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.

Ď	epartm	nent of the Treasury	1								s it may be m			(•		LU	1 /	
_		Revenue Service	<u> </u>						for ins		the latest int			0010		pen to Publi	c Inspection	on
_		lendar year 2017	or tax yea	r beginning		<u>JUL</u>	<u> </u>	2017		, and	ending	JUN 3		2018				
ľ	vame	of foundation							,			A Employe	ria	entification	n num	ber		
	~ n	DDTNINT II	toat mi		ת גרוז	TON						21	17	16150	.			
_		RDINAL H					addraee)			-	Room/suite	B Telephor		46458)			_
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-		r town, state or pr			7ID or for	COLOR O	octal co											\neg
		BLIN, OH		017	ZIF UI 101	eigii þ	USIAI CU	iue				C If exemption	on ap	plication is p	enaing	, cneck nere	,	_
		eck all that apply:	<u> </u>	Initial retu	rn			Initial reti	ırn of a f	ormer public	charity	D 1. Foreia	n or	กลกเรลทดก	s cher	ek bere	▶□	\neg
Ī	Q.,,	on an that apply.		Final retur				Amended		ormor pasmo	u	1		gumzanom	0, 0		_	_
			7	Address c				Name cha				2. Foreign	orga	inizations me and attach co	eeting ti	ne 85% test lion	· ▶□	\neg
Н	Che	eck type of organiz	ation:	X Section)(3) ex	empt pi				$\theta \psi$	ī		ndation sta				
	_	Section 4947(a)(1				·		xable priva		ation	<u> </u>			1 507(b)(1				
1	Fair i	market value of all	assets at	end of year	J Ac	countir	ng meth	nod.	Cash	X Acc	rual	F If the fou	ndat	tion is in a	60-mc	onth termi	nation	
-	(fron	n Part II, col. (c), l	ine 16)			Oti	her (spe	ecify)						1 507(b)(1				
/_	▶\$			1,835		, colum	ın (d) m	oust be on o	cash bas	ıs.)		ļ						
L	art	Analysis of R	evenue an	nd Expense:	S and (d) may	v not) Revenue a			nvestment	(c) Ad				(d) Disburs r charitable j		
_		necessarily equi	al the amoun	nts in column	(a))			enses per l			come		com	e	1 2	(cash basis	s only)	_
	1	1 Contributions,	-					<u>,843,</u>		Tanggan	<u> </u>	. N	<u>/ A</u>		1		r & 254	<u>. </u>
	1 7	2 Check X			to attach Sc	h 8	<u> </u>		er. 4 =	P. 1 mark		•		'o : si	1	₄ មិត <i>ព្</i>	4.50	<u>. </u>
	3	- odsii irivesiillellis						0.2.2	1 2 1	0.7	12 121				Gm ²	make	t historia	125
	- 1	4 Dividends and	interest fro	om securitie	es	J		833,	131.	8.3	33,131.				517	ATEME	NT'51	
	;	5a Gross rents					ndeli ji	14 (F) TE(10	, ,	-		ļ	1					
	, ا	D Net rental income				-	1	, 254,		, 4 >		 	١.	<u> </u>)E	IVEE) , 	
	, اَقَ	6a Net gain or (loss) h Gross sales price			5,98	8 . l	45 1	, <u>434 j</u>	<u> </u>	-		 	-			ç	निश्ल	.
	Kevenue	assets on line 6a Capital gain net in	 ncome (from			<u>.</u>	, , ,	3.	8,	1.25	4,045.		छ्ल	NOV	21	0 2018		<u>'رونا</u> 'رونا ع
	۽ ع				,		7	•.			<u> </u>						121	
5	9					ſ	,*	~ ** ,	,	-				OGI	7=1	117		11
2019	10)a Gross sales less i and allowances	returns				z * *						-		-	re De la		ે)
~		b Less Cost of goo	ds sold						-								-	-;
0		c Gross profit or	(loss)			ļ									ļ			;
FEB	11	1 Other income				ļ									ļ			, 1
<u> </u>	12	2 Total Add line	s 1 throug	<u>ıh 11</u>			8_	,931,		2,08	<u> </u>			···-	<u> </u>			1
	13		· ·		es, etc	ļ		-	0.		0.	ļ			ļ		0	<u>.</u>
回	14											<u> </u>			_			
Ź	2 15	-	employee		D3.460	<u>,</u>		г -	200			<u> </u>			-			. —
4	2 16	Ba Legal fees	_		TMT TMT				280. 400.		0.	 	-) <u>.</u>
S	120	b Accounting feec Other profession			MT ·			736			0.	 			 	639	,604	
- 1	비 왕 17	•	mai iees		LITI	*		_130,	<u> </u>				-		 		100-	•
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	20	-				ľ	-											
7	21		nces, and	meetings		Ì										_		_
3	22	•		-		[_
NADS	23				TMT	6 [140,	588.	9	3,846.					44	<u>,674</u>	· •
į	24	Total operating	g and adm	inistrative														
į	3	expenses Add		_		ļ		943,0	084.	9	3,846.					684	<u>, 278</u>	•
	25	Contributions,				-	<u> </u>	,277,	/39.						<u> 9</u>	,277	<u>,739</u>	•
	26	Total expenses		ursements		1	4.0	000		_	2 040	1		1	۱ ^		^ - -	,
_	+	Add lines 24 an				-	10	,220,8	343.	9	3,846.				 9	<u>,962</u>	<u>, u17</u>	•
	27						<u>.</u> 1	, 289°,	761						[1
		a Excess of revenue b Net investment				·	<u>-1</u>	403,	, _U <u> </u>	1 99	3,330.				 -			<u>i</u>
		C Adjusted net in				-					-,	N/	'A					_
_																		_

