampshire

To enhance access to a high quality system of care for early childhood mental health services by conducting research.

Part XIV Supplementary Information

3b Grants and Contributions Approved for Future Payment Continuation of Purpose of Grant or Contribution

Name of Recipient - Dartmouth-Hitchcock Clinic

To develop interventions for perinatal persons experiencing symptoms of depression and anxiety by conducting a study.

Name of Recipient - Safari Youth Club

To build capacity of the organization for the future by developing a strategic plan and provide coaching for the Executive Director.

Name of Recipient - New Hampshire Public Radio

To ensure quality advocacy, nonprofit capacity building and knowledge development for the health system in NH by sustaining the general operations of key NH nonprofits.

Name of Recipient - Early Learning NH

To strengthen the childcare sector and support its workforce by improving business and management resources and supports.

Name of Recipient - New Hampshire Center for Nonprofits

To ensure quality advocacy, nonprofit capacity building and knowledge development for the health system in NH by sustaining the general operations of key NH nonprofits.

Name of Recipient - New Hampshire Children's Trust, Inc.

To encourage alignment, coordination, and promotion of best practices across all early childhood coalitions in the state by facilitating a community of practice (COP) and supporting regional coalitions with Alliance leadership.

Part XIV Supplementary Information**3b** Grants and Contributions Approved for Future Payment Continuation of Purpose of Grant or Contribution

Name of Recipient - Marnita's Table Inc

To engage diverse individuals across the state to participate, learn, sustain, and grow their inclusive community of practice, while focusing on building trust across differences.

Name of Recipient - University of New Hampshire

To engage a diverse set of constituents to find common ground around policy solutions addressing health, social, and public health systems in NH by identifying key health policy shifts, researching and analyzing impacts using focused data points, disseminating information to describe implications of policies, and developing processes to shape policy pathways.

Name of Recipient - New Hampshire Center for Justice & Equity

To advance issues of racial and economic justice for all residents of New Hampshire through a collective impact approach by providing support for the NH Center for Justice & Equity's core programs.

Schedule B
(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No. 1545-0047

2021

Name of the organization

Endowment For Health, Inc.

Employer identification number

02-0512290

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or 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), 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), 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).

Name of organization	Employer identification number
Endowment For Health, Inc.	02-0512290

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MacKenzie Scott 1201 Third Avenue, Suite 4900 Seattle, WA 98101	\$ 6,926,155.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	Mascoma Bank 255 West Street Keene, NH 03431	\$ 15,000.	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.)

Name of organization

Employer identification number

Endowment For Health, Inc.**02-0512290****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
Endowment For Health, Inc.	02-0512290

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
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

Underpayment of Estimated Tax by Corporations

OMB No. 1545-0123

▶ Attach to the corporation's tax return. **Form 990-PF**▶ Go to www.irs.gov/Form2220 for instructions and the latest information.**2021**

Name **Endowment For Health, Inc.** Employer identification number **02-0512290**

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

Part I Required Annual Payment

1	Total tax (see instructions)	1	132,361.
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a	
2b	Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method	2b	
2c	Credit for federal tax paid on fuels (see instructions)	2c	
2d	Total. Add lines 2a through 2c	2d	
3	Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty	3	132,361.
4	Enter the tax shown on the corporation's 2020 income tax return. See instructions. Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5	4	66,386.
5	Required annual payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3	5	66,386.

Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

- 6 ☐ The corporation is using the adjusted seasonal installment method.
- 7 ☒ The corporation is using the annualized income installment method.
- 8 ☒ The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment

	(a)	(b)	(c)	(d)	
9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year ...	9	02/15/22	03/15/22	06/15/22	09/15/22
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column	10		42,644.	56,627.	19,815.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions	11	19,628.	23,016.	75,288.	1,155.
Complete lines 12 through 18 of one column before going to the next column.					
12 Enter amount, if any, from line 18 of the preceding column	12		19,628.		18,661.
13 Add lines 11 and 12	13		42,644.	75,288.	19,816.
14 Add amounts on lines 16 and 17 of the preceding column	14				
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	19,628.	42,644.	75,288.	19,816.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		0.	0.	
17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	17				
18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column	18	19,628.		18,661.	

Go to **Part IV** on page 2 to figure the penalty. Do not go to **Part IV** if there are no entries on line 17 - no penalty is owed.

LHA For Paperwork Reduction Act Notice, see separate instructions.

