

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

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2022

Open to Public Inspection

For calendar year 2022 or tax year beginning		, 2022, and ending	, 20						
LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION PO BOX 1040 LEWISTON, ID 83501-1040		A Employer identification number 82-1558798							
		B Telephone number (see instructions) (208) 664-6448							
		C If exemption application is pending, check here <input type="checkbox"/>							
		D 1 Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>							
G Check all that apply: <table style="display: inline-table; vertical-align: top; margin-right: 20px;"> <tr><td><input type="checkbox"/> Initial return</td></tr> <tr><td><input type="checkbox"/> Final return</td></tr> <tr><td><input type="checkbox"/> Address change</td></tr> </table> <table style="display: inline-table; vertical-align: top;"> <tr><td><input type="checkbox"/> Initial return of a former public charity</td></tr> <tr><td><input type="checkbox"/> Amended return</td></tr> <tr><td><input type="checkbox"/> Name change</td></tr> </table>		<input type="checkbox"/> Initial return	<input type="checkbox"/> Final return	<input type="checkbox"/> Address change	<input type="checkbox"/> Initial return of a former public charity	<input type="checkbox"/> Amended return	<input type="checkbox"/> Name change		
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H Check type of organization: <table style="display: inline-table; vertical-align: top; margin-right: 20px;"> <tr><td><input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation</td></tr> <tr><td><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust</td></tr> <tr><td><input type="checkbox"/> Other taxable private foundation</td></tr> </table>		<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					
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<input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust									
<input type="checkbox"/> Other taxable private foundation									
I Fair market value of all assets at end of year (from Part II, column (c), line 16) \$		J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d), must be on cash basis.)							

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) (see instructions).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule) . . .				
	2 Check <input checked="" type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	108.	108.	108.	
	4 Dividends and interest from securities	553,046.	553,046.	553,046.	
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	-664,865.			
	b Gross sales price for all assets on line 6a	7,982,041.			
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain			0.	
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)					
12 Total. Add lines 1 through 11.	-111,711.	553,154.	553,154.		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0.			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)	7,623.			7,623.
	b Accounting fees (attach sch)	7,750.	3,875.		3,875.
	c Other professional fees (attach sch)	125,037.	61,376.		63,661.
	17 Interest				
	18 Taxes (attach schedule)(see instrs)	43,557.	43,557.		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)				
	SEE STATEMENT 5	73,955.	62,880.		11,075.
	24 Total operating and administrative expenses. Add lines 13 through 23.	257,922.	171,688.		86,234.
25 Contributions, gifts, grants paid.	1,271,424.			1,271,424.	
26 Total expenses and disbursements. Add lines 24 and 25	1,529,346.	171,688.	0.	1,357,658.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-1,641,057.				
b Net investment income (if negative, enter -0-)		381,466.			
c Adjusted net income (if negative, enter -0-)			553,154.		

Part II Balance Sheets		Beginning of year (a) Book Value	End of year	
			(b) Book Value	(c) Fair Market Value
Assets	1 Cash — non-interest-bearing			
	2 Savings and temporary cash investments			
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach sch)			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments — U.S. and state government obligations (attach schedule)			
	b Investments — corporate stock (attach schedule)			
	c Investments — corporate bonds (attach schedule)			
	11 Investments — land, buildings, and equipment: basis			
Liabilities	Less: accumulated depreciation (attach schedule)			
	12 Investments — mortgage loans			
	13 Investments — other (attach schedule)	24,700,877.	23,059,820.	
	14 Land, buildings, and equipment: basis			
	Less: accumulated depreciation (attach schedule)			
	15 Other assets (describe))			
	16 Total assets (to be completed by all filers — see the instructions. Also, see page 1, item I)	24,700,877.	23,059,820.	0.
	17 Accounts payable and accrued expenses			
Net Assets or Fund Balances	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, & other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe))			
	23 Total liabilities (add lines 17 through 22)	0.	0.	
Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. <input type="checkbox"/>	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here and complete lines 26 through 30. <input checked="" type="checkbox"/>			
	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	24,700,877.	23,059,820.	
	29 Total net assets or fund balances (see instructions)	24,700,877.	23,059,820.	
	30 Total liabilities and net assets/fund balances (see instructions)	24,700,877.	23,059,820.	

