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Form	990-
Depart	ment of the Treasury
Interna	Revenue Service

Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation
Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

ror	calendar year 2012 or tax year beginning		, and ending		
Na	ne of foundation			A Employer identification	n number
_	IGHMARK FOUNDATION			25-187666	5
	nber and street (or P O box number if mail is not delivered to street	B Telephone number			
_	20 FIFTH AVENUE	412-544-88			
	or town, state, and ZIP code			C If exemption application is	pending, check here
	ITTSBURGH, PA 15222				. \Box
G (heck all that apply: Initial return		rmer public charity	D 1. Foreign organization	s, check here
	Final return	Amended return		Foreign organizations m check here and attach c	eeting the 85% test,
	Address change	Name change		check here and attach o	omputation
H (theck type of organization: X Section 501(c)(3) ex			E If private foundation st	
<u> </u>	Ţ	Other taxable private founda	X Accrual	under section 507(b)(1	
	ur market value of all assets at end of year J Account		ACCTUAT	F If the foundation is in a	
	om Part II, col. (c), line 16)	her (specify)	hasis)	under section 507(b)(1)(B), check here
_	Irt Analysis of Revenue and Expenses	1 1		(-) & durate d = -1	(d) Disbursements
P	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)
		***************************************		N/A	(cash basis only)
	1 Contributions, gifts, grants, etc., received 2 Check X if the foundation is not required to attach Sch. B			14/12	-
	a cash investments				
	cash investments Dividends and interest from securities	179,042.	179,042.		
	5a Gross rents	175,044.	117,044.		
	b Net rental income or (loss)				
		256,793.			STATEMENT 1
Ē	6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all 1,414,236.	23077331			<u> </u>
Revenue	7 Capital gain net income (from Part IV, line 2)		963,139.		
æ	Net short-term capital gain				<u> </u>
	9 Income modifications	<u> </u>			
	Gross sales less returns 10a and allowances			,	
	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income				
	12 Totał. Add lines 1 through 11	435,835.	1,142,181.		
	13 Compensation of officers, directors, trustees, etc	0.	0.		0.
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
nses	16a Legal fees STMT 2	4,250.	0.		3,125.
ě	b Accounting fees RECEIVED 3	22,135.	0.		21,000.
Expe	c Other professi onal fees				
e. ≤	17 Interest Q NOV 2 n 2013 O				
rat	to Other professional fees 17 Interest NOV 2 0 2 113 18 Taxes STMT 19 Depreciation and depletion	22,844.	0.		0.
nisi	19 Depreciation and depletion	4,447.	0.		
Administrative	20 Occupandy OGDEN, UT				
Α̈́	21 Travel, conterences; and mostings				ļ
and	22 Printing and publications	0.00==1=			1 000
gu	23 Other expenses STMT 5	2,385,749.	0.		1,233,407.
rati	24 Total operating and administrative	2 422 425	•		1 055 500
Operating	expenses. Add lines 13 through 23	2,439,425.	0.		1,257,532.
J	25 Contributions, gifts, grants paid	3,155,015.			4,507,735.
	26 Total expenses and disbursements.	_{04 440}	•		F 765 065
	Add lines 24 and 25	5,594,440.	0.		5,765,267.
	27 Subtract line 26 from line 12:	- 150 605			1
	Excess of revenue over expenses and disbursements	-5,158,605.	1 140 101		
	b Net investment income (if negative, enter -0-)		1,142,181.	37/3	
2235	C Adjusted net income (if negative, enter -0-)			N/A	Form 990 DE (2012)

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		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End	of year
P	art_	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
		Savings and temporary cash investments	6,366,124.	2,580,926	. 2,580,926.
		Accounts receivable ► 92,330.			
	٠	Less: allowance for doubtful accounts	57,354.	92,330	92,330.
	4	Pledges receivable	3773321		1 32,000
	*	Less: allowance for doubtful accounts			
	_				
		Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts ▶			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges	1,276,820.	555,342	
Ä	10a	Investments - U.S. and state government obligations STMT 7	15,466,454.	11,143,943	. 11,143,943.
	b	Investments - corporate stock STMT 8	1,008,447.	0	. 0.
		Investments - corporate bonds STMT 9	3,813,905.	7,519,065	7,519,065.
		Investments land, buildings, and equipment basis	- , , , , , , , , , , , , , , , , , , ,		· · · · · · · · · · · · · · · · · · ·
	''	27 /27	21,497.	17,049	. 17,049.
	10	Edd dodnidated deproduction		,,	2.,022.
		Investments - mortgage loans			
		Investments - other			
	14	Land, buildings, and equipment basis	****** ** ** *** * *** * * * * * * * * *	emmonante or more to a common business and	
		Less accumulated depreciation			
	15	Other assets (describe)			
				04 000 655	04 000 655
	16	Total assets (to be completed by all filers)	28,010,601.	21,908,655	
	17	Accounts payable and accrued expenses	154,393.	610,360	
	18	Grants payable	2,960,604.	1,607,884	• .
Ś	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	-		
뎙	21	Mortgages and other notes payable			¬
ڐ		Other liabilities (describe)			7
		Cities manifest (cooperate)	·		7
	22	Total liabilities (add lines 17 through 22)	3,114,997.	2,218,244	•
_	23	Foundations that follow SFAS 117, check here	0,222,000		┪
		and complete lines 24 through 26 and lines 30 and 31.			i .
ç			24,895,604.	19,690,411	
nces		Unrestricted	24,033,004.	19,000,411	<u>.</u>
<u>a</u>	25	Temporarily restricted			-
80	26	Permanently restricted			┥ .
Fund Bala		Foundations that do not follow SFAS 117, check here			
Ē		and complete lines 27 through 31.			
S OF	27	Capital stock, trust principal, or current funds			
set	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
As	29	Retained earnings, accumulated income, endowment, or other funds			
Net Assets	30	Total net assets or fund balances	24,895,604.	19,690,411	•
_					
	31	Total liabilities and net assets/fund balances	28,010,601.	21,908,655	•
			alances		
۲	art	III Alialysis of Changes III Net Assets of Fulld be	uidi 1063		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)			
2	•	r amount from Part I, line 27a		<u> </u>	-5,158,605.
		r increases not included in line 2 (itemize)	-	-	3 0.
		lines 1, 2, and 3			19,736,999.
		eases not included in line 2 (itemize)	SEE ST	-	46,588.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II. co			19,690,411.

Form 990-PF (2012) HIGHMARK FOUNDATION 25-1876666 Page 3 Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase (a) List and describe the kind(s) of property sold (e.g., real estate, (c) Date acquired (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (mo., day, yr.) (mó., day, yr.) D - Donation 14,392 SHARES MONSANTO COMPANY 06/27/12 09/29/08 D 250,000 ECOLAB INC SR BOND P 08/06/12 10/17/12 C d e (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (or allowable) plus expense of sale (e) plus (f) minus (g) 1,163,088 201,214 961,874. 249,883. 1,265. 251,148 b d Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) or (j) Adjusted basis (k) Excess of col. (i) Losses (from col. (h)) (i) F.M.V. as of 12/31/69 as of 12/31/69 over col. (j), if any 961,874. 1,265. ď е If gain, also enter in Part 1, line 7 963,139. 2 2 Capital gain net income or (net capital loss) If (loss), enter -0- in Part I, line 7 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). N/A If (loss), enter -0- in Part I, line 8 Part V | Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income (For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.) If section 4940(d)(2) applies, leave this part blank. Yes X No Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part. 1 Enter the appropriate amount in each column for each year; see the instructions before making any entries. (d) Distribution ratio (a) Base period years Calendar year (or tax year beginning in) (c) (b) Adjusted qualifying distributions Net value of noncharitable-use assets (col. (b) divided by col. (c)) 18,014,942 34,206,875 .526647 2011 32,290,636, 30,237,623, .479888 15,495,899. 2010 21,516,021. .711565 2009 33,166,226 22,123,031. .667035 2008 20,716,340. 31,844,809. .650541 2007 2 3.035676 2 Total of line 1, column (d) 3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years .607135 3 the foundation has been in existence if less than 5 years 4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5 24,323,649. 4 14,767,739. 5 5 Multiply line 4 by line 3 11,422. 6 6 Enter 1% of net investment income (1% of Part I, line 27b)

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5,765,267.

14,779,161.

7

7 Add lines 5 and 6

See the Part VI instructions.

8 Enter qualifying distributions from Part XII, line 4

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate.

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Part VI Excise Tax Based on Investment Income (Section		1948 - see	instru	ctio	ns)
1a Exempt operating foundations described in section 4940(d)(2), check here	and enter "N/A" on line 1.				
Date of ruling or determination letter: (attach copy of letter	er if necessary-see instructions)		_		
b Domestic foundations that meet the section 4940(e) requirements in Part V, check h	iere 🕨 🔙 and enter 1%	1	2	2,8	44.
of Part I, line 27b					_
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations e	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	2	2,8	44.
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	2	2,8	44.
6 Credits/Payments:					
a 2012 estimated tax payments and 2011 overpayment credited to 2012	6a 44,266.	1. 1			
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	4	$\tilde{4}$, $\tilde{2}$	66.
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 222	0 is attached	8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	>	9			
10 Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount ove	rpaid	10	2	1,4	22.
11 Enter the amount of line 10 to be: Credited to 2013 estimated tax	8,000 • Refunded	11	1	3,4	22.
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or lo	cal legislation or did it participate or interveni	e in		Yes	No
any political campaign?	•		1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political	If purposes (see instructions for definition)?		1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activ		ed or			
distributed by the foundation in connection with the activities					
c Did the foundation file Form 1120-POL for this year?			10	-	Х
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed du	iring the year:				
(1) On the foundation. ▶ \$ 0 • (2) On foundation m					
e Enter the reimbursement (if any) paid by the foundation during the year for political		-	1 1		
managers. ▶ \$ 0.	,		1		
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 gov	verning instrument, articles of incorporation,	or			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the			3		Х
4a Did the foundation have unrelated business gross income of \$1,000 or more during			4a		Х
b If "Yes," has it filed a tax return on Form 990-T for this year?	•	N/A	4b		1
5 Was there a liquidation, termination, dissolution, or substantial contraction during the	ne vear?	·	5		Х
If "Yes," attach the statement required by General Instruction T					
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) sa	tisfied either:				
By language in the governing instrument, or					
By state legislation that effectively amends the governing instrument so that no m	andatory directions that conflict with the stat	e 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?			7	X	—
If "Yes." complete Part II, col. (c), and Part XV					
8a Enter the states to which the foundation reports or with which it is registered (see in	istructions)				
PA, WV					
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF	to the Attorney General (or designate)				
of each state as required by General Instruction G? If "No," attach explanation			86	X	
9 Is the foundation claiming status as a private operating foundation within the meaning		endar			
year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If '			9		X
10. Did any persons become substantial contributors during the tay year?			10	- -	T X

had not been removed from jeopardy before the first day of the tax year beginning in 2012?