Form 2220 (2021)

Part IV Figuring the Penalty

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. (C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month. Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions	19			
20 Number of days from due date of installment on line 9 to the date shown on line 19	20			
21 Number of days on line 20 after 4/15/2021 and before 7/1/2021	21			
22 Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 3\% (0.03)}{365}$	22	\$	\$	\$
23 Number of days on line 20 after 6/30/2021 and before 10/1/2021	23			
24 Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 3\% (0.03)}{365}$	24	\$	\$	\$
25 Number of days on line 20 after 9/30/2021 and before 1/1/2022	25			
26 Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 3\% (0.03)}{365}$	26	\$	\$	\$
27 Number of days on line 20 after 12/31/2021 and before 4/1/2022	27			
28 Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 3\% (0.03)}{365}$	28	\$	\$	\$
29 Number of days on line 20 after 3/31/2022 and before 7/1/2022	29			
30 Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$	30	\$	\$	\$
31 Number of days on line 20 after 6/30/2022 and before 10/1/2022	31			
32 Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$	32	\$	\$	\$
33 Number of days on line 20 after 9/30/2022 and before 1/1/2023	33			
34 Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$	34	\$	\$	\$
35 Number of days on line 20 after 12/31/2022 and before 3/16/2023	35			
36 Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{365}$	36	\$	\$	\$
37 Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$
38 Penalty. Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns	38	\$		0.

* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Form 2220 (2021)

Schedule A Adjusted Seasonal Installment Method and Annualized Income Installment Method

See instructions.

Form 1120-S filers: For lines 1, 2, 3, and 21, "taxable income" refers to excess net passive income or the amount on which tax is imposed under section 1374(a), whichever applies.**Part I Adjusted Seasonal Installment Method****Caution:** Use this method only if the base period percentage for any 6 consecutive months is at least 70%.
See instructions.

	(a)	(b)	(c)	(d)
	First 3 months	First 5 months	First 8 months	First 11 months
1 Enter taxable income for the following periods.				
a Tax year beginning in 2018	1a			
b Tax year beginning in 2019	1b			
c Tax year beginning in 2020	1c			
2 Enter taxable income for each period for the tax year beginning in 2021. See the instructions for the treatment of extraordinary items	2			
3 Enter taxable income for the following periods.	First 4 months	First 6 months	First 9 months	Entire year
a Tax year beginning in 2018	3a			
b Tax year beginning in 2019	3b			
c Tax year beginning in 2020	3c			
4 Divide the amount in each column on line 1a by the amount in column (d) on line 3a	4			
5 Divide the amount in each column on line 1b by the amount in column (d) on line 3b	5			
6 Divide the amount in each column on line 1c by the amount in column (d) on line 3c	6			
7 Add lines 4 through 6	7			
8 Divide line 7 by 3.0	8			
9a Divide line 2 by line 8	9a			
b Extraordinary items (see instructions)	9b			
c Add lines 9a and 9b	9c			
10 Figure the tax on the amt on ln 9c using the instr for Form 1120, Sch J, line 2, or comparable line of corp's return	10			
11a Divide the amount in columns (a) through (c) on line 3a by the amount in column (d) on line 3a	11a			
b Divide the amount in columns (a) through (c) on line 3b by the amount in column (d) on line 3b	11b			
c Divide the amount in columns (a) through (c) on line 3c by the amount in column (d) on line 3c	11c			
12 Add lines 11a through 11c	12			
13 Divide line 12 by 3.0	13			
14 Multiply the amount in columns (a) through (c) of line 10 by columns (a) through (c) of line 13. In column (d), enter the amount from line 10, column (d)	14			
15 Enter any alternative minimum tax (trusts only) for each payment period. See instructions	15			
16 Enter any other taxes for each payment period. See instr.	16			
17 Add lines 14 through 16	17			
18 For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions	18			
19 Total tax after credits. Subtract line 18 from line 17. If zero or less, enter -0-	19			

Part II ^{**} Annualized Income Installment Method

	(a)	(b)	(c)	(d)
	First <u>2</u> months	First <u>3</u> months	First <u>6</u> months	First <u>9</u> months
20 Annualization periods (see instructions)	20			
21 Enter taxable income for each annualization period. See instructions for the treatment of extraordinary items	21	1,533,940.	5,656,165.	6,425,527.
22 Annualization amounts (see instructions)	22	6.000000	4.000000	2.000000
23a Annualized taxable income. Multiply line 21 by line 22	23a	6,135,760.	11,312,330.	8,567,348.
b Extraordinary items (see instructions)	23b			
c Add lines 23a and 23b	23c	6,135,760.	11,312,330.	8,567,348.
24 Figure the tax on the amount on line 23c using the instructions for Form 1120, Schedule J, line 2, or comparable line of corporation's return	24	85,287.	157,241.	119,086.
25 Enter any alternative minimum tax (trusts only) for each payment period (see instructions)	25			
26 Enter any other taxes for each payment period. See instr.	26			
27 Total tax. Add lines 24 through 26	27	85,287.	157,241.	119,086.
28 For each period, enter the same type of credits as allowed on Form 2220, lines 1 and 2c. See instructions	28			
29 Total tax after credits. Subtract line 28 from line 27. If zero or less, enter -0-	29	85,287.	157,241.	119,086.
30 Applicable percentage	30	25%	50%	75%
31 Multiply line 29 by line 30	31	42,644.	117,931.	119,086.