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	24,700,877.
2	Enter amount from Part I, line 27a.	2	-1,641,057.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3.	4	23,059,820.
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 29	6	23,059,820.

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	SECURITIES - SHORT TERM	P	VARIOUS	VARIOUS
b	SECURITIES - LONG TERM	P	VARIOUS	VARIOUS
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 4,904,902.		5,350,477.	-445,575.
b 3,077,139.		3,296,429.	-219,290.
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			-445,575.
b			-219,290.
c			
d			
e			

2 Capital gain net income or (net capital loss).....	<div style="border: 1px solid black; padding: 2px;"> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div>	2	-664,865.
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.....	<div style="border: 1px solid black; padding: 2px;"> If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 </div>	3	-445,575.

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)			
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).....			1	5,302.
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	5,302.
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	5,302.
6 Credits/Payments:				
a 2022 estimated tax pymts and 2021 overpayment credited to 2022.....	6a	28,760.		
b Exempt foreign organizations — tax withheld at source.....	6b			
c Tax paid with application for extension of time to file (Form 8868).....	6c			
d Backup withholding erroneously withheld.....	6d			
7 Total credits and payments. Add lines 6a through 6d.....			7	28,760.
8 Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached.....			8	
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			9	0.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10	23,458.
11 Enter the amount of line 10 to be: Credited to 2023 estimated tax	5,320.	Refunded	11	18,138.

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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?	1a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b	X
If the answer is "Yes" to 1a or 1b , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		
c Did the foundation file Form 1120-POL for this year?	1c	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?	2	X
If "Yes," attach a detailed description of the activities.		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	X
If "Yes," attach the statement required by <i>General Instruction T</i> .		
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?	6	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	7	X
8a Enter the states to which the foundation reports or with which it is registered. See instructions <u>ID</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.	8b	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 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," complete Part XIII.	9	X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses.	10	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	11	X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? ... Website address: <u>HTTPS://LEWISCLARKHEALTH.ORG</u>	13	X
14 The books are in care of <u>IDAHO TRUST BANK</u> Telephone no. <u>(208) 664-6448</u> Located at <u>622 E. SHERMAN AVE COEUR D'ALENE ID</u> ZIP + 4 <u>83814</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here. <input type="checkbox"/> N/A and enter the amount of tax-exempt interest received or accrued during the year. 15 <u>N/A</u>		
16 At any time during calendar year 2022, 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?	16	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?		X
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		X
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person?		X
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person?		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)?		X
(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.)		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.		
c	Organizations relying on a current notice regarding disaster assistance, check here. <input type="checkbox"/>		
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 2022?		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 2022, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2022? If "Yes," list the years 20 __ , 20 __ , 20 __ , 20 __		X
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement – see instructions.)		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20 __ , 20 __ , 20 __ , 20 __		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		X
b	If "Yes," did it have excess business holdings in 2022 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 2022.)		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		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 2022?		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	N/A
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? N/A If "Yes," attach the statement required by Regulations section 53.4945-5(d).	5d	
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. See instructions.**

(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
THOMAS PROHASKA 888 W. BROAD ST. BOISE, ID 83702	TRUSTEE 5.00	0.	0.	0.

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

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

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

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
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 N/A	
2	
3	
4	

Part VIII-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.

	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	25,076,302.
b	Average of monthly cash balances.....	1b	
c	Fair market value of all other assets (see instructions).....	1c	
d	Total (add lines 1a, b, and c).....	1d	25,076,302.
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	25,076,302.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions).....	4	376,145.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3.....	5	24,700,157.
6	Minimum investment return. Enter 5% (0.05) of line 5.....	6	1,235,008.