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Part VII-B Statements Regarding Activities for Which I	-orm 4/20 May Be	Required (contin	uea)		
5a During the year did the foundation pay or incur any amount to:			□		- -
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			es X No		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indir		- T		
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				- - :
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	es X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or t				,
the prevention of cruelty to children or animals?		Y6	s X No	`	٠,
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	ın Regulations	į.		- ;
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	ere		▶□ [T -
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it mainta	ined	1	l	· ·
expenditure responsibility for the grant?		√I/A	s No		,
If "Yes," attach the statement required by Regulations section 53 4945	5-5(d)			ŀ	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	٠,		ļ	- 1	
a personal benefit contract?	, , , , , , , , , , , , , , , , , , ,	☐ Y€	s X No		. ;
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6ь	x [']
If "Yes" to 6b, file Form 8870.	orsonal bonone contract		F		 -,
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?		s X No	l	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	+-
Information About Officers Directors Trust		nagare Highly		70	
Paid Employees, and Contractors		inagers, riigini	<i>'</i>		
1 List all officers, directors, trustees, foundation managers and their	· · · · · · · · · · · · · · · · · · ·		7-1		
(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	accou	expense int, other wances
	to position		compensation		
				l	
SEE STATEMENT 10		0.	0.		0.
DEE DITTEMENT TO					
		<u> </u>		-	
		ļ			
2 Compensation of five highest-paid employees (other than those inc	· · · · ·	, enter "NONE."	(d) Contabutage to	1 (-) 5	VDOOO
(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	accou	xpense int, other wances
NONE					
				 	
		 		 	
		 		 	
				 	
Table I number of other employees and ever \$50,000	L	1 .			0
Total number of other employees paid over \$50,000					

FOR SOUTH PROPERTY OF THE PROP		ZJ-10/0	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)	ion Managers, Highly	У	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of serv	rice	(c) Compensation
MULLEN	EDUCATIONAL		
P.O. BOX 7247-7279, PHILADELPHIA, PA 19170	MESSAGING ON	HIGHMAR	328,993.
WINDBER RESEARCH INSTITUTE	BULLYING PREV		
620 SEVENTH ST., WINDBER, PA 15963	INSTITUTES		191,851.
PIPITONE GROUP	MARKETING SUP	PORT	
3933 PERRYSVILLE AVENUE, PITTSBURGH, PA 15214	FOR BULLYING		121,073.
JJJJ I BEREIDVILLE AVEROL, III IDDOROM, IM 13214	TON BOBBILLO		121/0/31
	4		
	 		
	-		
			0
Total number of others receiving over \$50,000 for professional services			<u> </u>
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produ	cal information such as the iced, etc.		Expenses
SEE ATTACHED			
	· · · · · · · · · · · · · · · · · · ·		0.
2			
			
3			
		 	
4		 	
		 -∤	
B-+IV BIG			
Part IX-B Summary of Program-Related Investments	1 and 0		Amount
Describe the two largest program-related investments made by the foundation during the tax year on li	nes i anu z.		Alliount
1 <u>N/A</u>			
2			
All other program-related investments. See instructions.			
3			

0.

Total. Add lines 1 through 3

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HIGHMARK FOUNDATION

P	art X Minimum Investment Return (All domestic foundations	must	complete th	ıs part. Foreign fou	ndations,	see instructions.)
$\frac{1}{1}$	Fair market value of assets not used (or held for use) directly in carrying out charita	ble, etc	Durdoses:			
а	Average monthly fair market value of securities	,	,,,,,		1 <u>a</u>	18,618,016.
	Average of monthly cash balances				1b	5,521,540.
	Fair market value of all other assets				1c	664,721.
	Total (add lines 1a, b, and c)				1d	24,804,277.
	Reduction claimed for blockage or other factors reported on lines 1a and				 	
Ī	1c (attach detailed explanation)	1e	1	0.		
2	Acquisition indebtedness applicable to line 1 assets		·····		2	0.
3	Subtract line 2 from line 1d				3	24,804,277.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amoun	nt. see	nstructions)	STMT 11	4	480,628.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and		•		5	24,323,649.
6	Minimum investment return. Enter 5% of line 5	o	·,		6	1,216,182.
	art XI Distributable Amount (see instructions) (Section 4942(j)(3) foreign organizations check here and do not complete this par		5) private ope	erating foundations ar		
1	Minimum investment return from Part X, line 6				1	1,216,182.
2a	Tax on investment income for 2012 from Part VI, line 5	2a		22,844.		
b	Income tax for 2012. (This does not include the tax from Part VI.)	2b		· ·	1	
	Add lines 2a and 2b				2c	22,844.
3	Distributable amount before adjustments. Subtract line 2c from line 1				3	1,193,338.
4	Recoveries of amounts treated as qualifying distributions				4	0.
5	Add lines 3 and 4				5	1,193,338.
6	Deduction from distributable amount (see instructions)				6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Pai	rt XIII.	ine 1		7	1,193,338.
P	art XII Qualifying Distributions (see instructions)					
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pu	irposes	•			5 565 065
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26				1a	5,765,267.
b	Program-related investments - total from Part IX-B				1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charite	able, et	c., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:				 .	
а	Suitability test (prior IRS approval required)				3a	
b	Cash distribution test (attach the required schedule)				3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8,				4	5,765,267.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inv	estme/	nt			_
	income. Enter 1% of Part I, line 27b				5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4				6	5,765,267.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years 4940(e) reduction of tax in those years.	when (alculating wh	ether the foundation	qualifies fo	r the section

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Part XIII Undistributed Income (see instructions)

1,193,338.2		(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
2 Undestructed receiver, Meyry, as of the end of 8012 an Enter amount for 2011 only b Total for prior years: 3 Excess distributions carryover, if ainy, to 2012; a From 2007	1 Distributable amount for 2012 from Part XI,		· · · · · · · · · · · · · · · · · · ·		
Screet amount for 2011 only	line 7				1,193,338.
State Stat	2 Undistributed income, if any, as of the end of 2012				
3 Excess distributions carryover, (I any, to 2012: a From 2008	· · · · · · · · · · · · · · · · · · ·			0.	
3 Excess distributions carryover, fam, y, 2012: aFrom 2007	b Total for prior years:		0		
a From 2007	2 Evenes distributions carryover if any to 2012:		<u> </u>		
From 2008					
From 2010					
From 2010					
From 2011		•			
1 Total of lines 3a through e 4 Qualifying distributions for 2012 from Part XII, Intel* V = \$ 5, 765, 267. a Applied to 2011, but not more than line 2a b Applied to undistributed encome of pror years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2012 distributible amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applies to 2012 (first a mount applies to 2013 (first applies to 2014 (first applie					
4 Qualifying distributions for 2012 from Part XII, line 4: Ps. 5, 765, 267. a Applied to 2011, but not more than line 2a Applied to 2011, but not more than line 2a Applied to indistributed income of prior years (Election required - see instructions) Created as distributions out of corpus (Election required - see instructions) Applied to 2012 distributable amount e Remaning amount distributed out of corpus 5 Excess distributions carryover applied to 2012 distributable amount e Remaning amount distributed out of corpus 5 Excess distributions carryover applied to 2012 distributable amount e Remaning amount distributed out of corpus and line at the state amount of Enter the net total of each column as indicated below: 4,571,929. 5 Excess distributions carryover applied to 2012		90,714,682.			
Part XI, line 4: ▶ \$ 5, 765, 267. a Applied to 2011, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) C Treated as distributions out of corpus (Election required - see instructions) Applied to 2012 distributable amount elemania amount distributed out of corpus Elemania amount distributed out of corpus Elemania amount distributed und to dropus Elemania amount distributed in search amount in a sindicated below: Corpus Adol lines 31 4c. and 4e Substact line 5 Prior years' undistributed income. Subtract line 4 brom line 2b Cellet the amount of prior years' undistributed income. Subtract line 4 brom line 2b Cellet the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 494(2a) lax has been previously assessed Subtract line 6c from line 6b. Taxable amount - see instructions clinicated income for 2011. Subtract line 4a from line 2a. Taxable amount - see instructions clinicated income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed as distributions out of corpus to safety requirements imposed by section 170(b)(1)(F) or 4942(g)(3) 8. Excess distributions carryover from 2007 on a papted on line 5 or line 7 9. Excess distributions carryover from 2007 on papted on line 5 or line 7 9. Excess distributions carryover from 2007 on a papted on line 5 or line 7 9. Excess distributions carryover from 2007 on 20, 20, 595, 370. Excess from 2008 20. Analysis of line 9: Excess from 2009 20. 595, 370. Excess from 2011 20. Ex	- <u>-</u>		· · · · · · · · · · · · · · · · · · ·		
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years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2012 distributable amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2012 gif an amount appears in column (a). 6 Enter the net total of each column as indicated below: 8 Corpus Add lines 3f. 4c. and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been resued, or on which the section 494(a) lax has been previously assessed Subtract line 6c from line 6b. Taxable amount - see instructions e Undistributed income for 2011. Subtract line 4d from line 2. Taxable amount - see instructions e Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013 7 Amounts treated as distributions carryover from 2007 not applied on line 5 or line 7 Excess distributions carryover from 2007 not applied on line 5 or line 7 Excess from 2008 Excess from 2008 Excess from 2009 Excess from 2001 Excess from 2001 Excess from 2011 Exc				0.	
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if it an anount appears in column (d), the same amount must be shown in column (a). 6 Enter the net total of each column as indicated below: 8 Derivor years' undistributed income. Subtract line 4 b from line 20. 95 , 286 , 611 . 95 , 286 , 611 . 95 , 286 , 611 . 95 , 286 , 611 . 95 , 286 , 611 . 95 , 286 , 611 . 0 . 10 Center the amount of pror years' undistributed income for which a notice of deficiency has been issued, or on which his section 494(2) tax has been previously assessed 4 Subtract line 6 from line 6b. Taxable amount - see instructions 9 Undistributed income for 2011. Subtract line 44 from line 2a. Taxable amount - see instr. 1 Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distribution inne 1. This amount must be distribution and 5 from line 1. This amount must be distribution subtributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distribution carryover from 2007 not applied on line 5 or line 7 9 Excess distributions carryover from 2007 not applied on line 5 or line 7 9 Excess from 2008 10 Analysis of line 9: a Excess from 2009 a Excess from 2009 a Excess from 2010 d Excess from 2011 10 Analysis of line 9: a Excess from 2010 a Excess from 2011	e Remaining amount distributed out of corpus				
indicated below: a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b. Taxable amount - see instructions e Undistributed income for 2011. Subtract line 4a from line 2a. Taxable amount - see instructions e Undistributed income for 2012. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) 8 Excess distributions carryover from 2007 not applied on line 5 or line 7 5 Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a Analysis of line 9: aExcess from 2008 bExcess from 2009 cExcess from 2001 dExcess from 2011 16, 3,3,4,7,0,61.	(If an amount appears in column (d), the same amount	0.			<u> </u>
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10 Analysis of line 9: a Excess from 2008 b Excess from 2009 c Excess from 2010 d Excess from 2011 16,347,061.	9 Excess distributions carryover to 2013.				
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b Excess from 2009 20,195,370. c Excess from 2010 14,247,185. d Excess from 2011 16,347,061.	10 Analysis of line 9:				
c Excess from 2010 14,247,185. dExcess from 2011 16,347,061.	a Excess from 2008 20,595,370.				
d Excess from 2011 16,347,061.					
a Evenese from 2012 4 5 / 1 9 / 9 . 1	1 5 5 4 6 6 6				
Form 990-PF (2012)	e Excess from 2012 4,571,929.				Corm 000 DE (0040)

Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year ARMSTRONG COUNTY MEMORIAL HOSPITAL N/A PUBLIC TO FUND A PORTION OF ONE NOTITE DRIVE SALARTES FOR A KITTANNING PA 16201 MID-LEVEL CERTIFIED DIABETIC EDUCATOR PHYSICIAN CHAMPION AND 50,000. AVONWORTH MIDDLE SCHOOL N/A PUBLIC TO SUPPORT FINANCIAL 256 JOSEPHS LANE AWARDS TO 12 SUPER+ SCHOOL CHALLENGE PITTSBURGH, PA 15237 SCHOOLS FOR DATA COLLECTION. 1,000. PUBLIC TO EXPAND A CHRONIC BERKS VISITING NURSE ASSOCIATION N/A 1170 BERKSHIRE BOULEVARD CARE MANAGEMENT PROGRAM SERVING BERKS WYOMISSING, PA 19601 COUNTY NON-HOMEBOUND PATIENTS WITH 50,000. PUBLIC TO EXPAND THE DENTAL BETHESDA MISSION N/A P.O. BOX 3041 AND MEDICAL HEALTH HARRISBURG, PA 17105 NEEDS OF THE MEDICALLY UNDERSERVED UNDERINSURED AND 112,500. PUBLIC TO SUPPORT THE BUTLER MEMORIAL HOSPITAL N/A ONE HOSPITAL WAY MATERNAL SERVICES PROGRAM (MSP) WHICH BUTLER, PA 16001-4697 PROVIDES A VARIETY OF COORDINATED SERVICES 150,000. SEE CONTINUATION SHEET(S) 4,507,735. Total ▶ 3a **b** Approved for future payment TO SUPPORT THE PILOT ACHIEVA N/A PUBLIC WAITING LIST REDUCTION 711 BINGHAM STREET INITIATIVE: AN PITTSBURGH, PA 15203 INNOVATIVE SOLUTION TO REDUCE WAITING LIST 150,000. PUBLIC BERKS VISITING NURSE ASSOCIATION N/A TO EXPAND A CHRONIC 1170 BERKSHIRE BOULEVARD CARE MANAGEMENT WYOMISSING, PA 19610 PROGRAM SERVING BERKS COUNTY NON-HOMEBOUND PATIENTS WITH 50,000. BETHESDA MISSION N/A PUBLIC TO EXPAND THE DENTAL P.O. BOX 3041 AND MEDICAL HEALTH HARRISBURG, PA 17105 NEEDS OF THE MEDICALLY UNDERSERVED, UNDERINSURED AND 57,500. SEE CONTINUATION SHEET(S) 1,608,815. ▶ 3b Total