Part III Required Installments

	1st installment	2nd installment	3rd installment	4th installment
Note: Complete lines 32 through 38 of one column before completing the next column.				
32 If only Part I or Part II is completed, enter the amount in each column from line 19 or line 31. If both parts are completed, enter the smaller of the amounts in each column from line 19 or line 31	32	0.	42,644.	117,931.
33 Add the amounts in all preceding columns of line 32. See instructions	33		42,644.	99,271.
34 Adjusted seasonal or annualized income installments. Subtract line 33 from line 32. If zero or less, enter -0-	34		42,644.	75,287.
35 Enter 25% (0.25) of line 5 on page 1 of Form 2220 in each column. Note: "Large corporations," see the instructions for line 10 for the amounts to enter	35	16,597.	49,584.	33,090.
36 Subtract line 38 of the preceding column from line 37 of the preceding column	36		16,597.	23,537.
37 Add lines 35 and 36	37	16,597.	66,181.	56,627.
38 Required installments. Enter the smaller of line 34 or line 37 here and on page 1 of Form 2220, line 10. See instructions	38	0.	42,644.	56,627.
				19,815.

Form 2220 (2021)

**** Annualized Income Installment Method Using Standard Option**

Form 990-PF Interest on Savings and Temporary Cash Investments Statement 1

Source	(a) Revenue Per Books	(b) Net Investment Income	(c) Adjusted Net Income
Investment Income	1,491.	1,491.	0.
Total to Part I, line 3	1,491.	1,491.	0.

Form 990-PF Dividends and Interest from Securities Statement 2

Source	Gross Amount	Capital Gains Dividends	(a) Revenue Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income
Investment Income	797,141.	0.	797,141.	797,141.	0.
Investment Income - K-1	0.	0.	0.	391,968.	0.
To Part I, line 4	797,141.	0.	797,141.	1,189,109.	0.

Form 990-PF Other Income Statement 3

Description	(a) Revenue Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income
Investment Income - K-1	0.	798,997.	0.
Total to Form 990-PF, Part I, line 11	0.	798,997.	0.

Form 990-PF Accounting Fees Statement 4

Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Accounting Fees	28,464.	0.	0.	27,033.
To Form 990-PF, Pg 1, ln 16b	28,464.	0.	0.	27,033.

Form 990-PF	Other Professional Fees			Statement 5
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Consulting - Investments	101,295.	101,295.	0.	0.
Consulting	74,363.	0.	0.	75,124.
Investment Fees	53,270.	53,270.	0.	0.
To Form 990-PF, Pg 1, ln 16c	228,928.	154,565.	0.	75,124.

Form 990-PF	Taxes			Statement 6
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Federal Excise Tax	94,322.	0.	0.	0.
Payroll Tax	53,267.	0.	0.	53,267.
Other Tax	519.	0.	0.	519.
To Form 990-PF, Pg 1, ln 18	148,108.	0.	0.	53,786.

Form 990-PF	Other Expenses			Statement 7
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Miscellaneous	21,704.	0.	0.	17,168.
Insurance	25,144.	0.	0.	25,144.
Office Expenses	5,825.	0.	0.	5,825.
Telephone Expense	8,446.	0.	0.	9,147.
Computer/Equipment Repairs & Maintenance	39,946.	0.	0.	39,946.
Freight/Postage	1,317.	0.	0.	1,317.
Other Portfolio Deductions from Passthroughs	0.	527,877.	0.	0.
To Form 990-PF, Pg 1, ln 23	102,382.	527,877.	0.	98,547.

Form 990-PF

Corporate Bonds

Statement 8

Description	Book Value	Fair Market Value
TIAA Cref	2,421,033.	2,421,033.
Colchis	361,032.	361,032.
Total to Form 990-PF, Part II, line 10c	2,782,065.	2,782,065.