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	1,235,008.
2a	Tax on investment income for 2022 from Part V, line 5.....	2a	5,302.
b	Income tax for 2022. (This does not include the tax from Part V.).....	2b	
c	Add lines 2a and 2b.....	2c	5,302.
3	Distributable amount before adjustments. Subtract line 2c from line 1.....	3	1,229,706.
4	Recoveries of amounts treated as qualifying distributions.....	4	
5	Add lines 3 and 4.....	5	1,229,706.
6	Deduction from distributable amount (see instructions).....	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1.....	7	1,229,706.

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	1,357,658.
b	Program-related investments — total from Part VIII-B.....	1b	
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	1,357,658.

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Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1 Distributable amount for 2022 from Part X, line 7				1,229,706.
2 Undistributed income, if any, as of the end of 2022:				
a Enter amount for 2021 only			1,301,722.	
b Total for prior years: 20 __, 20 __, 20 __		0.		
3 Excess distributions carryover, if any, to 2022:				
a From 2017				
b From 2018				
c From 2019				
d From 2020				
e From 2021				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2022 from Part XI, line 4: \$ 1,357,658.				
a Applied to 2021, but not more than line 2a ..			1,301,722.	
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 2022 distributable amount				55,936.
e Remaining amount distributed out of corpus ..	0.			
5 Excess distributions carryover applied to 2022 (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 2021. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2022. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2023				1,173,770.
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 2017 not applied on line 5 or line 7 (see instructions) ..	0.			
9 Excess distributions carryover to 2023. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2018				
b Excess from 2019				
c Excess from 2020				
d Excess from 2021				
e Excess from 2022				

BAA

Form 990-PF (2022)

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9)

N/A

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2022, enter the date of the ruling					
b Check box to indicate whether the foundation is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2022	(b) 2021	(c) 2020	(d) 2019	
b 85% (0.85) of line 2a					
c Qualifying distributions from Part XI, line 4, for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test — enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test — enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed					
c "Support" alternative test — enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year — see instructions.)**1 Information Regarding Foundation Managers:**

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

NONE

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

NONE

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

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

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

SEE STATEMENT 6

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

SEE STATEMENT FOR LINE 2A

c Any submission deadlines:

SEE STATEMENT FOR LINE 2A

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

SEE STATEMENT FOR LINE 2A

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 SEE STATEMENT 7				
Total			3a	1,271,424.
b Approved for future payment				
Total			3b	

Underpayment of Estimated Tax by Corporations

Attach to the corporation's tax return.

Go to www.irs.gov/Form2220 for instructions and the latest information.

2022

Name

LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION

Employer identification number

82-1558798

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	5,302.
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1		
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		
2c	Credit for federal tax paid on fuels (see instructions)		
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	5,302.
4	Enter the tax shown on the corporation's 2021 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	28,744.
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	5,302.

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	5/15/22	6/15/22	9/15/22	12/15/22
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule 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	1,325.	1,325.	1,326.	1,326.
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	7,190.	7,190.	7,190.	7,190.
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		5,865.	11,730.	17,594.
13 Add lines 11 and 12	13		13,055.	18,920.	24,784.
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	7,190.	13,055.	18,920.	24,784.
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	5,865.	11,730.	17,594.	

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.

