

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

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

2020

Open to Public Inspection

For calendar year 2020 or tax year beginning

, 2020, and ending

, 20

LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION
888 WEST BROAD STREET
BOISE, ID 83702

A Employer identification number
82-1558798

B Telephone number (see instructions)
(208) 664-6448

C If exemption application is pending, check here. ▶ ☐

D 1 Foreign organizations, check here. ▶ ☐

2 Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

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

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

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

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

I Fair market value of all assets at end of year (from Part II, column (c), line 16) ▶ \$
J Accounting method: ☒ Cash ☐ Accrual
☐ 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	388.	388.	388.	
	4 Dividends and interest from securities.	509,234.	509,234.	509,234.	
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10.	103,220.			
	b Gross sales price for all assets on line 6a.	8,845,055.			
	7 Capital gain net income (from Part IV, line 2)		103,220.		
	8 Net short-term capital gain			1,078.	
	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.	612,842.	612,842.	510,700.		
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) SEE ST. 1	44,852.			44,852.
	b Accounting fees (attach sch) SEE ST. 2	9,100.	4,550.		4,550.
	c Other professional fees (attach sch) SEE ST. 3	138,770.	60,163.		78,608.
	17 Interest.				
	18 Taxes (attach schedule)(see instrs). SEE STM 4	12,592.	12,592.		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy.				
	21 Travel, conferences, and meetings.	1,777.			1,777.
	22 Printing and publications.				
	23 Other expenses (attach schedule)				
	SEE STATEMENT 5	24,926.	13,910.		11,016.
	24 Total operating and administrative expenses. Add lines 13 through 23.	232,017.	91,215.		140,803.
25 Contributions, gifts, grants paid. PART XV	1,123,794.			1,123,794.	
26 Total expenses and disbursements. Add lines 24 and 25.	1,355,811.	91,215.	0.	1,264,597.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements	-742,969.				
b Net investment income (if negative, enter -0-)		521,627.			
c Adjusted net income (if negative, enter -0-)			510,700.		

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)			
Liabilities	11 Investments — land, buildings, and equipment: basis			
	Less: accumulated depreciation (attach schedule)			
	12 Investments — mortgage loans			
	13 Investments — other (attach schedule)	24,587,146.	23,844,177.	
	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)	24,587,146.	23,844,177.	0.
Net Assets or Fund Balances	17 Accounts payable and accrued expenses			
	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	24,587,146.	23,844,177.	
	29 Total net assets or fund balances (see instructions)	24,587,146.	23,844,177.	
Total	30 Total liabilities and net assets/fund balances (see instructions)	24,587,146.	23,844,177.	

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	24,587,146.
2	Enter amount from Part I, line 27a.	2	-742,969.
3	Other increases not included in line 2 (itemize)	3	
4	Add lines 1, 2, and 3.	4	23,844,177.
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	23,844,177.

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.)
1 a	SECURITIES	P	VARIOUS	VARIOUS
b	SECURITIES	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 6,931,335.		6,829,193.	102,142.
b 1,913,720.		1,912,642.	1,078.
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			102,142.
b			1,078.
c			
d			
e			

2 Capital gain net income or (net capital loss).....	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	2	103,220.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):	<div> <div>If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0-</div> <div>in Part I, line 8</div> </div>	3	1,078.

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**SECTION 4940(e) REPEALED ON DECEMBER 20, 2019 – DO NOT COMPLETE.**

1 Reserved			
(a) Reserved	(b) Reserved	(c) Reserved	(d) Reserved
Reserved			
Reserved			
Reserved			
Reserved			
Reserved			
2 Reserved.....		2	
3 Reserved.....		3	
4 Reserved.....		4	
5 Reserved.....		5	
6 Reserved.....		6	
7 Reserved.....		7	
8 Reserved.....		8	