Form 990-PF	Other Investments	Statement 9	
Description	Valuation Method	Book Value	Fair Market Value
Rhumblin	FMV	4,150,500.	4,150,500.
Gardia Hamilton	FMV	4,253,420.	4,253,420.
Brown Capital	FMV	862,213.	862,213.
Guggenheim Russell 1000 Equal	FMV	6,698,238.	6,698,238.
Vanguard Total International	FMV	3,687,448.	3,687,448.
VNG Emerging	FMV	439,462.	439,462.
Vanguard Total Stock Market	FMV	9,083,705.	9,083,705.
Highclere International Investors	FMV		
SMID Fund		2,020,495.	2,020,495.
Bain Capital	FMV	10,389.	10,389.
NC Growers	FMV	500,000.	500,000.
Legacy XI	FMV	40,000.	40,000.
DK Distressed	FMV	975,065.	975,065.
Rose Affordable Housing	FMV	1,071,658.	1,071,658.
Legacy X	FMV	405,543.	405,543.
Lone Cascade	FMV	1,118,290.	1,118,290.
Lone Cedar	FMV	1,236,065.	1,236,065.
Accolade	FMV	296,876.	296,876.
RCP Direct IV	FMV	296,753.	296,753.
RCP 16	FMV	41,853.	41,853.
RCP XIII	FMV	850,763.	850,763.
Lyme Timber	FMV	419,006.	419,006.
Legacy 9	FMV	1,606,058.	1,606,058.
AG Realty 10	FMV	932,374.	932,374.
RCP Fund XIV	FMV	514,218.	514,218.
Generation Global	FMV	3,874,986.	3,874,986.
Generation Asia	FMV	1,472,565.	1,472,565.
AG Realty Fund 9	FMV	1,006,535.	1,006,535.
Legacy Venture VIII, LLC	FMV	2,230,089.	2,230,089.
Juniper II	FMV	1,692,785.	1,692,785.
RCP XI	FMV	1,098,915.	1,098,915.
Southpoint	FMV	2,480,394.	2,480,394.
RCP XII	FMV	1,133,303.	1,133,303.
Davidson Kemper	FMV	2,805,440.	2,805,440.
GEM	FMV	518,878.	518,878.
NGP	FMV	1,568,151.	1,568,151.
Juniper III	FMV	1,469,310.	1,469,310.
Legacy Venture VI LLC	FMV	2,013,508.	2,013,508.
Borealis Granite Fund	FMV	527,319.	527,319.
Legacy Venture VII LLC	FMV	3,173,622.	3,173,622.
RCP Fund IX LP	FMV	928,162.	928,162.
BPG Investment Partnership VIIA, LP	FMV	852,735.	852,735.
Varde	FMV	2,140,306.	2,140,306.
Nut Tree	FMV	2,579,704.	2,579,704.
Nyes Lege	FMV	3,526,104.	3,526,104.
StoneRidge	FMV	108,488.	108,488.
Anchorage	FMV	261,420.	261,420.
Total to Form 990-PF, Part II, line 13		78,973,111.	78,973,111.

Form 990-PF Depreciation of Assets Not Held for Investment Statement 10

Description	Cost or Other Basis	Accumulated Depreciation	Book Value
Equipment	88,393.	88,393.	0.
Furniture	36,348.	36,348.	0.
Total To Fm 990-PF, Part II, ln 14	124,741.	124,741.	0.

Form 990-PF Transfers to Controlled Entities Statement 11
Part VI-A, Line 11

Name of Controlled Entity	Employer ID No
Health Strategies of New Hampshire, Inc.	20-8632971

Address

One Pillsbury Street, Suite 301
Concord, NH 03301

Description of Transfer

Grant to wholly-owned subsidiary.

	Amount of Transfer
	291,793.
Total Amount of Transfers to Controlled Entities	291,793.

Form 990-PF

Schedule of Controlled Entities
Part VI-A, Line 11

Statement 12

Name of Controlled EntityEmployer ID No

Health Strategies of New Hampshire, Inc.

20-8632971

Address

Excess Business Holding [] Yes [X] No

One Pillsbury Street, Suite 301
Concord, NH 03301

Form 990-PF Part VII - List of Officers, Directors Statement 13
Trustees and Foundation Managers

Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan	Expense Contrib	Expense Account
Betsy Paine One Pillsbury Street, Suite 301 Concord, NH 03301	Board Chair 1.00	0.	0.	0.	0.
Maria Padin One Pillsbury Street, Suite 301 Concord, NH 03301	Vice Chair 1.00	0.	0.	0.	0.
Steve Lawlor One Pillsbury Street, Suite 301 Concord, NH 03301	Treasurer 1.00	0.	0.	0.	0.
Chris Matthews One Pillsbury Street, Suite 301 Concord, NH 03301	Secretary 1.00	0.	0.	0.	0.
Frances Strayer One Pillsbury Street, Suite 301 Concord, NH 03301	Secretary 1.00	0.	0.	0.	0.
Scott Bogle One Pillsbury Street, Suite 301 Concord, NH 03301	Director 1.00	0.	0.	0.	0.
Frank DeGiovanni One Pillsbury Street, Suite 301 Concord, NH 03301	Director 1.00	0.	0.	0.	0.
Mike Devlin One Pillsbury Street, Suite 301 Concord, NH 03301	Director 1.00	0.	0.	0.	0.
Ned Helms One Pillsbury Street, Suite 301 Concord, NH 03301	Director 1.00	0.	0.	0.	0.
Tricia Lucas One Pillsbury Street, Suite 301 Concord, NH 03301	Director 1.00	0.	0.	0.	0.