Part XVI-A	Analy	sis of I	ncome-	Producing	Activities
I WILKEL A	Allai	,313 01 1	11001110		ACCITICO

Enter gross amounts unless otherwise indicated.	Unrelated business income		Exclu	ided by section 512, 513, or 514	(e)			
•	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income			
1 Program service revenue:	code		COGB					
a								
b								
c					 			
d				<u></u>				
e								
t								
g Fees and contracts from government agencies								
2 Membership dues and assessments								
3 Interest on savings and temporary cash					***			
investments								
4 Dividends and interest from securities			14	179,042.				
5 Net rental income or (loss) from real estate:								
a Debt-financed property								
	-		-	_				
b Not debt-financed property	<u> </u>							
6 Net rental income or (loss) from personal								
property								
7 Other investment income								
8 Gain or (loss) from sales of assets other								
than inventory			18	256,793.				
9 Net income or (loss) from special events								
10 Gross profit or (loss) from sales of inventory		_						
11 Other revenue:								
a								
a b	-							
С								
·			†					
d			1					
de		0.		435.835.	0.			
d e 12 Subtotal. Add columns (b), (d), and (e)		0.		435,835.				
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)		0.		435,835.	0. 435,835.			
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.)				13				
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	o the Acco			13				
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which incompared to the columns of the colum	me is reported	omplishment of Ex	cemp	ot Purposes	435,835.			
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d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which incompared to the second section of the section of the second section of the	me is reported	omplishment of Ex	cemp	ot Purposes	435,835.			
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which incompared to the second section of the section of the second section of the	me is reported	omplishment of Ex	cemp	ot Purposes	435,835.			
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which incompared to the second section of the section of the second section of the	me is reported	omplishment of Ex	cemp	ot Purposes	435,835.			
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which incompared to the second section of the section of the second section of the	me is reported	omplishment of Ex	cemp	ot Purposes	435,835.			
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which incompared to the second section of the section of the second section of the	me is reported	omplishment of Ex	cemp	ot Purposes	435,835.			
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which incompared to the second section of the section of the second section of the	me is reported	omplishment of Ex	cemp	ot Purposes	435,835.			
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which incompared to the second section of the section of the second section of the	me is reported	omplishment of Ex	cemp	ot Purposes	435,835.			
d e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities t Line No. Explain below how each activity for which incompared to the column of t	me is reported	omplishment of Ex	cemp	ot Purposes	435,835.			

		<u> </u>
Part XVII	Information Regarding Transfers To and Transactions and Relationships With	Noncharitable
	Exempt Organizations	

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of									Yes	No	
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?											
a Transfers from the reporting foundation to a noncharitable exempt organization of									777. 5		3
	(1) Cash								1a(1)		X
	(2) Other	r assets							1a(2)		X
b	Other tran	sactions'									<u></u> -
(1) Sales of assets to a noncharitable exempt organization									1b(1)		X
	(2) Purc	hases of assets from a no	ncharitable exempt o	organization					1b(2)		X
	• •	al of facilities, equipment,							1b(3)		X
		bursement arrangements							1b(4)		X
	• •	s or loan guarantees							1b(5)	-	X
	• •	rmance of services or me	•	-					1b(6)		X
	_	f facilities, equipment, ma				luma (h) abauld alu	waya ahayy tha fair	market value of the seeds	10	oto.	
0		-		_		* *		market value of the goods, n or sharing arrangement, s		eis,	
		d) the value of the goods,			,u 1033 ti	ian ian market valu	ic in any transaction	ir or snaring arrangement, t	iiiow iii		
a)L	ne no	(b) Amount involved		f noncharitable	exempt	organization	(d) Descriptio	n of transfers, transactions, and	sharing ar	rangeme	ents
<u> </u>				N/A	<u> </u>						
							<u> </u>	-			
			-			• •	· 				
	<u> </u>										
		·	ļ								
			ļ								
				_							
								- · · · -			
			 			-					
		· · · · · · · · · · · · · · · · · · ·									
2 a	Is the fou	ndation directly or indirect	Itlv affiliated with or	related to, one	or more	tax-exempt organiz	zations described				—
24		501(c) of the Code (other	-						Yes	X	No
h		omplete the following sch	•	,(0,) o ooo.				_			
	, .	(a) Name of org			(b) Typ	e of organization		(c) Description of relations	hip		
_		N/A	-								
	-										
	l and h	r penalties of perjury, I declare elief, it is true, correct, and cor						w han any knowledge	y the IRS	discuss	this
Sig	gn 🔪	\n_ \//	•				L	sh	urn with th	(see ins	
He		Jun Ki	sum			10 - 25 - 13	TREAS	URER	X Yes	L.	J No
	Sig	nature of officer or trustee		I December of		ate	Title	Check If PTIN			
		Print/Type preparer's na	11116	Preparer's si	yuaturi	1 000	Date	Check if PTIN self- employed			
Pa	id	EUGENE J.	LOGAN	EUGENE	×5/	LOGAN	1././	, ,	0227	221	
	eparer	Firm's name ► ALP			<i>U</i> ,	TOGWIA	10[1]13	Firm's EIN ▶ 25-1			
	e Only	rimis name PALP	PICA KOSEL	4 T 11WT				CHIHISEIN PAJ-1	, 44)	4 4	
		Firm's address ► 33	9 STXTH Z	VENIE	8178	I FL		 			
			TTSBURGH,					Phone no. 412-	281-	250	1
									rm 990		

<u>Fòrm 88</u>	68 (Rev. 1-2013)					Page 2
• If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension, e	complete only Part II and check this	box		
Note. O	nty complete Part II if you have already been granted an a	automatic	3-month extension on a previously fi	led Form	8868.	
If you	are filing for an Automatic 3-Month Extension, comple	te only Pa	art I (on page 1).			
Part I	Additional (Not Automatic) 3-Month E	xtenslo	n of Time. Only file the origin	al (no c	opies nee	ded).
			Enter filer's	identifyli	ng number,	see instructions
Type or	Name of exempt organization or other filer, see instru	ctions		Employe	r identification	on number (EIN) or
print						
File by the	HIGHMARK FOUNDATION				<u> 25–18</u>	76666
duo date to filing your return. Sec	Number, street, and room or sulte no. If a P.O. box, s 120 FIFTH AVENUE, NO. 922	ee instruc	tions.	Social se	curity numb	er (SSN)
instruction	City, town or post office, state, and ZIP code. For a fe	oreign add	Iress, see instructions.	•	<u>.</u>	
	PITTSBURGH, PA 15222					
=	.					
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)	••••••	•••••••	0 4
A11	Tau.		I A II Al			B.4
Applica In Con	ion	Return	Application			Return
ls For	D or Form 990-EZ	Code 01	Is For	33.83	7 .3.7	Code
Form 99		02		- 487 /		00
	20 (Individual)	03	Form 1041-A Form 4720			08
Form 99		04	Form 5227			10
	D-T (sec. 401(a) or 408(a) trust)	05	Form 6089			11
	0-T (trust other than above)	08	Form 8870	-		12
	o not complete Part II if you were not already granted			lousk file	d Form 886	
<u>G.Qr.i.c</u>	HIGHMARK FOUND		made o-month extension on a pro-	ioualy inc	<u> </u>	~·
• That	coks are in the care of ▶ 120 FIFTH AVENU		UITE 924 - PITTSBU	RGH.	PA 152	22
	hone No. ► 412-544-6902		FAX No. ▶			
	organization does not have an office or place of business	s in the Ur				. ▶ □
	is for a Group Return, enter the organization's four digit					
box 🕨	. If it is for part of the group, check this box	•	ich a list with the names and EINs of			
			BER 15, 2013.			
	r calendar year 2012 , or other tax year beginning		, and ending	9		•
	he tax year entered in line 5 is for less than 12 months, c	heck reas	on: Initial return	- Final r	eturn	
	Change in accounting period					
7 St	ate in detail why you need the extension					
	DDITIONAL TIME IS NEEDED TO		R INFORMATION NECE	SSARY	TO FI	LE A
C	OMPLETE AND ACCURATE TAX RET	URN.				
						
8a If	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tex, less any	ŀ		
ne	nrefundable credits. See instructions.			8a	\$	22,844.
	his application is for Form 990-PF, 990-T, 4720, or 6069,			- i. 1		
ta	x payments made. Include any prior year overpayment al	lowed as	a credit and any amount pald	ــــــــــــــــــــــــــــــــــــــ	Ì	44 000
	reviously with Form 8868.			85	\$	44,266.
c B	ilance due. Subtract line 8b from line 8a. Include your pa	syment wil	th this form, if required, by using		}	•
EI	TPS (Electronic Federal Tax Payment System). See instru			8c	\$	0.
			st be completed for Part II o		_	
Under pe it is true,	nailies of perjury, I declare that I have examined this form, includ correct, and complete, and that I am authorized to prepare this fo	ling accomp orm.	panying schedules and statements, and to	o the best o	of my knowled	lge and belief,
Signatur	Title >	CPA		Oate	> 2 /RE	/13
					Form	8868 (Rev. 1-2013)

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y	ear (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Commission	
CATHOLIC CHARITIES, DIOCESE OF	N/A	PUBLIC	TO INCREASE ACCESS TO	
ITTSBURGH, INC.			PRIMARY HEALTH, DENTAL	
12 NINTH STREET		İ	AND SPECIALTY CARE FOR	
ITTSBURGH, PA 15222			UNDERSERVED	
		<u> </u>	POPULATIONS IN	500,000
ENTRAL OUTREACH RESOURCE AND	N/A	PUBLIC	TO ESTABLISH THE COOL	
EFERRAL CENTER			PROGRAM: A	
860 CENTRE AVENUE			COMPREHENSIVE	
ITTSBURGH, PA 15219			INITIATIVE TO INCREASE	
	<u> </u>		HIV/AIDS TESTING IN	50,000
ENTRAL SUSQUEHANNA INTERMEDIATE UNIT	N/A	PUBLIC	SPONSORSHIP FOR	
CENTER FOR SAFE SCHOOLS			"KEEPING OUR CHILDREN	
75 GRANDVIEW AVENUE, SUITE 200			SAFE: STRATEGIES FOR	
AMP HILL, PA 17011			SCHOOLS AND	
		<u> </u>	COMMUNITIES"	7,500
ENTRAL SUSQUEHANNA INTERMEDIATE UNIT	N/A	PUBLIC	TO STRENGTHEN AND	
75 GRANDVIEW AVENUE, SUITE 200			PROMOTE SUSTAINABILITY	
AMP HILL, PA 17011		•	OF BULLYING PREVENTION	
			EFFORTS IN	
			PENNSYLVANIA.	591,000
HATHAM UNIVERSITY	N/A	PUBLIC	TO FUND THE	
OODLAND ROAD			INTEGRATION OF	
PITTSBURGH, PA 15232			SIMULATION TRAINING IN	
			CHATHAM'S ACADEMIC	
		ļ	PROGRAMS.	60,250
	7/3	PUBLIC	PRESENTING SPONSOR FOR	
CHILDREN'S INSTITUTE	N/A	POBLIC	FARM TO SCHOOL TO	
1405 SHADY AVENUE			1	15,000
PITTSBURGH, PA 15217	N/A	PUBLIC	COMMUNITY CONFERENCE. SPONSORSHIP TO SUPPORT	
CHILDREN'S INSTITUTE	N/A	POBLIC	FRAGRANCE FREE AN	
405 SHADY AVENUE			EDUCATIONAL PROGRAM	
PITTSBURGH, PA 15217			WITH AN EMPHASIS ON	
			FRAGRANCES IN THE	12,500
THE OF WARPERDAM	N/A	PUBLIC	TO FUND THE IRONKID	- 12,300
CITY OF HARRISBURG	N/A	PUBLIC	CHALLENGE LET'S MOVE	
O NORTH SECOND STREET SUITE 401			PROGRAM WHICH	
IARRISBURG, PA 17101-1686			REQUIRES CHILDREN TO	
			REGISTER FOR	25,000
TIMY OF DARVEDCRING	N/A	PUBLIC	ADVERTISE AND PROMOTE	23,000
CITY OF PARKERSBURG	, A	200010	CARD USE AT LOCAL	
1 GOVERNMENT SQUARE			FARMERS MARKET TO	
PARKERSBURG, WV 26101			INCREASE HEALTHY FOOD	
			ACCESS TO UNDERSERVED	5,000
COMMINITAL DESIGNATION OF DIMESTED	N/A	PUBLIC	TO PROVIDE CONTINUED	3,000
COMMUNITY HEALTH CLINIC OF BUTLER	H/A	TODDIC.	SUPPORT OF A	
COUNTY			MULTIFACETED DIABETES	
LO3 BONNIE DRIVE			MANAGEMENT PROGRAM	
BUTLER, PA 16002			THAT PROVIDES	50,000
				20,000