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

1 a 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 Reserved.		1	7,251.
c All other domestic foundations enter 1.39% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-).		2	0.
3 Add lines 1 and 2.		3	7,251.
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	7,251.
6 Credits/Payments:			
a 2020 estimated tax pymts and 2019 overpayment credited to 2020	6 a	6,080.	
b Exempt foreign organizations — tax withheld at source	6 b		
c Tax paid with application for extension of time to file (Form 8868)	6 c		
d Backup withholding erroneously withheld	6 d		
7 Total credits and payments. Add lines 6a through 6d.	7	6,080.	
8 Enter any penalty for underpayment of estimated tax. Check here <input 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	1,171.	
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 2021 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11		

Part VII-A Statements Regarding Activities

	Yes	No
1 a 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
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition.		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?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation ▶ \$ 0. (2) On foundation managers ▶ \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If 'Yes,' attach a detailed description of the activities.		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	
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	N/A	
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 XV.	X	
8 a Enter the states to which the foundation reports or with which it is registered. See instructions ID		
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 2020 or the tax year beginning in 2020? See the instructions for Part XIV. If 'Yes,' complete Part XIV.		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses.		X

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Form 990-PF (2020)

Part VII-A Statements Regarding Activities (continued)

	Yes	No
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule. See instructions.	11	X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement. See instructions.	12	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address: <u>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>83714</u>		
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here. <u>N/A</u> 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 2020, 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		

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

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

	Yes	No
1 a During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If any answer is 'Yes' to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions. <u>N/A</u>	1 b	N/A
Organizations relying on a current notice regarding disaster assistance, check here. <input type="checkbox"/>		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2020? <u>X</u>	1 c	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 2020, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2020? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes,' list the years <u>20__ , 20__ , 20__ , 20__</u>		
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.) <u>N/A</u>	2 b	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. <u>20__ , 20__ , 20__ , 20__</u>		
3 a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b If 'Yes,' did it have excess business holdings in 2020 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 2020.) <u>N/A</u>	3 b	N/A
4 a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? <u>X</u>	4 a	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 2020? <u>X</u>	4 b	X

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Form 990-PF (2020)

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

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is 'Yes' to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructionsOrganizations relying on a current notice regarding disaster assistance, check here ☐**c** If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? ☐ Yes ☐ No N/A
If 'Yes,' attach the statement required by Regulations section 53.4945-5(d).**6 a** Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No
If 'Yes' to 6b, file Form 8870.**7 a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No**b** If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☐ No N/A**8** Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? ☐ Yes ☒ No**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors****1** List all officers, directors, trustees, and foundation managers and their compensation. 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 VIII 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 IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
4	

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

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

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

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Form 990-PF (2020)

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1 a	24,477,945.
b	Average of monthly cash balances	1 b	
c	Fair market value of all other assets (see instructions)	1 c	
d	Total (add lines 1a, b, and c)	1 d	24,477,945.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1 e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d.	3	24,477,945.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	367,169.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	24,110,776.
6	Minimum investment return. Enter 5% of line 5	6	1,205,539.

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

1	Minimum investment return from Part X, line 6	1	1,205,539.
2a	Tax on investment income for 2020 from Part VI, line 5	2 a	7,251.
b	Income tax for 2020. (This does not include the tax from Part VI.)	2 b	
c	Add lines 2a and 2b	2 c	7,251.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,198,288.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,198,288.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,198,288.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1 a	1,264,597.
b	Program-related investments — total from Part IX-B	1 b	
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)	3 a	
b	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	1,264,597.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,264,597.