<u>Endowment For Health, Inc.</u>		<u>02-0512290</u>		
Deo Mwano One Pillsbury Street, Suite 301 Concord, NH 03301	Director 1.00	0.	0.	0.
Jennifer Near One Pillsbury Street, Suite 301 Concord, NH 03301	Director 1.00	0.	0.	0.
Michael Ostrowski One Pillsbury Street, Suite 301 Concord, NH 03301	Director 1.00	0.	0.	0.
Marie Ramas One Pillsbury Street, Suite 301 Concord, NH 03301	Director 1.00	0.	0.	0.
John Snow One Pillsbury Street, Suite 301 Concord, NH 03301	Director 1.00	0.	0.	0.
Patti Stolte One Pillsbury Street, Suite 301 Concord, NH 03301	Director 1.00	0.	0.	0.
Yvonne Goldsberry One Pillsbury Street, Suite 301 Concord, NH 03301	President 37.50	205,569.	31,561.	0.
Susan Fulton One Pillsbury Street, Suite 301 Concord, NH 03301	Chief Financial Officer 37.50	115,587.	20,403.	0.
Totals included on 990-PF, Page 6, Part VII		<u>321,156.</u>	<u>51,964.</u>	<u>0.</u>

Form 990-PF

Expenditure Responsibility Statement
Part VI-B, Line 5d

Statement 14

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
10,000.	09/21/20	5,000.

Purpose of Grant

(FY 2020) To enhance the knowledge of NH residents, health policy leaders and practitioners about important health equity issues, activities, and successful national/state-based programs by supporting specific communication strategies.

Dates of Reports by Grantee

June 30, 2021; September 30, 2021; June 30, 2022.

Any Diversion by Grantee

5,000 was returned to the Endowment for Health.

Results of Verification

June 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
10,000.	09/21/20	10,000.

Purpose of Grant

(FY 2020) To put issues of race and equity at the center of civic engagement in NHs civic institutions and public life by developing the combination of knowledge, skills, and motivation to make that difference.

Dates of Reports by Grantee

June 30, 2022.

Any Diversion by Grantee

No

Results of Verification

June 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
10,000.	09/21/20	10,000.

Purpose of Grant

(FY 2020) To initiate a change in NH's Law Enforcement/Criminal Justice culture towards one of improved equity and acceptance by development and implementation of an implicit bias training program for NH's law enforcement/criminal justice sector personnel.

Dates of Reports by Grantee

June 30, 2022.

Any Diversion by Grantee

No

Results of Verification

June 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's Address

One Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
15,000.	09/21/20	9,000.

Purpose of Grant

(FY 2020) To organize for systems change for racial and economic equity by using an Inclusive Recovery Framework.

Dates of Reports by Grantee

June 30, 2022.

Any Diversion by Grantee

\$6,000 was returned to the Endowment for Health.

Results of Verification

June 30, 2022.

Grantee's Name

Blue Cross Blue Shield of Massachusetts Foundation

Grantee's Address101 Huntington Ave, Suite 300
Boston, MA 02199

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
20,000.	01/25/21	20,000.

Purpose of Grant

(FY 2021) To help newspaper, radio, television and online reporters and editors do a better job covering critical health care issues by participating in a comprehensive curriculum designed to enhance their knowledge of complex health policy issues.

Dates of Reports by Grantee

May 4, 2022

Any Diversion by Grantee

No

Results of Verification

September 30, 2022.

Grantee's Name

Fannie E. Rippel Foundation

Grantee's Address14 Maple Avenue; Suite 200
Morristown, NJ 07960

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
25,000.	01/25/21	25,000.

Purpose of Grant

(FY 2021) Provide support to the Rippel Foundation to provide leadership and oversight of the FORESIGHT Initiative.

Dates of Reports by Grantee

March 1, 2022

Any Diversion by Grantee

No

Results of Verification

September 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
20,000.	03/22/21	20,000.

Purpose of Grant

(FY 2021) To improve the supply of health care workers in New Hampshire by better aligning health care workforce initiatives, addressing gaps and minimizing redundancies through a comprehensive plan for the state.

Dates of Reports by Grantee

September 30, 2021 and June 30, 2022

Any Diversion by Grantee

No

Results of Verification

September 30, 2021; June 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
25,000.	06/28/21	22,100.