Part XV Supplementary Information			1.7	
3 Grants and Contributions Paid During the Y		1		
Recipient	If recipient is an individual,	·		
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient	<u> </u>	
CORRY AREA FREE CLINIC	N/A	PUBLIC	TO SUPPORT CORRY AREA	
612 SMITH STREET			FREE CLINIC.	
CORY , PA 16407				71,099
EDUCATING TEENS ABOUT HIV/AIDS	N/A	PUBLIC	TO SUPPORT LIVE LIFE	
1425 PENNSYLVANIA AVENUE			WITHOUT THE DISEASE	
PITTSBURGH, PA 15233		İ	SERIES THAT FOCUSES ON	
•			ADOLESCENT HEALTH AND	
			PROMOTES HEALTHY	50,000
EVERY CHILD, INC.	N/A	PUBLIC	TO SUPPORT THE DOULA	
6401 PENN AVENUE, SUITE 300	[]		PREGNANCY AND	
PITTSBURGH PA 15206			PARENTING SUPPORT	
FITIDDONGII, IN 13200			PROGRAM.	52,500
		 	FROGRAM;	32,300
FAMILY FIRST HEALTH	N/A	PUBLIC	TO INCREASE DENTAL	
116 SOUTH GEORGE STREET	, A	102210	CARE FOR THE	
			UNDERSERVED IN RURAL	
YORK, PA 17401			ADAMS COUNTY.	100,000
FAMILY HOSPICE AND FAMILY CARE	N/A	PUBLIC	TO FUND A FULL-TIME	
50 MOFFETT ST.	N/A	T OBETC	COORDINATOR AND TWO	
			PART-TIME PROGRAM	
PITTSBURGH, PA 15243		İ	SUPPORT PEOPLE FOR	
			THEIR TRANSITIONS	31,226
FAMILY RESOURCES	N/A	PUBLIC	TO IMPLEMENT THE	31,220
STEVENSON BUILDING 141 SOUTH HIGHLAND	[""		EVIDENCE-BASED PROGRAM	
AVENUE PITTSBURGH, PA 15206			CALLED RE-CHARGEL, AN	
INTERNOL I I I I I I I I I I I I I I I I I I I			AFTERSCHOOL PROGRAM TO	
			PRACTICE GOOD	39,359
FORBES HEALTH FOUNDATION	N/A	PUBLIC	TO ESTABLISH	
2570 HAYMAKER ROAD	[","		REDEFINING VALUE IN	
MONROEVILLE, PA 15146			CARE: A PATIENT	
		1	FOCUSED AND PHYSICIAN	
			LED INITIATIVE	80,000
GATEWAY S.DGATEWAY MIDDLE SCHOOL	N/A	PUBLIC	TO SUPPORT FINANCIAL	
4450 OLD WILLIAM PENN HIGHWAY			AWARDS TO 12 SUPER+	
MONROEVILLE, PA 15146			SCHOOL CHALLENGE	
,			SCHOOLS FOR DATA	
		1	COLLECTION.	1,000
GRANTMAKERS IN HEALTH	N/A	PUBLIC	SPONSORSHIP OF THE	
1100 CONNECTICUT AVENUE, N.W.			GRANTMAKERS IN HEALTH	
WASHINGTON, DC 20036		1	ISSUES DIALOGUE,	
, -			RETURNING THE MOUTH TO	
			THE BODY: INTEGRATING	5,000
HOLY FAMILY INSTITUTE	N/A	PUBLIC	TO SUPPORT A PLANNING	•
8235 OHIO RIVER BOULEVARD		1	GRANT TO ASSIST WITH	
PITTSBURGH, PA 15202-1594		1	THE CREATION OF THE	
			HEALTHY YOUTH AND	
	1	1	FAMILY LIVING PROGRAM.	12,324
Total from continuation sheets		· ·		•

Part XV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient TO ESTABLISH THE HOLY FAMILY INSTITUTE N/A PUBLIC 8235 OHIO RIVER BOULEVARD HEALTHY FOR LIFE PROGRAM FOCUSED ON PITTSBURGH PA 15202-1594 OVERCOMING BARRIERS TO HEALTHY EATING FACED 114,120. HOSANNA HOUSE N/A PUBLIC TO FUND A YEAR-ROUND SUMMER SWIMMING 807 WALLACE AVENUE WILKINSBURG, PA 15221 PROGRAM DESIGNED TO INCREASE PROVIDING PHYSICAL ACTIVITY AND 30,000. HOSPITAL COUNCIL OF WESTERN TO FUND A BASELINE N/A PUBLIC HEALTH LITERACY PENNSYLVANIA CONSUMER SURVEY TO BE 500 COMMONWEALTH DRIVE WARRENDALE, PA 15086 ADMINISTERED TO APPROXIMATELY 1,000 45,000. JEWISH HEALTHCARE FOUNDATION PUBLIC TO SUPPORT THE SALARY N/A 650 SMITHFIELD STREET SUITE 2440 OF A PART-TIME PITTSBURGH, PA 15222 EXECUTIVE DIRECTOR OF THE PENNSYLVANIA HEALTH FUNDERS 15,000. N/A JOHN J. KANE REGIONAL CENTERS PUBLIC EFFECTIVE 955 RIVERMONT DRIVE IDENTIFICATION . PITTSBURGH, PA 15207 PREVENTION AND TREATMENT OF IN-HOUSE PRESSURE ULCERS 100,000. PUBLIC TO SUPPORT KIDSPEACE KIDSPEACE N/A DENTAL CLINIC AND 1650 BROADWAY DRIVE DENTAL EDUCATION BETHLEHEM, PA 18015 PROGRAM. 75,000. LAFAYETTE ELEMENTARY SCHOOL PUBLIC SCHOLARSHIP AWARD FOR N/A 1000 ST. JOSEPH STREET THE OLWEUS QUALITY LANCASTER PA 17602 ASSURANCE SYSTEM PERFORMANCE 2,500. LANCASTER COUNTY MEDICAL FOUNDATION PUBLIC TO SUPPORT THE SALARY N/A OF A PRESCRIPTION 137 EAST WALNUT STREET ASSISTANT COORDINATOR LANCASTER PA 17602 FOR PROJECT ACCESS ANCASTER COUNTY TO 36,280. PUBLIC TO FUND THE HEALTHY LANCASTER RECREATION COMMISSION N/A 525 FAIRVIEW AVENUE SNACK (SMART NUTRITION AND ACTIVITY CHOICES LANCASTER PA 17603 FOR KIDS) PROGRAM. 37,500. PUBLIC LAUREL HIGHLANDS SENIOR HIGH SCHOOL TO SUPPORT FINANCIAL N/A 304 BAILEY AVENUE AWARDS TO 12 SUPER+ SCHOOL CHALLENGE UNIONTOWN, PA 15401 SCHOOLS FOR DATA COLLECTION. 500. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient LEMOYME COMMUNITY CENTER PUBLIC TO CREATE NUTRAFIT, A 200 FORREST AVENUE PHYSICAL FITNESS AND MITTRITTON PROGRAM FOR WASHINGTON, PA 15301 INDERSERVED WASHINGTON COUNTY YOUTH AND 50,000. MONONGAHELA VALLEY HOSPITAL INC. N/A PUBLIC TO FUND THE SALARY OF A CLINICAL PHARMACIST 1163 COUNTRY CLUB ROAD MONONGAHELA, PA 15063-1095 TO SUPPORT CARE TRANSITION AND REDUCE HOSPITAL READMISSIONS 145,860. MT. CARMEL JR/SR HIGH N/A PUBLIC TO SUPPORT FINANCIAL 600 WEST FIFTH STREET AWARDS TO 12 SUPER+ MT. CARMEL PA 17851 SCHOOL CHALLENGE SCHOOLS FOR DATA COLLECTION. 750. NESHANNOCK SCHOOL DISTRICT - JR-SR H. PUBLIC TO SUPPORT FINANCIAL AWARDS TO 12 SUPER+ 3834 MITCHELL ROAD SCHOOL CHALLENGE NEW CASTLE PA 16105 SCHOOLS FOR DATA 500. COLLECTION. PUBLIC NORTH SIDE CHRISTIAN HEALTH CENTER TO FUND THE SALARIES N/A OF MEDICAL AND DENTAL 816 MIDDLE STREET PROFESSIONALS TO PITTSBURGH, PA 15212 SUPPORT THE INTEGRATION OF ORAL 125,000. TO SUPPORT FINANCIAL NORTHEASTERN HIGH SCHOOL N/A PUBLIC 300 HIGH STREET AWARDS TO 12 SUPER+ SCHOOL CHALLENGE MANCHESTER PA 17345 SCHOOLS FOR DATA 750. COLLECTION NORTHERN LEBANON MIDDLE SCHOOL N/A PUBLIC TO SUPPORT FINANCIAL AWARDS TO 12 SUPER+ 345 SCHOOL DRIVE, PO BOX 100 FREDERICKSBURG, PA 17026 SCHOOL CHALLENGE SCHOOLS FOR DATA COLLECTION. 500. PUBLIC TO IMPLEMENT THE WANNA OLIVET BOYS & GIRLS CLUB N/A PLAY - A PROGRAM THAT 1161 PERSHING BLVD READING PA 19611 INCREASES THE OVERALL FITNESS THROUGH PHYSICAL ACTIVITY AND 33,000. PARK FOREST MIDDLE SCHOOL N/A PUBLIC TO SUPPORT FINANCIAL 2180 SCHOOL DRIVE AWARDS TO 12 SUPER+ STATE COLLEGE, PA 16803 SCHOOL CHALLENGE SCHOOLS FOR DATA COLLECTION. 1,000. PENNSYLVANIA ACADEMY OF FAMILY N/A PUBLIC EAD SPONSORSHIP OF PHYSICIANS FOUNDATION THE BULLYING AND CHILDHOOD OBESITY 2704 COMMERCE DRIVE, SUITE A HARRISBURG, PA 17110-9365 CONTINUING MEDICAL EDUCATION SERIES TO BE 30,500. Total from continuation sheets