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 4/15/2022 and before 7/1/2022.	21			
22 Underpayment on line 17 $\times \frac{\text{Number of days on line 21}}{365} \times 4\% (0.04)$	22			
23 Number of days on line 20 after 6/30/2022 and before 10/1/2022.	23			
24 Underpayment on line 17 $\times \frac{\text{Number of days on line 23}}{365} \times 5\% (0.05)$	24			
25 Number of days on line 20 after 9/30/2022 and before 1/1/2023.	25			
26 Underpayment on line 17 $\times \frac{\text{Number of days on line 25}}{365} \times 6\% (0.06)$	26			
27 Number of days on line 20 after 12/31/2022 and before 4/1/2023.	27			
28 Underpayment on line 17 $\times \frac{\text{Number of days on line 27}}{365} \times 7\% (0.07)$	28			
29 Number of days on line 20 after 3/31/2023 and before 7/1/2023.	29			
30 Underpayment on line 17 $\times \frac{\text{Number of days on line 29}}{365} \times \text{ } \% \dots$	30			
31 Number of days on line 20 after 6/30/2023 and before 10/1/2023.	31			
32 Underpayment on line 17 $\times \frac{\text{Number of days on line 31}}{365} \times \text{ } \% \dots$	32			
33 Number of days on line 20 after 9/30/2023 and before 1/1/2024.	33			
34 Underpayment on line 17 $\times \frac{\text{Number of days on line 33}}{365} \times \text{ } \% \dots$	34			
35 Number of days on line 20 after 12/31/2023 and before 3/16/2024.	35			
36 Underpayment on line 17 $\times \frac{\text{Number of days on line 35}}{366} \times \text{ } \% \dots$	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.

LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION

82-1558798

STATEMENT 1
FORM 990-PF, PART I, LINE 16A
LEGAL FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL FEES.....	\$ 7,623.			\$ 7,623.
TOTAL	<u>\$ 7,623.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>	<u>\$ 7,623.</u>

STATEMENT 2
FORM 990-PF, PART I, LINE 16B
ACCOUNTING FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES.....	\$ 7,750.	\$ 3,875.		\$ 3,875.
TOTAL	<u>\$ 7,750.</u>	<u>\$ 3,875.</u>	<u>\$ 0.</u>	<u>\$ 3,875.</u>

STATEMENT 3
FORM 990-PF, PART I, LINE 16C
OTHER PROFESSIONAL FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CONSULTING.....	\$ 200.			\$ 200.
FIDUCIARY FEES.....	124,837.	\$ 61,376.		63,461.
TOTAL	<u>\$ 125,037.</u>	<u>\$ 61,376.</u>	<u>\$ 0.</u>	<u>\$ 63,661.</u>

STATEMENT 4
FORM 990-PF, PART I, LINE 18
TAXES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
EXCISE TAX ON INVESTMENT INCOME....	\$ 43,557.	\$ 43,557.		
TOTAL	<u>\$ 43,557.</u>	<u>\$ 43,557.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>

LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION

82-1558798

STATEMENT 5
FORM 990-PF, PART I, LINE 23
OTHER EXPENSES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
BANQUET.....	\$ 400.			\$ 400.
COMMUNICATIONS.....	5,967.			5,967.
DUES.....	3,250.			3,250.
INVESTMENT EXPENSES.....	62,880.	\$ 62,880.		
OFFICE & ADMINISTRATIVE.....	1,458.			1,458.
TOTAL	\$ 73,955.	\$ 62,880.	\$ 0.	\$ 11,075.

STATEMENT 6
FORM 990-PF, PART XIV, LINE 2A-D
APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:
NAME: LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION
CARE OF:
STREET ADDRESS: PO BOX 1040
CITY, STATE, ZIP CODE: LEWISTON, ID 83501
TELEPHONE: (208) 664-6448
E-MAIL ADDRESS: INFO@LEWISCLARKHEALTH.ORG
FORM AND CONTENT: A GRANT APPLICATION IS REQUIRED TO BE SUBMITTED. A COPY OF THE APPLICATION AND THE APPLICATION PROCESS CAN BE FOUND ON THE FOUNDATION'S WEBSITE. THE FOUNDATION HAS TWO TYPES OF GRANTS. THERE IS THE FAST-TRACK GRANT WHICH GRANT APPLICATIONS ARE ACCEPTED BETWEEN MARCH 1 AND MAY 31. THE OTHER TYPE OF GRANT IS IMPACT GRANTS WHICH THE APPLICATIONS ARE ACCEPTED BETWEEN JUNE 1 AND JULY 31.
SUBMISSION DEADLINES: FOUNDATION HAS TWO DEADLINES BASED UPON THE GRANT REQUEST.
RESTRICTIONS ON AWARDS: AWARDS WILL BE GRANTED TO BENEFIT THE HEALTH WELLNESS OR DISEASE PREVENTION NEEDS OF THE PEOPLE WITHIN THE FOUNDATION'S NINE COUNTY SERVICE AREA.