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2019	(c) 2019	(d) 2020
1 Distributable amount for 2020 from Part XI, line 7				1,198,288.
2 Undistributed income, if any, as of the end of 2020:				
a Enter amount for 2019 only			1,199,994.	
b Total for prior years: 20 __, 20 __, 20 __		0.		
3 Excess distributions carryover, if any, to 2020:				
a From 2015				
b From 2016				
c From 2017				
d From 2018				
e From 2019				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2020 from Part XII, line 4: ► \$ 1,264,597.				
a Applied to 2019, but not more than line 2a ..			1,199,994.	
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 2020 distributable amount				64,603.
e Remaining amount distributed out of corpus ..	0.			
5 Excess distributions carryover applied to 2020 (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 2019. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2020. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2021				1,133,685.
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 2015 not applied on line 5 or line 7 (see instructions) ..	0.			
9 Excess distributions carryover to 2021. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2016				
b Excess from 2017				
c Excess from 2018				
d Excess from 2019				
e Excess from 2020				

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Form 990-PF (2020)

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

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2020, enter the date of the ruling: ▶

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

	Tax year	Prior 3 years			(e) Total
	(a) 2020	(b) 2019	(c) 2018	(d) 2017	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed:					
b 85% of line 2a:					
c Qualifying distributions from Part XII, line 4, for each year listed:					
d Amounts included in line 2c not used directly for active conduct of exempt activities:					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c:					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:					
(1) Value of all assets:					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i):					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed:					
c 'Support' alternative test — enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties):					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii):					
(3) Largest amount of support from an exempt organization:					
(4) Gross investment income:					

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year SEE STATEMENT 7				
Total			3 a	1,123,794.
b Approved for future payment				
Total			3 b	

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.....	\$ 44,852.			\$ 44,852.
TOTAL	<u>\$ 44,852.</u>	<u>\$ 0.</u>	<u>\$ 0.</u>	<u>\$ 44,852.</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.....	\$ 9,100.	\$ 4,550.		\$ 4,550.
TOTAL	<u>\$ 9,100.</u>	<u>\$ 4,550.</u>	<u>\$ 0.</u>	<u>\$ 4,550.</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.....	\$ 15,996.			\$ 15,996.
FIDUCIARY FEES.....	122,369.	\$ 60,163.		62,207.
MISC OTHER PROFESSIONAL FEES.....	405.			405.
TOTAL	<u>\$ 138,770.</u>	<u>\$ 60,163.</u>	<u>\$ 0.</u>	<u>\$ 78,608.</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....	\$ 12,592.	\$ 12,592.		
TOTAL	<u>\$ 12,592.</u>	<u>\$ 12,592.</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
COMMUNICATIONS.....	\$ 5,852.			\$ 5,852.
DUES.....	3,750.			3,750.
INVESTMENT EXPENSES.....	13,910.	\$ 13,910.		
OFFICE & ADMINISTRATIVE.....	1,414.			1,414.
TOTAL	<u>\$ 24,926.</u>	<u>\$ 13,910.</u>	<u>\$ 0.</u>	<u>\$ 11,016.</u>

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

NAME OF GRANT PROGRAM: LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION

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 REQUEST LETTER OF INQUIRY SHOULD BE SUBMITTED
 DETAILING THE INFORMATION ABOUT THE ORGANIZATION
 REQUESTING A GRANT, AND A SUMMARY OF THE PROJECT THEY ARE
 SEEKING TO FUND. A COPY OF THE LETTER AND THE APPLICATION
 PROCESS CAN BE FOUND ON THE FOUNDATION'S WEBSITE. IF IT IS
 DETERMINED THAT THE GRANT REQUEST FITS THE AWARD CRITERIA,
 THE REQUESTING ORGANIZATION WILL BE REQUIRED TO COMPLETE A
 MORE DETAILED APPLICATION FOR GRANT.

SUBMISSION DEADLINES: GRANT REQUEST LETTERS MUST BE RECEIVED BY JUNE 30TH.

RESTRICTIONS ON AWARDS: AWARDS WILL BE GRANTED TO BENEFIT THE HEALTHCARE NEEDS OF
 THE PEOPLE WITHIN THE NINE COUNTIES THAT ST. JOSEPH
 REGIONAL MEDICAL CENTER ONCE SERVED.

STATEMENT 7
FORM 990-PF, PART XV, 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 CLINIC OPERATING FUNDS	\$ 74,284.

LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION

82-1558798

STATEMENT 7 (CONTINUED)
FORM 990-PF, PART XV, 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	\$ 10,000.
LEWIS CLARK DIST. COUNCIL OF ST. VINCENT 604 2ND STREET LEWISTON ID 83501		PC	FEED THE KIDS PROGRAM	25,000.
FRIENDLY NEIGHBORS SENIOR CITIZENS, INC. 412 EAST THIRD STREET MOSCOW ID 83843		PC	MEALS FOR GRAB & GO OR HOME DELIVERY	500.
INTERLINK, INC. 817A 6TH STREET CLARKSTON WA 99403		PC	NEIGHBOR-TO-NEIG HBOR PROGRAM	26,000.
INNOVIA FOUNDATION 421 W RIVERSIDE AVE, STE 606 SPOKANE WA 99201		PC	COVID-19 RESPONSE RECOVERY FUND	150,000.
CLARKSTON COMMUNITY GARDEN P.O. BOX 53 CLARKSTON WA 99403		PC	COVID-19 SUPPORT	3,000.
CLEARWATER COUNTY AMBULANCE 1195 RIVERSIDE AVE OROFINO ID 83544		GOV	EMERGENCY RESPONSE SUPPLIES	10,000.
CORNERSTONE TEEN CENTER 1701 RIGGERS RD NEZPERCE ID 83543		PC	TEEN CENTER FOOD SERVICE	4,900.
FRIENDS OF WALLOWA SCHOOL DISTRICT 315 E 1ST ST WALLOWA OR 97885		PC	HIGH SCHOOL HEALTH OCCUPATIONS PROGRAM OF STUDY	10,000.
GARFIELD COUNTY PUBLIC HOSPITAL DISTRICT 66 6TH ST POMEROY WA 99347		GOV	COVID-19 RESPONSE	10,000.
INTERLINK, INC. 817A 6TH STREET CLARKSTON WA 99403		PC	ADA RAMPS, GRAB BARS, IN-HOME REPAIRS	11,500.

LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION

82-1558798

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

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
LIFE CHOICES CLINIC 2020 12TH AVE LEWISTON ID 83501		PC	OPERATING FUNDS	\$ 10,000.
MOSCOW CENTRAL LIONS CLUB P.O. BOX 8655 MOSCOW ID 83843		PC	COMMUNITY SIGHT & HEARING PROGRAM	6,000.
RELIANCE CENTER 102 NEW 6TH STREET MEZZANINE 2ND FL LEWISTON ID 83501		PC	STD TESTING AND TREATMENT LAB FEES	10,000.
SNAKE RIVER COMMUNITY CLINIC P.O. BOX 6 LEWISTON ID 83501		PC	COVID-19 RESPONSE AND RECOVERY	10,000.
THE GREEN APPLE PROJECT 613 BRYDEN AVE STE. C #248 LEWISTON ID 83501		PC	CAPACITY EXPANSION	10,000.
THE IDAHO FOOD BANK 3562 S TK AVE BOISE ID 83705		PC	HUNGER RELIEF	50,000.
THE SALVATION ARMY LEWISTON CORPS 1220 21ST ST LEWISTON ID 83501		PC	SOCIAL SERVICES PROGRAMS	9,000.
THE WILLOW CENTER, INC. 309 2ND ST LEWISTON ID 83501		PC	GRIEF PEER SUPPORT GROUPS	10,000.
CHAS HEALTH 611 N IRON BRIDGE WAY SPOKANE WA 99202		PC	EXPANDING ACCESS TO QUALITY, AFFORDABLE DENTAL CARE IN THE LC VALLEY REGION	75,000.
CHAS HEALTH 611 N IRON BRIDGE WAY SPOKANE WA 99202		PC	PATIENT ASSISTANCE PILOT EXPANSION PROGRAM	35,000.
FIRST STEP 4 LIFE RECOVERY CENTER LTD 1002 IDAHO STREET LEWISTON ID 83501		PC	RUINS TO RECOVERY	75,000.

LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION

82-1558798

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

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
FRAMING OUR COMMUNITY, INC. PO BOX 321 ELK CITY ID 83525		PC	CARING AND PREPARING	\$ 39,104.
LC VALLEY YOUTH RESOURCE CENTER, INC. 1221 12TH AVENUE LEWISTON ID 83501		PC	DROP-IN CENTER & OVERNIGHT ACCOMMODATIONS	75,000.
PUBLIC HEALTH - IDAHO NORTH CENTRAL DIST 215 10TH STREET LEWISTON ID 83501		GOV	SENIOR QUALITY OF LIFE AND COGNITIVE HEALTH INITIATIVE	40,000.
UNIVERSITY OF IDAHO FOUNDATION, INC. 875 PERIMETER DRIVE MOSCOW ID 83843		PC	MENTAL HEALTH FIRST AID AND QPR TRAINING FOR SUICIDE AWARENESS AND PREVENTION PROGRAM	40,000.
WALLOWA VALLEY CENTER FOR WELLNESS PO BOX 268 ENTERPRISE OR 97828		PC	HEARTS FOR HEALTH	50,000.
6TH STREET SENIOR CENTER 832 6TH STREET CLARKSTON WA 99403		PC	FACILITY UPGRADES	4,200.
BOYS & GIRLS CLUBS OF THE LC VALLEY 1021 BURRELL AVE LEWISTON ID 83501		PC	YOUTH DEVELOPMENT PROGRAM	10,000.
CLARKSTON LION'S CLUB 615 1/2 SYCAMORE STREET CLARKSTON WA 99403		PC	EYESIGHT AND HEARING ASSISTANCE	1,900.
COMMUNITY ON CALL PO BOX 225 CLARKSTON WA 99403		PC	LIFT GIFT CARDS FOR FAMILIES - A LITTLE LIFT TO BRIDGE A DIFFICULT TIME	6,000.
LC HABITAT FOR HUMANITY PO BOX 317 CLARKSTON WA 99403		PC	OPERATING FUNDS	9,978.

LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION

82-1558798

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

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
DIVIDE CAMP PO BOX 49 JOSEPH OR 97846		PC	OPERATING SUPPORT FOR DIVIDE CAMP SERVICES	\$ 6,000.
FAMILY PROMISE OF THE PALOUSE 510 W PALOUSE RIVER DR MOSCOW ID 83843		PC	COVID-19 ALTERNATIVE HOUSING AND SERVICES	6,000.
FIRST CHRISTIAN CHURCH 840 TENTH ST. CLARKSTON WA 99403		PC	RED DOOR KITCHEN	10,000.
FIRST STEP 4 LIFE RECOVERY CENTER LTD 1002 IDAHO STREET LEWISTON ID 83501		PC	SHELTER IN PLACE PROGRAM	10,000.
FIRST STEP 4 LIFE RECOVERY-OROFINO 155 MAIN STREET, SUITE C OROFINO ID 83544		PC	WHOLE HEALTH ACTION MANAGEMENT IN HIGH RISK POPULATIONS	10,000.
FRIENDS OF PARKS & REC. IN ASOTIN CO. 601 3RD ST. #313 CLARKSTON WA 99403		PC	PARTNERING WITH SCHOOLS TO OFFER 2ND GRADE SWIM LESSONS	10,000.
GARFIELD COUNTY SUPERCITIZENS PO BOX 23 POMEROY WA 99347		PC	WELL-BEING OF OUR MEMBERS & GUESTS	500.
GINA QUESENBERRY FOUNDATION PO BOX 506 LEWISTON ID 83501		PC	TRAVEL ASSISTANCE PROGRAM	7,000.
INTERLINK INC 817 A 6TH ST CLARKSTON WA 99403		PC	R.U. OK PROGRAM	10,000.
KAMIAH EDUCATION FOUNDATION PO BOX 142 KAMIAH ID 83536		PC	STUDENT HEALTH AND SAFETY FOR THE 2020-2021 SCHOOL YEAR	3,800.
LC CREW PO BOX 1863 LEWISTON ID 83501		PC	LC CREW SHOE DRIVE	10,000.

LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION

82-1558798

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

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
LC VALLEY YOUTH RESOURCE CENTER 1221 12TH AVENUE LEWISTON ID 83501		PC	OPENING RESOURCE CENTER FOR DISPLACED LOCAL YOUTH	\$ 10,000.
LC-VALLEY KIWANIS CLUB PO BOX 123 LEWISTON ID 83501		PC	SUMMER READING PROGRAM "SNACK PACK"	1,000.
LEWIS CLARK AMATEUR HOCKEY ASSOCIATION 1521 6TH AVENUE NORTH LEWISTON ID 83501		PC	EQUIPMENT PURCHASE	5,000.
LEWIS CLARK DIST. COUNCIL OF ST. VINCENT 604 2ND STREET CLARKSTON WA 99403		PC	FEED THE KIDS	10,000.
LEWISTON HS HEALTH & PHYSICAL ED. DEPT. 3317 12TH STREET LEWISTON ID 83501		GOV	WEARABLE TECHNOLOGY AND DATA MANAGEMENT	10,000.
OPPORTUNITIES UNLIMITED INC. 325 SNAKE RIVER AVE. LEWISTON ID 83501		PC	TELEHEALTH VIRTUAL GROUP PROGRAM	2,500.
OPPORTUNITIES UNLIMITED INC. 325 SNAKE RIVER AVE. LEWISTON ID 83501		PC	PERSONAL PROTECTIVE EQUIPMENT	2,500.
OROFINO FIRE DEPARTMENT 217 FIRST ST. PO BOX 312 OROFINO ID 83544		GOV	PURCHASE OF AED'S	8,500.
POMEROY ASSIST GARFIELD CO. HUMANITARIAN PO BOX 804 POMEROY WA 99347		PC	RENTAL ASSISTANCE AND UTILITY ASSISTANCE DUE TO COVID 19	10,000.
RELEASE PRAYER MINISTRIES, INC. 2605 VALLEYVIEW DR CLARKSTON WA 99403		PC	PRAYER COUNSELING ASSISTANCE	5,000.

LEWIS-CLARK VALLEY HEALTHCARE FOUNDATION

82-1558798

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

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
ROTARY FOUNDATION OF WALLOWA COUNTY PO BOX 242 ENTERPRISE OR 97828		PC	AUTOMATED EXTERNAL DEFIBRILLATOR (AED) PURCHASE, PLACEMENT AND MAINTENANCE	\$ 4,528.
ROTARY FOUNDATION OF WALLOWA COUNTY PO BOX 242 ENTERPRISE OR 97828		PC	IMNAHA RESPONDERS PROGRAM	9,600.
SENIOR CITIZENS DOLLAR A MONTH NUTRITION PO BOX 446 GRANGEVILLE ID 83530		PC	FOOD FOR SENIOR CITIZENS	10,000.
SOJOURNERS' ALLIANCE 627 N. VAN BUREN MOSCOW ID 83843		PC	TRANSITIONAL HOUSING	7,500.
TOUGH AS NAILS PO BOX 4 ROSALIA WA 99170		PC	HOSPITAL/KIT EXPANSION	5,000.
UPRIVER YOUTH LEADERSHIP COUNCIL INC. PO BOX 625 KAMIAH ID 83536		PC	WHEELS FOR PREVENTION	10,000.
VALLEY COMMUNITY CENTER 549 5TH STREET SUITE R CLARKSTON WA 99403		PC	SENIOR MEAL PROGRAM	6,000.
YMCA OF THE PALOUSE 105 NE SPRING STREET PULLMAN WA 99163		PC	EXTENDED SUMMER DAY CAMP PROGRAM	5,000.
AMERICAN LEGION POST 24 PO BOX 171 GARFIELD WA 99130		PC	FREEZER/REFRIGER ATOR	7,000.
TOTAL				\$ <u>1,123,794.</u>