Part XV Supplementary Information	on		25-187	000
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual,	1		
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
PENNSYLVANIA PUBLIC HEALTH	N/A	PUBLIC	TO SUPPORT THE	
ASSOCIATION	, A	FOBBIC	CORPORATE PARTNERS IN	
260 SOUTH BROAD STREET, 18TH FLOOR	İ		PUBLIC HEALTH	
PHILADELPHIA, PA 19102		1	RECEPTION TO BE HELD	
THIBBOOK IN 19102			IN CONJUNCTION WITH	5,000
PENNSYLVANIA STATE UNIVERSITY	N/A	PUBLIC	TO SUPPORT THE	3,000
110 TECHNOLOGY CENTER BUILDING	N/A	FORDIC		
UNIVERSITY PARK PA 16802	!		CONTINUATION OF NRG	
UNIVERSITI PARK, PA 10002			POWERED BY CHOICE	
		İ	PROGRAM ACTIVITIES FOR	100 100
DIATURE DE REPUBLICA			2008-2011.	180,126
PLAINFIELD ELEMENTARY	N/A	PUBLIC	TO SUPPORT FINANCIAL	
539 SCHOOL ROAD			AWARDS TO 12 SUPER+	
NAZARETH, PA 18064			SCHOOL CHALLENGE	
		1	SCHOOLS FOR DATA	
		<u> </u>	COLLECTION.	500
PRIMARY HEALTH NETWORK	N/A	PUBLIC	TO FUND THE SALARY OF	
100 SHENANGO AVENUE	İ		A DENTAL HYGIENIST TO	
SHARON, PA 16146			WORK IN THREE DENTAL	
			LOCATIONS,	41,775
SACRED HEARTH HOSPITAL	N/A	PUBLIC	TO SUSTAIN THE	
421 CHEW STREET			OPERATION OF FIVE	
ALLENTOWN, PA 18102-3490			SCHOOL-BASED HEALTH	
			CENTERS LOCATED IN THE	
			ALLENTOWN SCHOOL	60,000.
SALVATION ARMY	N/A	PUBLIC	TO EXPAND SERVICES TO	
1122 GREEN STREET, POB 61798			THE AFTERSCHOOL AND	
HARRISBURG, PA 17106-1798			YOUTH ENRICHMENT	
		-	PROGRAM.	37,086,
CONTRACTOR NOTICE AND ADVENCED BRIDE	ļ.,,		L	
SCHENLEY HEIGHTS YOUTH DEVELOPMENT	N/A	PUBLIC	TO EXPAND THE PHYSICAL	
CORPORATION			ACTIVITY AND	
3171 EWART DRIVE			ENRICHMENT FOR YOUTH	
PITTSBURGH, PA 15219	- 		PROGRAM.	34,325,
SERRA CATHOLIC	N/A	DARTIC	TO SUPPORT FINANCIAL	
200 HERSHEY DRIVE			AWARDS TO 12 SUPER+	
MCKEESPORT, PA 15132			SCHOOL CHALLENGE	
			SCHOOLS FOR DATA	
		 	COLLECTION.	1,000
SOUTH HANOVER ELEMENTARY SCHOOL	N/A	PUBLIC	TO SUPPORT FINANCIAL	
15 WEST THIRD STREET		1	AWARDS TO 12 SUPER+	
HERSHEY, PA 17033			SCHOOL CHALLENGE	
			SCHOOLS FOR DATA	
		<u> </u>	COLLECTION.	1,000.
SOUTHEAST LANCASTER HEALTH SERVICES	N/A	PUBLIC	TO FUND TWO EFDH IN	
625 SOUTH DUKE STREET, POB 598		1	ORDER TO INCREASE	
LANCASTER, PA 17608-0598			PATIENT VISITS,	
			IMPROVE EFFICIENCIES,	
		<u> </u>	INCREASE DENTAL	50,000.
Total from continuation sheets				

Part XV Supplementary Information	i	-	25-187	
3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual,	T -		
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
SPANISH AMERICAN CIVIC ASSOCIATION	N/A	PUBLIC	TO SUPPORT THE	
545 PERSHING AVENUE			CONTINUATION OF THE	
LANCASTER, PA 17602		1	HIV/AIDS EARLY	
•			INTERVENTION PROGRAM	
			THAT PROVIDES	37,500
SQUIRREL HILL HEALTH CENTER	N/A	PUBLIC	TO FUND A FULL TIME	
200 JHF DRIVE		1	EXPANDED FUNCTION	
PITTSBURGH, PA 15217			DENTAL HYGIENIST.	41,270
STRONG WOMEN, STRONG GIRLS	N/A	PUBLIC	TO PILOT STRONG WOMEN	
1901 CENTRE AVENUE, SUITE 103			STRONG GIRLS GET	
PITTSBURGH, PA 15219			ACTIVE! PHYSICAL	
			FITNESS AND NUTRITION	
			CURRICULUM TO ADDRESS	116,200
THE CHILDREN'S HOME & LEMIEUX FAMILY	N/A	PUBLIC	TO SUPPORT NURSING	
CENTER			STAFF SALARIES AND	
5324 PENN AVENUE			NURSE EDUCATION FOR	
PITTSBURGH, PA 15224			THE PEDIATRIC	
111111111111111111111111111111111111111			SPECIALTY HOSPITAL.	50,000
TITUSVILLE MIDDLE SCHOOL	N/A	PUBLIC	TO SUPPORT FINANCIAL	30,000
415 WATER STREET	N/ A	TOBBIC	AWARDS TO 12 SUPER+	
TITUSVILLE, PA 16354			SCHOOL CHALLENGE	
11108VIDDE, FR 10334			SCHOOLS FOR DATA	
				1 000
INTONMOTOL HOODIMAL	N/A	DUDI TO	COLLECTION.	1,000
UNIONTOWN HOSPITAL	N/A	PUBLIC	TO SUPPORT THE SALARY	
500 W. BERKLEY ST.			OF THE WOUND CARE	
UNIONTOWN , PA 15401	 		ASSOCIATE, PHYSICIAN,	
	İ		COMMUNITY AND PATIENT	50 600
	L		EDUCATION AND	52,690
UNIVERSITY OF PITTSBURGH SCHOOL OF	N/A	PUBLIC	TO PURCHASE EQUIPMENT	
DENTAL MEDICINE			FOR TWO NEW	
3501 TERRACE STREET			OPERATORIES IN THE	
PITTSBURGH, PA 15261-1933			DEPARTMENT OF	
		 	PEDIATRIC DENTISTRY.	175,000
WESTMONT-HILLTOP MIDDLE SCHOOL	N/A	PUBLIC	SCHOLARSHIP AWARD FOR	
827 DIAMOND BLVD.			THE OLWEUS QUALITY	
JOHNSTOWN, PA 15905			ASSURANCE SYSTEM	
			PERFORMANCE	2,500
WINDBER RESEARCH INSTITUTE	N/A	PUBLIC	TO CONTINUE ANALYSIS	
620 SEVENTH AVE.			OF THE EVALUATION	
WINDBER, PA 15963			OUTCOMES AND REPORTING	
·			OF DATA RELATED TO	
			HIGHMARK FOUNDATION'S	598,000
YMCA OF GREATER PITTSBURGH	N/A	PUBLIC	TO PILOT A CHILDHOOD	
420 FT. DUQUESNE BOULEVARD			OBESITY PREVENTION	
PITTSBURGH, PA 15222			PROGRAM, HEALTHY	
, -			FAMILY HOME TRAINING	
			CAMP SERVING 72	21,745
Total from continuation sheets	· 	<u> </u>		,.13

Part XV Supplementary Information 3 Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient PUBLIC TO EXPAND THEIR YOUTH PLACES N/A 2934 SMALLMAN STREET, 2ND FLOOR EXISTING PROGRAM TO PITTSBURGH, PA 15201 INCREASE PHYSICAL ACTIVITY IN TEENS AND IMPROVE THEIR 35,000. Total from continuation sheets

Part XV Supplementary Information 3 Grants and Contributions Approved for Fut				
	If recipient is an individual,			
Recipient Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CENTRAL OUTREACH RESOURCE AND	N/A	PUBLIC	TO ESTABLISH THE COOL	
REFERRAL CENTER	,,		PROGRAM: A	
1860 CENTRE AVENUE			COMPREHENSIVE	
PITTSBURGH PA 15219			INITIATIVE TO INCREASE	
·			HIV/AIDS TESTING IN	50,000
CONGREGATIONS UNITED FOR NEIGHBORHOOD	N/A	PUBLIC	TO SUPPORT THE GREATER	
ACTION (CUNA)			LEHIGH VALLEY SUPER	
317 NORTH 4TH STREET			UTILIZER AND	
ALLENTOWN PA 18102			NEIGHBORHOOD HOT SPOT	
,,			MODEL TO REDUCE	142,830
EDUCATING TEENS ABOUT HIV/AIDS	N/A	PUBLIC	TO SUPPORT LIVE LIFE	
1425 PENNSYLVANIA AVENUE		1	WITHOUT THE DISEASE	
PITTSBURGH, PA 15233			SERIES THAT FOCUSES ON	
22220000, 200 20000			ADOLESCENT HEALTH AND	
			PROMOTES HEALTHY	25,000
FORBES HEALTH FOUNDATION	N/A	PUBLIC	TO ESTABLISH .	
2570 HAYMAKER ROAD	[","		REDEFINING VALUE IN	
MONROEVILLE, PA 15146			CARE: A PATIENT	
,			FOCUSED AND PHYSICIAN	
			LED INITIATIVE	70,000
HOLY FAMILY INSTITUTE	N/A	PUBLIC	TO ESTABLISH THE	'
8235 OHIO RIVER BOULEVARD			HEALTHY FOR LIFE	
PITTSBURGH, PA 15202			PROGRAM FOCUSED ON	
			OVERCOMING BARRIERS TO	
			HEALTHY EATING FACED	70,880
NORTH SIDE CHRISTIAN HEALTH CENTER	N/A	PUBLIC	TO FUND THE SALARIES	
816 MIDDLE STREET			OF MEDICAL AND DENTAL	
PITTSBURGH, PA 15212			PROFESSIONALS TO	
•			SUPPORT THE	
			INTEGRATION OF ORAL	125,000
PENNSYLVANIA STATE UNIVERSITY	N/A	PUBLIC	TO SUPPORT THE	
110 TECHNOLOGY CENTER BUILDING			CONTINUATION OF NRG	
UNIVERSITY PARK, PA 16802			POWERED BY CHOICE	
·			PROGRAM ACTIVITIES FOR	
			2008-2011.	680,955
STRONG WOMEN STRONG GIRLS	N/A	PUBLIC	TO PILOT STRONG WOMEN	
1901 CENTRE AVENUE, SUITE 103			STRONG GIRLS GET	
PITTSBURGH PA 15219			ACTIVE! PHYSICAL	
·			FITNESS AND NUTRITION	
	İ		CURRICULUM TO ADDRESS	86,650
STRONG WOMEN STRONG GIRLS	N/A	PUBLIC	TO PILOT STRONG WOMEN	
1901 CENTRE AVENUE, SUITE 103			STRONG GIRLS GET	
PITTSBURGH, PA 15219			ACTIVE! PHYSICAL	
			FITNESS AND NUTRITION	
			CURRICULUM TO ADDRESS	25,000
WEST VIRGINIA UNIVERSITY FOUNDATION	N/A	PUBLIC	TO SUPPORT A PLANNING	
ONE MEDICAL CENTER			GRANT TO ASSIST WITH	
MORGANTOWN, WV 26506		1	THE CREATION OF THE	
•			MCDOWELL CHOICES	
			PROGRAM.	75,000
Total from continuation sheets				1,351,315

Part XV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - ARMSTRONG COUNTY MEMORIAL HOSPITAL

TO FUND A PORTION OF SALARIES FOR A MID-LEVEL CERTIFIED DIABETIC

EDUCATOR, PHYSICIAN CHAMPION AND ENDOCRINOLOGIST TO IMPROVE INPATIENT

DIABETIC HOSPITAL MANAGEMENT AND CARE AT ARMSTRONG COUNTY MEMORIAL

HOSPITAL.

NAME OF RECIPIENT - BERKS VISITING NURSE ASSOCIATION

TO EXPAND A CHRONIC CARE MANAGEMENT PROGRAM SERVING BERKS COUNTY

NON-HOMEBOUND PATIENTS WITH CONGESTIVE HEART FAILURE.