STATEMENT 7
FORM 990-PF, PART XIV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
SNAKE RIVER COMMUNITY CLINIC P.O. BOX 6 LEWISTON ID 83501		PC	FREE DENTAL CLINIC	\$ 10,000.

LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION

82-1558798

STATEMENT 7 (CONTINUED)
FORM 990-PF, PART XIV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
PRAIRIE MOUNTAIN NUTRITION, INC. P.O. BOX 37 COTTONWOOD ID 83522		PC	GENERAL OPERATIONS	\$ 7,500.
FRIENDLY NEIGHBORS SENIOR CITIZENS, INC. 412 EAST THIRD STREET MOSCOW ID 83843		PC	KITCHEN UPGRADES FOR MEAL PROGRAM	5,000.
INTERLINK, INC. 817A 6TH STREET CLARKSTON WA 99403		PC	VOLUNTEER TRANSPORTATION	50,000.
CLARKSTON COMMUNITY GARDEN P.O. BOX 53 CLARKSTON WA 99403		PC	TOOL SHED & ADDITIONAL RAISED BEDS TO GROW FOOD FOR ASOTIN FOOD BANK	8,780.
INTERLINK, INC. 817A 6TH STREET CLARKSTON WA 99403		PC	ADA RAMPS, GRAB BARS, IN-HOME REPAIRS	10,000.
GINA QUESENBERRY FOUNDATION PO BOX 506 LEWISTON ID 83501		PC	TRAVEL ASSISTANCE PROGRAM	10,000.
LC CREW PO BOX 1863 LEWISTON ID 83501		PC	LC CREW SHOE DRIVE	10,000.
ROTARY FOUNDATION OF WALLOWA COUNTY PO BOX 242 ENTERPRISE OR 97828		PC	PLACE AND SUPPORT AEDS AND CONTINUED SUPPORT OF IMNAHA RESPONDERS	9,470.
UPRIVER YOUTH LEADERSHIP COUNCIL INC. PO BOX 625 KAMIAH ID 83536		PC	UYLC PROFESSIONAL PRINTER	10,000.
VALLEY COMMUNITY CENTER 549 5TH STREET, SUITE F CLARKSTON WA 99403		PC	OPERATING EXPENSES	6,000.
HOMES OF HOPE PO BOX 464 CLARKSTON WA 99403		PC	OPERATING FUNDS	10,000.

LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION

82-1558798

STATEMENT 7 (CONTINUED)
FORM 990-PF, PART XIV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
CREATING MEMORIES FOR DISABLED CHILDREN PO BOX 586 ENTERPRISE OR 97828		PC	RENOVATION OF LODGE AT CAMP PROPERTY	\$ 10,000.
ROSALIA VOLUNTEER FIREFIGHTERS ASSOCIATI PO BOX 291 ROSALIA WA 99170		PC	STOP THE BLEED TRAINING PROGRAM	2,500.
NAMI IDAHO 1118 F ST. LEWISTON ID 83501		PC	CRISIS INTERVENTION TEAM TRAINING	7,000.
CITY OF LEWISTON PARKS AND RECREATION 1424 MAIN STREET LEWISTON ID 83501		GOV	SKINNER CANYON TRAIL DEVELOPMENT AT COMMUNITY PARK	10,000.
JULIAETTA/KENDRICK GOOD SAMARITAN FOODBA P.O. BOX 61 KENDRICK ID 83537		PC	JULIAETTA/KENDRI CK GOOD SAMARITAN FOODBANK	3,000.
CHIEF JOSEPH SUMMER CAMP P.O. BOX 147 ENTERPRISE OR 97828		PC	OPERATING FUNDS FOR THE SUMMER CAMP	10,000.
COMMUNITY ON CALL P.O. BOX 225 CLARKSTON WA 99403		PC	PARTNERS FOR FOOD SECURITY ASOTIN COUNTY	10,000.
NEZ PERCE COUNTY BOARD OF COMMUNITY GUAR P.O. BOX 896 LEWISTON ID 83501		PC	NEZ PERCE COUNTY BOARD OF COMMUNITY GUARDIANS	5,000.
LACROSSE COMMUNITY OUTREACH P.O. BOX 45 LACROSSE WA 99143		PC	LACROSSE COMMUNITY OUTREACH	10,000.
BACKYARD HARVEST 510 W. PALOUSE RIVER DR. MOSCOW ID 83843		PC	FARM TO FOOD BANK: BRINGING LOCAL PRODUCE AND NUTRITION EDUCATION TO RURAL FOOD PANTRIES	40,000.

LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION

82-1558798

STATEMENT 7 (CONTINUED)
FORM 990-PF, PART XIV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
TAHOE COMMUNITY FIRST RESPONDERS DBA TAH 786 LEITCH CREEK ROAD KOOSKIA ID 83539		PC	DAILY OPERATIONS, TRAINING AND MEDICAL SUPPLY PURCHASES FOR TAHOE QRU	\$ 10,000.
AARC 3535 13TH ST C LEWISTON ID 83501		PC	ANUAL OPERATING COSTS TO ASSIST 60 PEOPLE WITG 100% VOLUNTEER STAFF	10,000.
FAMILIES TOGETHER 260 NW GOLDEN HILLS DR., SPC #20 PULLMAN WA 99163		PC	BRINGING FAMILIES TOGETHER-MIND, BODY, SOUL	10,000.
ALZHEIMERS ASSOCIATION 19031 33RD AVE. W., SUITE #301 LYNNWOOD WA 98036		PC	QUAD CITIES WALK TO END ALZHEIMERS	8,000.
VFW POST 1443, VETERANS OF FOREIGN WARS 829 15TH STREET CLARKSTON WA 99403		PC	VETERAN OUTREACH CENTER OPERATIONS	10,000.
FRIENDS OF NEILL PUBLIC LIBRARY 210 N. GRAND AVENUE PULLMAN WA 99163		PC	HOTSPOT LOAN PROGRAM	10,000.
SALMON RIVER SENIOR CITIZENS INC. P.O. BOX 1285 RIGGINS ID 83549		PC	BUILDING EXPANSION-EQUIPM ENT	2,100.
CLEARWATER QRU 688 SALLY ANN RD CLEARWATER ID 83552		PC	NEW EQUIPMENT TO ASSIST WITH PATIENT SAFETY AS WELL AS THE SAFETY OF CREW	37,000.
LATAH ALLIANCE ON MENTAL HEALTH P.O. BOX 8654 MOSCOW ID 83843		PC	MENTAL HEALTH ADVOCACY	5,720.

LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION

82-1558798

STATEMENT 7 (CONTINUED)
FORM 990-PF, PART XIV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
COMMUNITY HEALTH ASSOCIATION OF SPOKANE 611 N. IRON BRIDGE WAY SPOKANE WA 99202		PC	LEWISTON CERTIFIED COMMUNITY BEHAVIORAL HEALTH CLINIC	\$ 100,000.
VFW BAKER - LIND POST 3913 PO BOX 204 KENDRICK ID 83537		PC	HANDICAP CAPABILITY IN RESTROOMS	4,500.
TOUGH AS NAILS PO BOX 4 ROSALIA WA 99170		PC	ACTIVITY KIT SPONSORSHIP	5,000.
FIRST CHRISTIAN CHURCH 840 10TH STREET CLARKSTON WA 99403		PC	RED DOOR KITCHEN	10,000.
ENTERPRISE EDUCATION FOUNDATION 201 SE 4TH ST ENTERPRISE OR 97828		GOV	ENTERPRISE COLLABORATIVE PLAYGROUND PROJECT	10,000.
HEART OF THE ARTS, INC. 412 EAST 3RD ST MOSCOW ID 83843		PC	THE LITTLE FREE PANTRY	4,800.
FAMILY PROMISE OF THE LC VALLEY 921 9TH AVE LEWISTON ID 83501		PC	DIAPER BANK PROGRAM AND FAMILY SHELTER PROGRAM	10,000.
THE KIDS KLUB, INC. 506 S A ST GRANGEVILLE ID 83530		PC	YOUTH DEVELOPMENT CENTER	5,000.
LEWISTON-CLARKSTON SUNRISE ROTARY CLUB 132 THAIN RD, SUITE 101 LEWISTON ID 83501		PC	VETERAN CHALLENGE COIN	5,000.
CLEARWATER BASIN YOUTH CONSERVATION CORP 1626 6TH AVE N LEWISTON ID 83501		PC	YCC FIRST AID, CPR AND HELMET UPGRADES	3,240.
WALLOWA MOUNTAINS HELLS CANYON TRAILS 401 NE 1ST ST ENTERPRISE OR 97828		PC	WALLOWA MOUNTAINS EXERCISE TRAILS PROJECT	3,000.

LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION

82-1558798

STATEMENT 7 (CONTINUED)
FORM 990-PF, PART XIV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
STONE BRIDGE REENTRY SERVICES 910 3RD ST CLARKSTON WA 99403		PC	REENTRY RESOURCES	\$ 10,000.
FRIENDS OF ASOTIN LIONS 118 2ND ST ASOTIN WA 99402		PC	DIAPER PANTRY	3,500.
SENIOR CITIZENS DOLLAR A MONTH NUTRITION 108 TRUCK RD GRANGEVILLE ID 83530		PC	WINDOW REPLACEMENT	10,000.
FAMILY PROMISE OF THE PALOUSE 510 W PALOUSE RIVER DR MOSCOW ID 83843		PC	MENTAL AND SUPPLEMENTAL HEALTHCARE ASSISTANCE FUND	10,000.
J-K SENIOR MEALS 104 6TH ST KENDRICK ID 83537		PC	HANDICAPPED APPROACH TO SENIOR CENTER, ELECTRICAL UPGRADE	9,000.
GARFIELD COUNTY SUPER SENIOR CITIZENS 695 MAIN ST POMEROY WA 99347		PC	FUNDING TO PAY THE POWER BILL FOR ONE YEAR	7,200.
ICARE, INC. 2134 CANYON CREEK ROAD OROFINO ID 83544		PC	CANCER ASSISTANCE AND RECOVERY EFFORT	10,000.
ELK CITY AREA ALLIANCE, INC. PO BOX 402 ELK CITY ID 83524		PC	MEDICAL CLINIC BUILDING MAINTENANCE AND IMPROVEMENTS	10,000.
J-K SENIOR MEALS 104 6TH ST KENDRICK ID 83537		PC	NEW STOVE	3,000.
THE GREEN APPLE PROJECT 615 THAIN RD LEWISTON ID 83501		PC	AUTISM SUPPORT GROUPS	3,000.
DEARY RURAL FIRE AND AMBULANCE 403 MAIN ST DEARY ID 83823		PC	EMS FITNESS PROGRAM	7,500.

LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION

82-1558798

STATEMENT 7 (CONTINUED)
FORM 990-PF, PART XIV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
WALLOWA MOUNTAINS BICYCLE CLUB PO BOX 166 JOSEPH OR 97846		PC	BIKES FOR KIDS	\$ 2,500.
PALOUSE ALLIANCE FOR HEALTHY INDIVIDUALS 315 SE CRESTVIEW ST PULLMAN WA 99163		PC	PALOUSE FAMILY FAIR - WALK AND ROLL	4,000.
CITY OF CULDESAC 100 6TH ST CULDESAC ID 83524		GOV	RAISING HOPE FOOD PANTRY	10,000.
COUNTY OF WALLOWA 101 S RIVER ST ENTERPRISE OR 97828		GOV	WALLOWA COUNTY AIR ROOM AIR PURIFIER DISTRIBUTION PROGRAM	10,000.
RELIANCE CENTER 102 NEW 6TH ST LEWISTON ID 83501		PC	STD PROGRAM	10,000.
LIFE 3317 12TH ST LEWISTON ID 83501		PC	STUDENT EMERGENCY HEALTH FUND	5,000.
THE WILLOW CENTER, INC. 1714 G ST LEWISTON ID 83501		PC	PEER SUPPORT GROUP AND GRIEF RESOURNCES TO CHILDREN/TEENS AND ADULT CAREGIVERS	10,000.
BUILDING HEALTHY FAMILIES 207 E PARK ST ENTERPRISE OR 97828		PC	WALLOWA BICYCLE PLAYGROUND PARK	10,000.
CLEARWATER VALLEY HIGH SCHOOL 4643 ID-13 KOOSKIA ID 83539		GOV	PHYSICAL EDUCATION EQUIPMENT	2,793.
POMEROY SCHOOL DISTRICT 121 S 10TH ST POMEROY WA 99347		GOV	POMEROY WEIGHT ROOM AND GYM PROJECT	10,000.
ST VINCENT DE PAUL SOCIETY 618 E 1ST ST MOSCOW ID 83843		PC	EMERGENCY HOUSING AND MEDICAL CARE	25,000.

05/15/2023

2022 Activity Report

Page 1

08:04 AM

Client 09739 - LEWIS-CLARK VALLEY HEALTHCARE EIN: 82-1558798
US: Paper Check.....\$18,138

Activity

Federal 990/990-PF

US - ACCEPTED 05/12 (Current Status)

Submission ID: 8224922023132085rm2v

Previous Activity

- 05/12 Sent to the IRS
- 05/12 Received at Lacerte
- 05/12 Sent to Lacerte
- 05/12 Ready to Send
- 05/12 Passed Validation

LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION

82-1558798

STATEMENT 7 (CONTINUED)
FORM 990-PF, PART XIV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
NORTHWEST CHILDREN'S HOME 419 22ND AVE LEWISTON ID 83501		PC	LOCAL ACCESS FOR HEALING AND RESILIENCE	\$ 26,253.
WALLOWA VALLEY CENTER FOR WELLNESS 606 MEDICAL PKWY ENTERPRISE OR 97828		PC	DUAL DIAGNOSIS DROP IN CENTER	15,000.
SUICIDE PREVENTION ACTION NETWORK OF IDA 8500 N ATLAS RD HAYDEN ID 83835		PC	SPIN ANNUAL ACTIVITIES	50,000.
NIMIIPUU HEALTH 111 BEAVER GRADE LAPWAI ID 83540		PC	TOXICOLOGY ANALYSIS CAPACITY	55,720.
SNAKE RIVER COMMUNITY CLINIC P.O. BOX 6 LEWISTON ID 83501		PC	HEALER PROJECT III: PRACTICE AND OUTREACH	96,848.
COMMUNITY HEALTH ASSOCIATION OF SPOKANE 611 N. IRON BRIDGE WAY SPOKANE WA 99202		PC	PATIENT ASSISTANCE PROGRAM	40,000.
KAMIAH FOOD BANK 4224 US-12 KOOSKIA ID 83539		PC	EQUIPMENT UPGRADE AND FOOD PURCHASE	70,000.
THE IDAHO FOODBANK 3331 10TH ST LEWISTON ID 83501		PC	MOBILE PANTRIES IN NORTH CENTRAL REGION	75,000.
LEWIS CLARK DISTRICT COUNCIL OF ST. VIN 3138 5TH ST LEWISTON ID 83501		PC	HELP IDAHO FAMILIES	35,000.
WINDING WATERS MEDICAL CLINIC 603 MEDICAL PKWY ENTERPRISE OR 97828		PC	WALLOWA INTEGRATES PRIMARY CARE CLINIC	100,000.
INLAND OASIS 730 PULLMAN RD #3 MOSCOW ID 83843		PC	FOOD PANTRY	7,500.

TOTAL \$ 1,271,424.