Purpose of Grant

(FY 2021) To provide a deeper level of awareness and engagement for journalists reporting on issues of race by providing a multi-session training opportunity.

Dates of Reports by Grantee

September 30, 2021; June 30, 2022.

Any Diversion by Grantee

\$2,900 was returned to the Endowment. All other funds were expended as intended.

Results of Verification

September 30, 2021; June 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
4,760.	04/12/21	4,760.

Purpose of Grant

(FY 2021) To address disparities associated with COVID-19 by leveraging federal funds.

Dates of Reports by Grantee

September 30, 2021; June 30, 2022.

Any Diversion by Grantee

No

Results of Verification

September 30, 2021; June 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
8,000.	12/08/20	8,000.

Purpose of Grant

(FY 2021) To provide technical assistance to NH Department of Health and Human Services Division of Public Health in Framing the Social Determinants of Health in public communications.

Dates of Reports by Grantee

June 30, 2021; June 30, 2022.

Any Diversion by Grantee

No

Results of Verification

June 30, 2021; June 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's Address

One Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
66,000.	11/23/20	66,000.

Purpose of Grant

(FY 2021) To enhance the capacity of NHs leaders and communities to advance health and racial equity by working collaboratively within and among specific sector groups.

Dates of Reports by Grantee

September 30, 2021; June 30, 2022.

Any Diversion by Grantee

No

Results of Verification

September 30, 2021; June 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
155,550.	11/23/20	132,522.

Purpose of Grant

(FY 2021) To quantify early childhood racial inequities and recommend policy solutions that would promote fair and just opportunities for all NH young children and their families by conducting a study.

Dates of Reports by Grantee

September 30, 2021; June 30, 2022.

Any Diversion by Grantee

23,028 was returned to the Endowment for Health.

Results of Verification

September 30, 2021; June 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
40,000.	09/27/21	25,000.

Purpose of Grant

(FY 2021) To collect, analyze and disseminate shared measures for the early childhood field by maintaining an online child wellbeing data hub.

Dates of Reports by Grantee

September 30, 2022. Final reports are due from Grantee on June 30, 2023.

Any Diversion by Grantee

All funds will be expended as intended in the grant.

Results of Verification

September 30, 2022. Next verification will occur June 30, 2023.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
5,000.	09/27/21	5,000.

Purpose of Grant

(FY 2021) To enhance the knowledge of NH residents, health policy leaders and practitioners about important health equity issues, activities, and successful national/state-based programs by supporting specific communication strategies.

Dates of Reports by Grantee

September 30, 2022

Any Diversion by Grantee

No

Results of Verification

September 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
175,000.	09/27/21	154,880.

Purpose of Grant

(FY 2021) To enhance the capacity of NHs leaders and communities to advance health and racial equity by working collaboratively within and among specific sector groups.

Dates of Reports by Grantee

September 30, 2022.

Any Diversion by Grantee

All funds will be expended as intended in the grant.

Results of Verification

September 30, 2022. Next verification will occur June 30, 2023.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
10,000.	06/08/21	10,000.

Purpose of Grant

(FY 2021) To strengthen the capacity of funders in NH to strategically coordinate and co-fund grantmaking by completing a baseline report that maps the states philanthropic landscape.

Dates of Reports by Grantee

September 30, 2021; June 30, 2022.

Any Diversion by Grantee

No

Results of Verification

September 30, 2021; June 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
10,000.	09/27/21	10,000.

Purpose of Grant

(FY 2021) To promote health equity in the behavioral health field by supporting costs associated with a conference keynote speaker(s).

Dates of Reports by Grantee

June 30, 2022.

Any Diversion by Grantee

No

Results of Verification

June 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
21,000.	09/27/21	21,000.

Purpose of Grant

(FY 2021) To provide consultant support for development of a messaging framework for different audiences.

Dates of Reports by Grantee

September 30, 2022.

Any Diversion by Grantee

No

Results of Verification

September 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
5,000.	08/10/21	5,000.

Purpose of Grant

(FY 2021) To conduct research, convene key stakeholders and develop community engagement materials to support improved health policy decision-making.

Dates of Reports by Grantee

June 30, 2022.

Any Diversion by Grantee

No

Results of Verification

June 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
15,000.	09/27/21	12,366.

Purpose of Grant

(FY 2021) To strengthen the field of childrens behavioral health by strategically supporting technical assistance to leverage funding from federal and/or national foundation sources.

Dates of Reports by Grantee

September 30, 2022. Reports are Due from Grantee on June 30, 2023.

Any Diversion by Grantee

All funds will be expended as intended in the grant.