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions

_			
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
	(must agree with end-of-year figure reported on prior year's return)	1	43,119,705.
2	Enter amount from Part I, line 27a	2	-1,289,761.
3	Other increases not included in line 2 (itemize) MARK TO MARKET 'ADJUSTMENT	3_	421,083.
4	Add lines 1, 2, and 3	4	42,251,027.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	42,251,027.
_	· · · · · · · · · · · · · · · · · · ·		

Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired P - Purchase D - Donation (c) Date acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold 2-story brick warehouse; or common stock, 200 shs. MLC Co. (mo, day, yr.) (mo., day, yr.) 1a VANGUARD INTL STOCK IX INST P VARIOUS 10/05/17 INTL STOCK IX P b VANGUARD INST VARIOUS 02/27/18 c VANGUARD INFLATION PROTECT SEC P 06/06/18 VARIOUS d VANGUARD INTL STOCK IX INST P VARIOUS 06/06/18 e VANGUARD TOTAL BOND MKT INDEX P VARIOUS 06/06/18 P f LOOMIS VARIOUS 10/05/17 g BLACKROCK GLOBAL ALL ASSET P VARIOUS 10/05/17 h BLACKROCK TOTAL P VARIOUS 10/05/17 P 10/09/17 I PIMCO GLOBAL VARIOUS p | STATE STREET GLOBAL ADVISORS VARIOUS 10/09/17 P k BLACKROCK TOTAL VARIOUS 02/27/18 P 03/19/18 | LOOMIS VARIOUS m BLACKROCK GLOBAL ALL ASSET P VARIOUS 03/19/18 P n PIMCO GLOBAL VARIOUS 03/19/18 o LOOMIS P WARIOUS 06/06/18 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price (e) plus (f) minus (g) (or allowable) plus expense of sale 700,000. 603,241 96,759. a 700,000. 576,310. 123,690. b 99,446 554. 100,000. С 333,533. 66,467. d 400,000. 306,694. 300,000. -6,694.е 200,000. 140,126. 59,874. f 142,189. 7,811. 150,000. g 30,458. 269,542 300,000. h 149,289 711. 150,000. 146,730. 3,270. 150,000. 679,995 800,000. 120,005. ١ 870,000. 610,141 259,859. 160,000. 155,127 4,873. m 150,000. 149,082. 918. n 563,787. 800,000. 236,213. 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col (h)) Gains (excess of col (h) gain over col. (k), (j) Adjusted basis (k) Excess of col. (1) (i) F.M.V. as of 12/31/69 but not less than "-0-") as of 12/31/69 over col. (j), if any 96,759. a 123,690. b 554. С 66,467. d -6,694. е 59,874. 7,811. g 30,458. h 711. 3,270. 120,005. k 259,859**.** 4,873. m 918. n 236,213. 0 If gain, also enter in Part I, line 7 2 Capital gain net income or (net capital loss) If (loss), enter "-0-" in Part I, line 7 2 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c)