NAME OF RECIPIENT - BETHESDA MISSION

TO EXPAND THE DENTAL AND MEDICAL HEALTH NEEDS OF THE MEDICALLY UNDERSERVED, UNDERINSURED AND UNINSURED IN THE CAPITAL REGION.

NAME OF RECIPIENT - BUTLER MEMORIAL HOSPITAL

TO SUPPORT THE MATERNAL SERVICES PROGRAM (MSP) WHICH PROVIDES A VARIETY
OF COORDINATED SERVICES TO LOW-INCOME AND UNINSURED WOMEN AND THEIR
CHILDREN FROM BIRTH THROUGH AGE FIVE.

NAME OF RECIPIENT - CATHOLIC CHARITIES, DIOCESE OF PITTSBURGH, INC.

TO INCREASE ACCESS TO PRIMARY HEALTH, DENTAL AND SPECIALTY CARE FOR

UNDERSERVED POPULATIONS IN SOUTHWEST PENNSYLVANIA AT THE CATHOLIC

CHARITIES FREE HEALTH CARE CENTER.

NAME OF RECIPIENT - CENTRAL OUTREACH RESOURCE AND REFERRAL CENTER

TO ESTABLISH THE COOL PROGRAM: A COMPREHENSIVE INITIATIVE TO INCREASE

HIV/AIDS TESTING IN MINORITY AT RISK POPULATIONS.

Part XV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - CENTRAL SUSQUEHANNA INTERMEDIATE UNIT - CENTER FOR

SAFE SCHOOLS

SPONSORSHIP FOR "KEEPING OUR CHILDREN SAFE: STRATEGIES FOR SCHOOLS

AND COMMUNITIES" CONFERENCE TO BE HELD IN MAY 2012 IN HARRISBURG, PA.

NAME OF RECIPIENT - CHILDREN'S INSTITUTE

SPONSORSHIP TO SUPPORT FRAGRANCE FREE, AN EDUCATIONAL PROGRAM WITH AN

EMPHASIS ON FRAGRANCES IN THE WORKPLACE.

NAME OF RECIPIENT - CITY OF HARRISBURG

TO FUND THE IRONKID CHALLENGE LET'S MOVE PROGRAM, WHICH REQUIRES

CHILDREN TO REGISTER FOR PARTICIPATION AND TAKE PART IN PHYSICAL

ACTIVITIES AND ACHIEVE STANDARDS TO QUALIFY FOR IRONKID RECOGNITION.

NAME OF RECIPIENT - CITY OF PARKERSBURG

ADVERTISE AND PROMOTE CARD USE AT LOCAL FARMERS MARKET TO INCREASE

HEALTHY FOOD ACCESS TO UNDERSERVED POPULATION.

NAME OF RECIPIENT - COMMUNITY HEALTH CLINIC OF BUTLER COUNTY

TO PROVIDE CONTINUED SUPPORT OF A MULTIFACETED DIABETES MANAGEMENT

PROGRAM THAT PROVIDES HIGH-QUALITY EDUCATION, MEDICAL AND DENTAL

SERVICES TO UNINSURED DIABETICS IN BUTLER COUNTY.

NAME OF RECIPIENT - EDUCATING TEENS ABOUT HIV/AIDS

TO SUPPORT LIVE LIFE WITHOUT THE DISEASE SERIES THAT FOCUSES ON

ADOLESCENT HEALTH AND PROMOTES HEALTHY BEHAVIORS ACROSS LIFE STAGES.

NAME OF RECIPIENT - FAMILY HOSPICE AND FAMILY CARE

Part XV | Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

TO FUND A FULL-TIME COORDINATOR AND TWO PART-TIME PROGRAM SUPPORT PEOPLE FOR THEIR TRANSITIONS PROGRAM.

NAME OF RECIPIENT - FAMILY RESOURCES

TO IMPLEMENT THE EVIDENCE-BASED PROGRAM CALLED RE-CHARGEL, AN

AFTERSCHOOL PROGRAM TO PRACTICE GOOD NUTRITION AND PHYSICAL ACTIVITY

HABITS.

NAME OF RECIPIENT - FORBES HEALTH FOUNDATION

TO ESTABLISH REDEFINING VALUE IN CARE: A PATIENT FOCUSED AND PHYSICIAN

LED INITIATIVE DESIGNED TO DECREASE VARIATION IN CARE: ELIMINATE WASTE

AND ENHANCE PATIENT SATISFACTION.

NAME OF RECIPIENT - GRANTMAKERS IN HEALTH

SPONSORSHIP OF THE GRANTMAKERS IN HEALTH ISSUES DIALOGUE, RETURNING THE MOUTH TO THE BODY: INTEGRATING ORAL HEALTH AND PRIMARY CARE TO BE HELD IN WASHINGTON, DC ON APRIL 17, 2012.

NAME OF RECIPIENT - HOLY FAMILY INSTITUTE

TO ESTABLISH THE HEALTHY FOR LIFE PROGRAM FOCUSED ON OVERCOMING

BARRIERS TO HEALTHY EATING FACED BY YOUTH AGES 14-17 AND FAMILIES

IN-COMMUNITY FAMILY STABILIZATION PROGRAM AND YOUTH IN RESIDENTIAL

CARE.

NAME OF RECIPIENT - HOSANNA HOUSE

TO FUND A YEAR-ROUND SUMMER SWIMMING PROGRAM DESIGNED TO INCREASE

PROVIDING PHYSICAL ACTIVITY AND AN EDUCATIONAL PROGRAM TO PREVENT AND

CONTROL OBESITY.

Part XV Supplementary Information

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

NAME OF RECIPIENT - HOSPITAL COUNCIL OF WESTERN PENNSYLVANIA

TO FUND A BASELINE HEALTH LITERACY CONSUMER SURVEY TO BE ADMINISTERED

TO APPROXIMATELY 1,000 RESIDENTS OF ALLEGHENY COUNTY.

NAME OF RECIPIENT - JEWISH HEALTHCARE FOUNDATION

TO SUPPORT THE SALARY OF A PART-TIME EXECUTIVE DIRECTOR OF THE

PENNSYLVANIA HEALTH FUNDERS COLLABORATIVE.

NAME OF RECIPIENT - LANCASTER COUNTY MEDICAL FOUNDATION

TO SUPPORT THE SALARY OF A PRESCRIPTION ASSISTANT COORDINATOR FOR

PROJECT ACCESS LANCASTER COUNTY TO REDUCE BARRIERS FOR PARTICIPANTS

APPLYING FOR MEDICATION DISCOUNTS THROUGH PRESCRIPTION ASSISTANCE

PROGRAMS.

NAME OF RECIPIENT - LEMOYME COMMUNITY CENTER

TO CREATE NUTRAFIT, A PHYSICAL FITNESS AND NUTRITION PROGRAM FOR

UNDERSERVED WASHINGTON COUNTY YOUTH AND FAMILIES.

NAME OF RECIPIENT - NORTH SIDE CHRISTIAN HEALTH CENTER

TO FUND THE SALARIES OF MEDICAL AND DENTAL PROFESSIONALS TO SUPPORT THE

INTEGRATION OF ORAL HEALTH AND PRIMARY CARE.

NAME OF RECIPIENT - OLIVET BOYS & GIRLS CLUB

TO IMPLEMENT THE WANNA PLAY - A PROGRAM THAT INCREASES THE OVERALL

FITNESS THROUGH PHYSICAL ACTIVITY AND NUTRITION EDUCATION.

NAME OF RECIPIENT - PENNSYLVANIA ACADEMY OF FAMILY PHYSICIANS FOUNDATION

Part XV Supplementary Information

THE ALLENTOWN SCHOOL DISTRICT.

3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution

LEAD SPONSORSHIP OF THE BULLYING AND CHILDHOOD OBESITY CONTINUING

MEDICAL EDUCATION SERIES TO BE HELD IN HERSHEY, PA AND FARMINGTON, PA

IN THE FALL OF 2011 AND SPRING OF 2012.

NAME OF RECIPIENT - PENNSYLVANIA PUBLIC HEALTH ASSOCIATION

TO SUPPORT THE CORPORATE PARTNERS IN PUBLIC HEALTH RECEPTION TO BE HELD

IN CONJUNCTION WITH THE PENNSYLVANIA PUBLIC HEALTH ASSOCIATION

CONFERENCE, "MOVING THE NEEDLE ON PUBLIC HEALTH OUTCOMES," IN

PITTSBURGH, PA ON OCTOBER 11, 2012.

NAME OF RECIPIENT - SACRED HEARTH HOSPITAL

TO SUSTAIN THE OPERATION OF FIVE SCHOOL-BASED HEALTH CENTERS LOCATED IN

NAME OF RECIPIENT - SOUTHEAST LANCASTER HEALTH SERVICES

TO FUND TWO EFDH IN ORDER TO INCREASE PATIENT VISITS, IMPROVE

EFFICIENCIES, INCREASE DENTAL EMERGENCY PATIENTS, IMPROVE DENTAL VISITS

AND INCREASE THE PERCENTAGE OF PREVENTIVE PROCEDURES.

NAME OF RECIPIENT - SPANISH AMERICAN CIVIC ASSOCIATION

TO SUPPORT THE CONTINUATION OF THE HIV/AIDS EARLY INTERVENTION PROGRAM

THAT PROVIDES WRAP-AROUND SERVICES FOR HIV/AIDS CLIENTS INCLUDING

SALARY OF THE COMMUNITY EDUCATION SPECIALIST.

NAME OF RECIPIENT - STRONG WOMEN, STRONG GIRLS

TO PILOT STRONG WOMEN STRONG GIRLS GET ACTIVE! PHYSICAL FITNESS AND

NUTRITION CURRICULUM TO ADDRESS OBESITY IN 40-50 AFRICAN AMERICAN GIRLS

IN GRADES 3-5.

Part XV Supplementary Information
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution
NAME OF RECIPIENT - UNIONTOWN HOSPITAL
TO SUPPORT THE SALARY OF THE WOUND CARE ASSOCIATE, PHYSICIAN, COMMUNITY
AND PATIENT EDUCATION AND MARKETING STRATEGIES.
NAME OF RECIPIENT - WINDBER RESEARCH INSTITUTE
TO CONTINUE ANALYSIS OF THE EVALUATION OUTCOMES AND REPORTING OF DATA
RELATED TO HIGHMARK FOUNDATION'S BULLYING PREVENTION EFFORTS.
NAME OF RECIPIENT - YMCA OF GREATER PITTSBURGH
TO PILOT A CHILDHOOD OBESITY PREVENTION PROGRAM, HEALTHY FAMILY HOME
TRAINING CAMP SERVING 72 FAMILIES RESIDING IN UNDERSERVED COMMUNITIES.
NAME OF RECIPIENT - YOUTH PLACES
TO EXPAND THEIR EXISTING PROGRAM TO INCREASE PHYSICAL ACTIVITY IN TEENS
AND IMPROVE THEIR NUTRITION AND EATING HABITS.

Part XV	Supplementary Inf	ormati	on

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

NAME OF RECIPIENT - ACHIEVA

TO SUPPORT THE PILOT WAITING LIST REDUCTION INITIATIVE: AN INNOVATIVE SOLUTION TO REDUCE WAITING LIST FOR BASIC SUPPORTIVE AND HEALTH CARE SERVICES.

NAME OF RECIPIENT - BERKS VISITING NURSE ASSOCIATION

TO EXPAND A CHRONIC CARE MANAGEMENT PROGRAM SERVING BERKS COUNTY

NON-HOMEBOUND PATIENTS WITH CONGESTIVE HEART FAILURE.

NAME OF RECIPIENT - BETHESDA MISSION

TO EXPAND THE DENTAL AND MEDICAL HEALTH NEEDS OF THE MEDICALLY UNDERSERVED, UNDERINSURED AND UNINSURED IN THE CAPITAL REGION.

NAME OF RECIPIENT - CENTRAL OUTREACH RESOURCE AND REFERRAL CENTER

TO ESTABLISH THE COOL PROGRAM: A COMPREHENSIVE INITIATIVE TO INCREASE

HIV/AIDS TESTING IN MINORITY AT RISK POPULATIONS.