Results of Verification

September 30, 2022. Next verification will occur June 30, 2023.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
30,000.	01/31/22	30,000.

Purpose of Grant

(FY 2022) To improve the supply of health care workers in New Hampshire by better aligning health care workforce initiatives, addressing gaps and minimizing redundancies through a comprehensive plan for the state.

Dates of Reports by Grantee

June 30, 2022.

Any Diversion by Grantee

No

Results of Verification

June 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
10,000.	03/29/22	10,000.

Purpose of Grant

(FY 2022) To improve the supply of health care workers in New Hampshire by better aligning health care workforce initiatives, addressing gaps and minimizing redundancies through implementation of a comprehensive plan for the state.

Dates of Reports by Grantee

June 30, 2022.

Any Diversion by Grantee

No

Results of Verification

June 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
25,000.	11/22/21	25,000.

Purpose of Grant

(FY 2022) To provide consultant support for development of a messaging framework for different audiences.

Dates of Reports by Grantee

September 30, 2022.

Any Diversion by Grantee

No

Results of Verification

September 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
75,000.	08/31/22	0.

Purpose of Grant

(FY 2022) To provide consultant support for development of a messaging framework for different audiences.

Dates of Reports by Grantee

Reports are Due from Grantee on June 30, 2023.

Any Diversion by Grantee

All funds will be expended as intended in the grant.

Results of Verification

Will be verified on June 30, 2023.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
35,000.	06/20/22	17,773.

Purpose of Grant

(FY 2022) To improve the supply of health care workers in New Hampshire by better aligning health care workforce initiatives, addressing gaps and minimizing redundancies through implementation of a comprehensive plan for the state.

Dates of Reports by Grantee

September 30, 2022

Any Diversion by Grantee

All funds will be expended as intended in the grant.

Results of Verification

September 30, 2022. Next verification will occur on June 30, 2023.

Grantee's Name

New Hampshire Center for Justice & Equity

Grantee's Address30 Amherst Street
Manchester, NH 03104

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
1,000,000.	09/26/22	0.

Purpose of Grant

(FY 2022) To advance issues of racial and economic justice for all residents of New Hampshire through a collective impact approach by providing support for the NH Center for Justice & Equity's core programs.

Dates of Reports by Grantee

Reports are due from Grantee on September 30, 2023.

Any Diversion by Grantee

All funds will be expended as intended in the grant.

Results of Verification

Will be verified on September 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's Address

One Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
9,488.	04/13/22	7,369.

Purpose of Grant

To strengthen the field of healthy aging by leveraging funding from federal sources.

Dates of Reports by Grantee

June 30, 2022

Any Diversion by Grantee

All funds will be expended as intended in the grant.

Results of Verification

June 30, 2022. Next verification will occur on June 30, 2023.

Grantee's Name

Blue Cross Blue Shield of Massachusetts Foundation

Grantee's Address101 Huntington Ave, Suite 300
Boston, MA 02199

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
20,000.	11/22/21	0.

Purpose of Grant

To help newspaper, radio, television, and online reporters and editors do a better job covering critical health care issues by participating in a comprehensive curriculum designed to enhance their knowledge of complex health policy issues.

Dates of Reports by Grantee

Reports are due from Grantee on December 31, 2022.

Any Diversion by Grantee

All funds will be expended as intended in the grant.

Results of Verification

Will be verified on December 31, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
10,000.	09/23/22	0.

Purpose of Grant

(FY 2022) To strengthen the field of early childhood by strategically supporting technical assistance to leverage funding from federal and/or national foundation sources.

Dates of Reports by Grantee

Reports are due from Grantee on June 30, 2023.

Any Diversion by Grantee

All funds will be expended as intended in the grant.

Results of Verification

Will be verified on June 30, 2023.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
28,000.	07/31/22	0.

Purpose of Grant

(FY 2022) To provide policy and decision makers with information that helps them understand and address the underlying structural factors that perpetuate inequities by amplifying diverse voices and perspectives to examine how social and structural determinants impact childrens outcomes in New Hampshire.

Dates of Reports by Grantee

Reports are due from Grantee on June 30, 2023.

Any Diversion by Grantee

All funds will be expended as intended in the grant.

Results of Verification

Will be verified on June 30, 2023.

Grantee's Name

Health Strategies of New Hampshire

Grantee's Address

One Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
10,000.	08/31/22	0.

Purpose of Grant

(FY 2022) To strengthen the capacity of funders in NH to strategically coordinate and co-fund grantmaking by completing a baseline report that maps the states philanthropic landscape.

Dates of Reports by Grantee

Reports are due from Grantee on June 30, 2023.

Any Diversion by Grantee

All funds will be expended as intended in the grant.

Results of Verification

Will be verified on June 30, 2023.