If (loss), enter "-0-" in Part I, line 8

CARDINAL HEALTH	TOUNDATION	31-17	46458	PAGE .	Z OF Z
Part IV Capital Gains and Los	sses for Tax on Investment Income	·			
	describe the kind(s) of property so ick warehouse, or common stock, 2		(b) How acquir P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a BLACKROCK TOTAL	<u> </u>		P	VARIOUS	06/06/18
b PIMCO GLOBAL			P	VARIOUS	06/06/18
c BLACKROCK GLOBA	AL ALL ASSET		P	VARIOUS	06/06/18
d STATE STREET GI	LOBAL ADVISORS		P	VARIOUS	06/08/18
e PIMCO TOTAL RET	rurn		P	VARIOUS	06/06/18
f PIMCO TOTAL RET	<u>rurn</u>		P	VARIOUS	03/19/18
g PIMCO TOTAL RET	· · · · · · · · · · · · · · · · · · ·		P	VARIOUS	10/09/17
h CAPITAL GAINS I	DIVIDENDS				
<u></u>				 	<u> </u>
<u>k</u>			<u> </u>	<u> </u>	
1					ļ
<u>m</u>					ļ
<u>n</u>					
0			<u> </u>	(1) (2) (1) (1)	<u> </u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (loss)) plus (f) minus (g)	
a 600,000.		499,611.			100,389.
b 200,000.		199,604.			396.
c 200,000.		194,202.			<u>5,798.</u>
d 200,000.		186,455.			<u> 13,545.</u>
e 100,000.		106,450.			<u>-6,450.</u>
f 870,000.		916,330.			-46,330.
g 150,000.		154,059.			<u>-4,059.</u>
h 185,988.			·	·	185,988.
1					_
<u>k</u> 	·				
m				*	· · · · · · · · · · · · · · · · · · ·
n				· · · ·	
0					
	gain in column (h) and owned by	the foundation on 12/31/69	(I) L	osses (from col. (h)	
(i) F.M.V. as of 12/31/69	(ı) Adjusted basıs as of 12/31/69	(k) Excess of col (i) over col. (j), if any	Gains (exces	s of col. (h) gain ove t not less than "-0-")	
a					100,389.
b					396.
С					5,798.
d					13,545.
e				·	-6,450.
f				·	-46,330.
9					<u>-4,059.</u>
h					185,988.
1					
1			·		
<u>k</u>			·		
	<u></u>	<u>-</u>			_
<u>m</u>					_
n			 		
0				 	
2 Capital gain net income or (net capi	ital loss) { If gain, also enter If (loss), enter *-0	in Part I, line 7 -" in Part I, line 7	2	1,	254,045.
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, co		d (6):			
If (loss), enter "-0-" in Part I, line 8		J	3	N/A	

6,710,697.

9,962,017.

Form 990-PF (2017)

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.