NAME OF RECIPIENT - CONGREGATIONS UNITED FOR NEIGHBORHOOD ACTION (CUNA)

TO SUPPORT THE GREATER LEHIGH VALLEY SUPER UTILIZER AND NEIGHBORHOOD

HOT SPOT MODEL TO REDUCE EMERGENCY ROOM USE AND HOSPITAL READMISSIONS
IN THE LEHIGH VALLEY.

NAME OF RECIPIENT - EDUCATING TEENS ABOUT HIV/AIDS

TO SUPPORT LIVE LIFE WITHOUT THE DISEASE SERIES THAT FOCUSES ON

ADOLESCENT HEALTH AND PROMOTES HEALTHY BEHAVIORS ACROSS LIFE STAGES.

NAME OF RECIPIENT - FORBES HEALTH FOUNDATION

TO ESTABLISH REDEFINING VALUE IN CARE: A PATIENT FOCUSED AND PHYSICIAN

110M2M1 100M2M110M 25 107000
Part XV Supplementary Information
3b Grants and Contributions Approved for Future Payment Continuation of Purpose of Grant or Contribution
LED INITIATIVE DESIGNED TO DECREASE VARIATION IN CARE: ELIMINATE WASTE
AND ENHANCE PATIENT SATISFACTION.
NAME OF RECIPIENT - HOLY FAMILY INSTITUTE
TO ESTABLISH THE HEALTHY FOR LIFE PROGRAM FOCUSED ON OVERCOMING
BARRIERS TO HEALTHY EATING FACED BY YOUTH AGES 14-17 AND FAMILIES
IN-COMMUNITY FAMILY STABILIZATION PROGRAM AND YOUTH IN RESIDENTIAL
CARE.
NAME OF RECIPIENT - NORTH SIDE CHRISTIAN HEALTH CENTER
TO FUND THE SALARIES OF MEDICAL AND DENTAL PROFESSIONALS TO SUPPORT THE
INTEGRATION OF ORAL HEALTH AND PRIMARY CARE.
NAME OF RECIPIENT - STRONG WOMEN STRONG GIRLS
TO PILOT STRONG WOMEN STRONG GIRLS GET ACTIVE! PHYSICAL FITNESS AND
NUTRITION CURRICULUM TO ADDRESS OBESITY IN 40-50 AFRICAN AMERICAN GIRLS
IN GRADES 3-5.
NAME OF RECIPIENT - STRONG WOMEN STRONG GIRLS
TO PILOT STRONG WOMEN STRONG GIRLS GET ACTIVE! PHYSICAL FITNESS AND
NUTRITION CURRICULUM TO ADDRESS OBESITY IN 40-50 AFRICAN AMERICAN GIRLS
IN GRADES 3-5.

FORM 990-PF GAIN	OR (LOSS) FR	OM SALE	OF AS	SETS		STA	TEMENT	1
(A) DESCRIPTION OF PROPERTY				NNER JIRED	DA ACQU	TE IRED	DATE S	OLD
14,392 SHARES MONSANTO COMP	ANY		DON	ATED	09/2	9/08	06/27	/12
	(C) ALUE AT E OF ACQ.	(D) EXPENSE SALE	OF	(E)	c.		(F)	S
1,163,088.	907,560.		0.		0.		255,5	28.
(A) DESCRIPTION OF PROPERTY				NNER JIRED	DA ACQU	TE IRED	DATE SO	OLD
250,000 ECOLAB INC SR BOND			PURCI	HASED	08/0	6/12	10/17	/12
	(C) OST OR ER BASIS	(D) EXPENSE SALE	OF	(E)	c.		(F) OR LOSS	S
251,148.	249,883.	-	0.		0.		1,20	65.
CAPITAL GAINS DIVIDENDS FRO	M PART IV							0.
TOTAL TO FORM 990-PF, PART	I, LINE 6A						256,7	93.
FORM 990-PF	LEGA	L FEES				STA	TEMENT	2
	(A) EXPENSES PER BOOKS	NET IN	3) NVEST- INCOME	AD_0	(C) JUSTE INCO		(D) CHARITAI PURPOSI	
DESCRIPTION	I BR BOOKS							c o
DESCRIPTION LEGAL	4,250		0	•			3,1	

DESCRIPTION EXPENSES PER BOOKS MENT INCOME NET INCOME PURP ACCOUNTING 22,135. 0. 21 TO FORM 990-PF, PG 1, LN 16B 22,135. 0. 21 FORM 990-PF TAXES STATEMEN (A) EXPENSES NET INVEST- ADJUSTED (C) EXPENSES NET INVEST- ADJUSTED CHARI PURP EXCISE TAXES 22,844. 0. TO FORM 990-PF, PG 1, LN 18 22,844. 0. TO FORM 990-PF, PG 1, LN 18 22,844. 0. TO FORM 990-PF OTHER EXPENSES PER BOOKS MENT INCOME (B) (C) (D) (C) (D) (C) (D) (C) (D) (C) (D) (C) (D) (C) (D) (C) (D) (C) (D) (C) (D) (C) (D) (D) (C) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D	STATEMENT	NG FEES	ACCOUNTI	FORM 990-PF
TO FORM 990-PF, PG 1, LN 16B 22,135. 0. 21 FORM 990-PF TAXES STATEMEN (A) (B) (C) (D EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME NET INCOME PURP EXCISE TAXES 22,844. 0. TO FORM 990-PF, PG 1, LN 18 22,844. 0. FORM 990-PF OTHER EXPENSES STATEMEN (A) (B) (C) (D EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME NET INCOME PURP OTHER FOUNDATION EXPENSES 5,963. 0. 55 TO FORM 990-PF 5,963. 0. 55	ADJUSTED CHARITABL	NET INVEST-	EXPENSES	DESCRIPTION
FORM 990-PF TAXES STATEMEN (A) (B) (C) (D EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME NET INCOME PURP EXCISE TAXES 22,844. 0. TO FORM 990-PF, PG 1, LN 18 22,844. OTHER EXPENSES OTHER EXPENSES DESCRIPTION (A) (B) (C) (D EXPENSES NET INVEST- ADJUSTED CHARI EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME NET INCOME PURP OTHER FOUNDATION EXPENSES 5,963. 5 5 5 5 6 5 6 6 6 7 7 8 7 8 8 8 8 8 8 8 8 8	21,000	0.	22,135.	ACCOUNTING
TO FORM 990-PF, PG 1, LN 18 CA) (B) EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME NET INCOME PURP 22,844. O. TO FORM 990-PF, PG 1, LN 18 CA) (B) (C) EXPENSES NET INVEST- ADJUSTED OTHER EXPENSES STATEMEN (A) (B) (C) (C) (D) EXPENSES NET INCOME CHARI PER BOOKS MENT INCOME OTHER FOUNDATION EXPENSES ETOOLS FOR SCHOOLS USED IN HIGHMARK HEALTHY HIGH 5	21,000	0.	22,135.	TO FORM 990-PF, PG 1, LN 16B
EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME PURP EXCISE TAXES 22,844. 0. TO FORM 990-PF, PG 1, LN 18 22,844. OTHER EXPENSES (A) (B) (C) (C) (D) EXPENSES NET INVEST- ADJUSTED OF CHARI PURP (A) (B) (C) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARI PURP OTHER FOUNDATION EXPENSES ETOOLS FOR SCHOOLS USED IN HIGHMARK HEALTHY HIGH 5	STATEMENT	3S	TAX	FORM 990-PF
TO FORM 990-PF, PG 1, LN 18 22,844. O. FORM 990-PF OTHER EXPENSES (A) EXPENSES NET INVEST- PER BOOKS MENT INCOME OTHER FOUNDATION EXPENSES ETOOLS FOR SCHOOLS USED IN HIGHMARK HEALTHY HIGH 5	ADJUSTED CHARITABL	NET INVEST-	EXPENSES	DESCRIPTION
FORM 990-PF OTHER EXPENSES (A) EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME OTHER FOUNDATION EXPENSES ETOOLS FOR SCHOOLS USED IN HIGHMARK HEALTHY HIGH 5	0	0.	22,844.	EXCISE TAXES
(A) (B) (C) (D EXPENSES NET INVEST- ADJUSTED CHARI PER BOOKS MENT INCOME NET INCOME PURP OTHER FOUNDATION EXPENSES ETOOLS FOR SCHOOLS USED IN HIGHMARK HEALTHY HIGH 5	0	0.	22,844.	TO FORM 990-PF, PG 1, LN 18 =
DESCRIPTION OTHER FOUNDATION EXPENSES ETOOLS FOR SCHOOLS USED IN HIGHMARK HEALTHY HIGH 5 EXPENSES NET INVEST- NET INCOME NET INCOME NET INCOME OTHER FOUNDATION EXPENSES 5,963. 0. 5	STATEMENT	KPENSES	OTHER E	FORM 990-PF
ETOOLS FOR SCHOOLS USED IN HIGHMARK HEALTHY HIGH 5	ADJUSTED CHARITABL	NET INVEST-	EXPENSES	DESCRIPTION
	5,963	0.	5,963.	ETOOLS FOR SCHOOLS USED IN
	0	0.	1,278,573.	PROGRAM
OTHER HIGHMARK HEALTHY HIGH 5 PROGRAM RELATED EXPENSES 1,101,213. 0. 1,227	1,227,444	0.	1,101,213.	
TO FORM 990-PF, PG 1, LN 23 2,385,749. 0. 1,233	1,233,407	0.	2,385,749.	TO FORM 990-PF, PG 1, LN 23

FORM 990-PF OTHER DECREASES	IN NET ASSE	TS OR F	UND BALANCES	STATEMENT	6
DESCRIPTION				AMOUNT	
CHANGE IN UNREALIZED GAIN ON AV	'AILABLE-FOR	R-SALE I	NVESTMENTS	46,5	88.
TOTAL TO FORM 990-PF, PART III,	LINE 5			46,58	88.
FORM 990-PF U.S. AND STA	TE/CITY GOV	ERNMENT	OBLIGATIONS	STATEMENT	7
DESCRIPTION	U.S. GOV'T	OTHER GOV'T	BOOK VALUE	FAIR MARKE	r
FNMA FNMA FNMA FNMA FNMA FEDERAL HOME LOAN BANK FEDERAL HOME LOAN BANK FEDERAL HOME LOAN BANK FEDERAL FARM CREDIT BANK FEDERAL FARM CREDIT BANK FEDERAL HOME LOAN BANK FEDERAL HOME LOAN BANK FNMA FNMA FNMA FNMA PRIOR YEAR U.S. OBLIGATIONS FEDERAL HOME LOAN BANK TOTAL U.S. GOVERNMENT OBLIGATION TOTAL STATE AND MUNICIPAL GOVER TOTAL TO FORM 990-PF, PART II,	NMENT OBLIG	FATIONS	755,573. 766,920. 251,758. 260,620. 301,329. 1,000,200. 1,000,070. 1,500,045. 546,650. 504,225. 251,373. 1,000,150. 1,004,390. 0. 1,000,340. 11,143,943.	755,573. 766,920. 251,758. 260,620. 301,329. 1,000,200. 1,000,070. 1,500,045. 546,650. 504,225. 251,373. 1,000,150. 1,004,390. 0. 1,000,340.	
FORM 990-PF	CORPORATE	STOCK		STATEMENT	8
DESCRIPTION			BOOK VALUE	FAIR MARKE	т
PRIOR YEAR COMMON STOCK			0.		0.
TOTAL TO FORM 990-PF, PART II, LINE 10B		0. 0			

FORM 990-PF CORPORATE	BONDS	STATEMENT 9
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
BECTON DICKINSON	505,750.	505,750.
DISNEY WALT CO.	259,708.	259,708.
GENERAL ELECTRIC CAP CORP.	250,318.	250,318.
MEDTRONIC INC.	262,692.	262,692.
HEWLETT PACKARD CO.	499,995.	499,995.
USAA CAPITAL CORP.	251,118.	251,118.
COLGATE-PALMOLIVE CO.	534,195.	534,195.
AMERICAN HONDA FINANCE	754,230.	754,230.
ANHEUSER-BUSH INBEV	502,310.	502,310.
BERKSHIRE HATHAWAY	500,895.	500,895.
GENERAL ELECTRIC CO.	250,880.	250,880.
ILLINOIS TOOL WORKS	211,390.	211,390.
MERRILL LYNCH & CO.	520,325.	520,325.
PNC FUNDING GROUP	775,170.	775,170.
SIMON PROPERTY GROUP	259,313.	259,313.
3M COMPANY	153,837.	153,837.
TOYOTA MOTOR CREDIT CORP	251,778.	251,778.
UNITED HEALTH GROUP	250,818.	250,818.
BANK OF MONTREAL	262,060.	262,060.
VOLKSWAGEN INTL FIN	262,283.	262,283.
PRIOR YEAR CORPORATE BONDS	0.	0.
TOTAL TO FORM 990-PF, PART II, LINE 10C	7,519,065.	7,519,065.