Grantee's Name

Health Strategies of New Hampshire

Grantee's Address

One Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
6,000.	07/31/22	0.

Purpose of Grant

(FY 2022) To organize for systems change for racial and economic equity by using an Inclusive Recovery Framework.

Dates of Reports by Grantee

Reports are due from Grantee on June 30, 2023.

Any Diversion by Grantee

All funds will be expended as intended in the grant.

Results of Verification

Will be verified on June 30, 2023.

Grantee's Name

Health Strategies of New Hampshire

Grantee's Address

One Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
10,000.	10/08/21	9,490.

Purpose of Grant

(FY 2022) To create a shared narrative and messaging for a more welcoming state by supporting a community of practice.

Dates of Reports by Grantee

June 30, 2022.

Any Diversion by Grantee

All funds will be expended as intended in the grant.

Results of Verification

June 30, 2022. Next verification will occur June 30, 2023.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
39,900.	07/31/22	0.

Purpose of Grant

(FY 2022) To ensure effective messaging on welcoming, racial justice and equity in New Hampshire that resonates with Granite Staters across ideologies and demographics by conducting qualitative message testing research.

Dates of Reports by Grantee

Reports are due from Grantee on June 30, 2023.

Any Diversion by Grantee

All funds will be expended as intended in the grant.

Results of Verification

Will be verified on June 30, 2023.

Grantee's Name

New Hampshire Center for Justice & Equity

Grantee's Address30 Amherst Street
Manchester, NH 03104

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
200,000.	08/31/22	0.

Purpose of Grant

(FY 2022) To advance issues of racial and economic justice for all residents of New Hampshire through a collective impact approach by providing backbone support to the NH Center for Justice & Equity.

Dates of Reports by Grantee

Reports are due from Grantee on September 30, 2023.

Any Diversion by Grantee

All funds will be expended as intended in the grant.

Results of Verification

Will be verified on September 30, 2022.

Grantee's Name

Health Strategies of New Hampshire

Grantee's AddressOne Pillsbury Street, Suite 301
Concord, NH 03301

<u>Grant Amount</u>	<u>Date of Grant</u>	<u>Amount Expended</u>
40,333.	09/23/22	0.

Purpose of Grant

(FY 2022) To enhance access to a high quality system of care for early childhood mental health services by conducting research

Dates of Reports by Grantee

Reports are due from Grantee on June 30, 2023.

Any Diversion by Grantee

All funds will be expended as intended in the grant.

Results of Verification

Will be verified on June 30, 2023.

Form 990-PF	Summary of Direct Charitable Activities	Statement 15
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Activity One

Staff working to collaborate with community partners to advance health and equity for all residents in NH, in particular racial, ethnic and language minorities in NH, in order to solve complex social problems by convening stakeholders, providing technical and policy expertise, and supporting and expanding communication about issues.

Expenses

To Form 990-PF, Part VIII-A, line 1

335,826.

Form 990-PF	Summary of Direct Charitable Activities	Statement 16
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Activity Two

Staff working to collaborate with community partners to build health policy capacity in NH to solve complex social problems (including health care workforce) by convening stakeholders, providing technical and policy expertise, and expanding communication about issues.

Expenses

To Form 990-PF, Part VIII-A, line 2

294,881.

Form 990-PF	Summary of Direct Charitable Activities	Statement 17
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Activity Three

Staff working to collaborate with community partners to ensure the healthy development of children, advancing equity, and improving the behavioral health of children and their families in NH to solve complex social problems by convening stakeholders, providing technical and policy expertise, and supporting and expanding communication about issues.

Expenses

To Form 990-PF, Part VIII-A, line 3

109,007.

Form 990-PF

Summary of Direct Charitable Activities

Statement 18

Activity Four

Staff working in collaboration with community partners to advance healthy aging for all NH residents by convening stakeholders, providing technical and policy expertise, and supporting communication efforts to advance a new conversation about aging in our state.

Expenses

To Form 990-PF, Part VIII-A, line 4

76,133.

Form 990-PF

Grant Application Submission Information
Part XIV, Lines 2a through 2d

Statement 19

Name and Address of Person to Whom Applications Should be Submitted

Endowment for Health, Inc.
One Pillsbury Street, Suite 301
Concord, NH 03301

Telephone Number

603-228-2448

Form and Content of Applications

Call 603-228-2448 for grant application or see the Endowment's website:
www.endowmentforhealth.org.

Any Submission Deadlines

Various dates depending on type of grant: see application for details.

Restrictions and Limitations on Awards

Projects must benefit the citizens of New Hampshire and be health related.
Recipients must be 501(c)(3) organizations or municipalities. See
application guidelines for additional restrictions.