	T OF OFFICERS, D FOUNDATION MANA		STATI	EMENT 10
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
C. MICHAEL BLACKWOOD 120 FIFTH AVENUE, FIFTH AVENUE PLACE	DIRECTOR 1.00	0.	0.	0.
JANINE K. COLINEAR	DIRECTOR/TREAS	URER		
120 FIFTH AVENUE, FIFTH AVENUE PLACE PITTSBURGH, PA 15222	1.00	0.	0.	0.
THOMAS J. ROHNER, JR. M.D. 120 FIFTH AVENUE, FIFTH AVENUE				
PLACE PITTSBURGH, PA 15222	1.00	-	0.	0.
DANIEL A. ONORATO 120 FIFTH AVENUE, FIFTH AVENUE PLACE PITTSBURGH, PA 15222	DIRECTOR/CHAIR	PERSON 0.	0.	0.
DORIS CARSON WILLIAMS 120 FIFTH AVENUE, FIFTH AVENUE	DIRECTOR/VICE	CHAIRPERSON		
PLACE PITTSBURGH, PA 15222	1.00	0.	0.	0.
YVONNE C. COOK 120 FIFTH AVENUE, FIFTH AVENUE	PRESIDENT			
PLACE PITTSBURGH, PA 15222	40.00	0.	0.	0.
EDWARD A. BITTNER, JR. 120 FIFTH AVENUE, FIFTH AVENUE	SECRETARY			
PLACE PITTSBURGH, PA 15222	1.00	0.	0.	0.
DAVID P. GAERTNER 120 FIFTH AVENUE, FIFTH AVENUE	ASSISTANT SECR	ETARY		
PLACE PITTSBURGH, PA 15222	1.00	0.	0.	0.
EVAN S. FRAZIER 120 FIFTH AVENUE, FIFTH AVENUE	DIRECTOR			
PLACE PITTSBURGH, PA 15222	1.00	0.	0.	0.

HIGHMARK FOUNDATION			25	5-1876666
JUDY SJOSTEDT 120 FIFTH AVENUE, FIFTH AVENUE PLACE PITTSBURGH, PA 15222	DIRECTOR	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.

FORM 990-PF

CASH DEEMED CHARITABLE EXPLANATION STATEMENT PART X, LINE 4

STATEMENT

11

HIGHMARK FOUNDATION IS A TAX-EXEMPT PRIVATE FOUNDATION REPORTING ON A CALENDAR-YEAR BASIS. HIGHMARK FOUNDATION WAS FORMED TO PROMOTE LIFELONG, HEALTHY BEHAVIORS IN CHILDREN AND ADOLESCENTS AGES 6-18 TO ENSURE THAT THEY HAVE HEALTHY BODIES AND MINDS. HIGHMARK FOUNDATION CONTRIBUTES \$17.2 MILLION EACH YEAR TO SUPPORT THESE CAUSES. ON AVERAGE, THIS REPRESENTS APPROXIMATELY 60% OF THEIR ASSET BALANCE. AS SUCH, HIGHMARK FOUNDATION NEEDS TO HAVE A LARGE AMOUNT OF CASH ON HAND ON A MONTHLY BASIS. WHEN COMPLETING PART X, LINE 4 OF ITS FORM 990PF, HIGHMARK FOUNDATION CALULATED ITS CASH DEEMED HELD FOR CHARITABLE ACTIVITIES AS \$480,628, WHICH REPRESENTS THE AVERAGE AMOUNT OF CONTRIBUTIONS MADE EACH MONTH.

Part IX-A - Summary of Direct Charitable Activities

Since its inception in 2000, the Highmark Foundation has made a lasting impact in the communities Highmark served by taking the steps necessary to improve the overall health and well-being of its residents. Throughout 2012, the Foundation continued to stand behind its mission by awarding a series of grants, sponsorships and educational support, totaling more than \$5.3 million, and since 2000 awarding over \$100 million to charitable organizations and hospitals across Pennsylvania

Highmark Foundation approaches grant making proactively, engaging the health care community and utilizing research to identify areas of need in which Foundation funding will make a profound difference. The foundation has also created urgency around many public health issues facing the region. It is achieving its mission by funding strategic and evidence-based health care initiatives that educate, protect and ultimately improve the overall well-being of the large population it serves.

A major portion of the Foundation's history is its unparalleled dedication to improving children's health throughout the region. The Foundation was a catalyst in addressing the childhood obesity epidemic facing our region and, ultimately, our nation. In 2006, the Foundation introduced Highmark Healthy High 5, a children's health promotion initiative that supported lifelong good health for children and adolescents ages 6-18. Two major focus areas from that initiative – bullying prevention and childhood obesity – still remain an integral part of the Foundation's work.

The Foundation also funds innovative health care programs for diverse populations. Whether the population is located in an urban, suburban or rural area, it supports programs that reach vulnerable or at-risk individuals such as the elderly, the poor, individuals with special needs and minority populations. These programs have included pilot projects, model programs, expansion plans and well-established initiatives.

Currently, the Highmark Foundation has four key funding categories in place for its grant making efforts

- Chronic Disease
- Family Health
- Healthy Communities
- · Service Delivery Systems

Finally, the Foundation has a three-pronged approach to its work.

- Public Health
- Systems Change
- · Thought Leadership

Below is a list of the Foundation's largest direct charitable activities.

- Innerlink Inc., in partnership with the Highmark Foundation developed "Health eTools for Schools" a web-based portal that supports policy change within Pennsylvania schools and provides a secure method to calculate, track and report student body mass index (BMI) in a format required by the PA Department of Health Health eTools for Schools also provides standards-based nutrition and physical activities introduced during core academic instructional time \$1,278,573
- Windber Research Institute to continue analysis of the evaluation outcomes and reporting of data related to bullying Prevention efforts in Pennsylvania \$ 598,000
- 3. Center for Schools and Communities to strengthen and promote sustainability of bullying prevention efforts in Pennsylvania \$ 591,000
- 4. North Side Christian Health Center to fund the salaries of medical and dental professionals to support the integration of oral health and primary care. \$ 250,000

Senior Program Officer 120 Fifth Avenue

Pittsburgh, PA 15222 412-544-3243

FAP 1733

Part XV Line 2a

For application submission, contact the representative in your area.

Area served	Contact
Western Pennsylvania	Christina L. Wilds, DrPH Senior Program Officer 120 Fifth Avenue FAP 1733 Pittsburgh, PA 15222 412-544-3243
Central Pennsylvania	Rosemary Browne Program Officer 1800 Center Street CTRST 1B L4 Camp Hill, PA 17089 717-302-7803
West Virginia	Christina L. Wilds, DrPH

Part XV Line 2b

Proposal Process

The Foundation awards programmatic grants in the area of health to non-profit organizations and hospitals. The Foundation defines health broadly to include social, behavioral and other dimensions beyond illness or disease. The grant making process is performed primarily through invited proposals or requests for proposals. The Foundation awards grants in two ways.

- 1 Invited Proposals are target specific audiences and activities identified by the Foundation Unlike request for proposals (RFPs), these proposals involve the participation of a specific entity and may represent a longer-term commitment from both the grant recipient and the Foundation All phases of the project must be acceptable to the Foundation prior to funding, including estimated costs, timelines and expected results
- 2 Request for Proposals will be issued periodically related to specific health topics. Organizations with demonstrated capacity or evidence of strong potential to mount successful projects with respect to the target health topics will be invited to submit a proposal in response to the RFP. A limited number of grants will be awarded based upon a competitive analysis of the proposals submitted. Grants will be awarded to the applicants deemed to be the most responsive to the RFP requirements.

Proposal Guidelines

To respond to an invited proposal, the following information is required

- 1 Organizational overview (history, mission and contact information)
- 2 A brief statement of the problem
- A description of the proposed project, including why it is important, its objectives, the target population(s), qualifications of staff, the impact on the community, project start and completion date and a timeline
- 4 A statement of how the project fits into other work being done in the community, region and/or field
- 5 A description of what constitutes success and how the organization plans to measure it
- 6 A description of how the program outcomes will be communicated to relevant audiences
- 7 The requested amount of funding, an itemized budget of the overall project and an indication of other prospective funding sources
- 8 General information, including contact person and telephone number
- 9 A statement declaring that the organization is a public charity as described in sections 501(C)(3) and 509(a)(1),(2) or (3) of the Internal Revenue Code of 1986

Upon receipt and review of the letter of inquiry, the Highmark Foundation will notify the applicant of the status of the request. If it is determined that the request is applicable and/or meets the criteria, the second step is the invitation to submit a formal grant application/proposal.

Part XV Line 2d

The Highmark Foundation also makes multi-year grants to non-profit agencies and organizations in western and central PA; and West Virginia communities served by Highmark Inc. defined as tax exempt under section 501(c)(3) and as public charities under section 509 (a). The Highmark Foundation has focused its attention on a variety of health issues including but not limited to dental/oral health care, health disparities, nursing shortage, and health literacy. In 2012, the Highmark Foundation awarded approximately \$3,153,000 to 27 non-profit organizations for traditional grants. Traditional grants are awarded in four priority areas listed below along with examples of grant funded programs.

A Chronic Disease - Grants funded programs

- Berks Visiting Nurse Assoc. to expand a Chronic Care management Program for non-homebound patients with congestive heart failure
- The Children's Institute sponsorship to support Fragrance Free, an educational program with an emphasis on fragrances in the workplace
- Community Health Clinic of Butler County to provide continued support
 of a multifaceted diabetes management program that provides high-quality
 education, medical and dental services to uninsured diabetics in Butler
 County

B. Family Health - Grants funded programs

- Butler Memorial Hospital to support the Maternal Services Program.
- Holy Family Foundation to establish the Healthy for Life Program focused on overcoming barriers to healthy eating faced by youth ages 14-17 and their families.
- C Healthy Communities As the newest area of focus, the Foundation is currently working collaboratively with hospitals in the state's rural and needlest communities to support the outcomes from their Community Needs Assessment. In 2013, the Foundation will launch a Request for Proposals, "Addressing Community Health Needs through Hospital Partnerships. The goal is to provide grant funding and resources to encourage joint collaboration, develop interventions and evidence-based approaches to improve quality of care, improve the health of underserved populations and reduce costs.

D Service Delivery Systems - Grant funded programs.

- Congregations United for Neighborhood Action to support the Super Utilizer and Neighborhood Hot Spot model to reduce emergency room use and hospital readmissions
- YMCA of Greater Pittsburgh to pilot a childhood obesity prevention program, Healthy Family Home Training Camp serving 72 families in underserved communities
- Forbes Health Foundation to establish Redefining Value in Care. A
 patient focused and physician led initiative designed to decrease variation
 in care, eliminate waste and enhance patient satisfaction

Part XV Line 2d (Continue)

The Foundation also considers numerous factors in deciding whether to fund a specific proposal, including but not limited to the following criteria

- Consistent with the Foundation's goals, strategies and focus.
- Creates models with potential application throughout the Foundation's footprint.
- Demonstrates new and sustainable ways to solve health problems
- Reduces long-term cost or duplication of services and resources.
- Incorporates sound methods of evaluation for long-term program success.
- Improves and assures access to quality health care for underserved populations in urban and rural areas
- Illustrates the effectiveness of early intervention and prevention health programs
- Seeks creative ways to leverage the Foundation's limited dollars.