	λ					
orn	m 990-PF (2017) CARDINAL HEALTH FOUNDATION		31-	17464	58	Page 4
	art;VI; Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 494	40(e), or 4				
	a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.)	535	ر بازید بازی در در اور بازید را	121214335	· Maria
	Date of ruling or determination letter: (attach copy of letter if necessary-see instruction	s)				
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗶 and enter 1%	· }	1		19,9	33.
	of Part I, line 27b		1000		ME 1087	6.6.C
C	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. ((b)	建			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	, ,	- 2			0.
	Add lines 1 and 2		3		19,9	33.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4			0.
	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		5		19,9	33.
			艦襲	PLANT.	细数是	
a	a 2017 estimated tax payments and 2016 overpayment credited to 2017 6a 2	4,575.	133			
b	Exempt foreign organizations - tax withheld at source 6b	0.				
C	Tax paid with application for extension of time to file (Form 8868)	0.	W.			1.0
d	d Backup withholding erroneously withheld 6d 6d	0.		13		137
7	Total credits and payments. Add lines 6a through 6d		7		24,5	75.
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached		8			0.
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	>	9			
0	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	\blacktriangleright_{i}	10		4,6	42.
1_	Enter the amount of line 10 to be: Credited to 2018 estimated tax	efunded ►	11			0.
<u>Pa</u>	art VII-A Statements Regarding Activities					
1a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participat	e or intervene	1U	16	건데 Yes	+
	any political campaign?				1a	<u>X</u> _
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instruction		ition		1b	X_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	ed or		1		
	distributed by the foundation in connection with the activities.			هناإ	[2] JE	3000
	Did the foundation file Form 1120-POL for this year?			<u> </u>	1c	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	_		i,		设数
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	<u> </u>			्रिष्ट.	3.33
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on fou	indation			****	1
_	managers. ► \$0.					
	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				بالادر " ، " مالا الأخوا " با	13
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of in	corporation, o	ır		-=	المخاصف
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			<u> </u>	3	X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		3.7		4a	X
	olf "Yes," has it filed a tax return on Form 990-T for this year?		. N		4b	7
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				اريس 5	X
	If "Yes," attach the statement required by General Instruction T			<u> [</u>	. '2	27
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					F5
	By language in the governing instrument, or Product level to a that of feet who amond the appropriate and the production of the conflict. Product level to a that a mondatory discourse that conflict in the conflict i		Jau-	آهٰ	3 30-32	1.0
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict	with the state	ıaw			
	remain in the governing instrument?			ı	6	X

Form **990-PF** (2017)

SEE STATEMENT 9

OH

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

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)

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

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

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

year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV

of each state as required by General Instruction G? If "No," attach explanation

∖Paı	t VII-A Statements Regarding Activities (continued)			
			Yes	.No
11	t any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	ection 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
12	id the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileg	jes?		İ
	"Yes," attach statement. See instructions	12		X
13	id the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	_X_	L
	/ebsite address ► WWW.CARDINALHEALTH.COM/COMMUNITY			
	he books are in care of ► BETSY WALKER Telephone no. ► 6.3			
		4 ► <u>43017</u>		
	ection 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	1 37	. / 3 🏲	ــــا
	nd enter the amount of tax-exempt interest received or accrued during the year	N	/A	NIO
	t any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,		Yes	-
	ecurities, or other financial account in a foreign country?	16	i i i i i i i i i i i i i i i i i i i	X cms/
	ee the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	2 26 34 2 26 34	201	
	reign country ► VII-B Statements Regarding Activities for Which Form 4720 May Be Required	[, (M)Q/A	esc ereci	Mis Co
	tle Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	18 10	Yes	No
1a	uring the year, did the foundation (either directly or indirectly):	HH	attack.	1
() Engage in the sale or exchange, or leasing of property with a disqualified person?	☑ No 🔯		
(Borrow money from, lend money to, or otherwise extend credit to (or accept it from)		Sign	黎
	a disqualified person?			
(r) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			2.5
(Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	UNO NO		
(Transfer any income or assets to a disqualified person (or make any of either available			43
	for the benefit or use of a disqualified person)?	U No 凝裂		P.II
(i) Agree to pay money or property to a government official? (Exception. Check "No"			12.4
	if the foundation agreed to make a grant to or to employ the official for a period after		10 1	, , ,
•	termination of government service, if terminating within 90 days.)	LI No	FF (R.	9 () E
	any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1.20	
		V/A 1b		
	rganizations relying on a current notice regarding disaster assistance, check here		0 2	
	d the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	Ferry	المنت	X
	efore the first day of the tax year beginning in 2017? exes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation.	IC Longia	2442	<u> </u>
	sizes on railine to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation section 4942(1)(3) or 4942(1)(5)):	1		, 72 - 4 - 4
	the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	3.73	1 (g)	> (š
	efore 2017?	Z No SEE	1	32
	"Yes," list the years ▶ , , ,			्रमुह इ.स.
	re there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		4 30	الحر الح
	iluation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach		*	a de
		J/A 2b		
c I	the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	20	7,00	υ,
)			为连	7
3a [d the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		2.0	, da
C	rring the year?	No Barri		ا الأي
bΙ	"Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after		ج ہ	و عبا
	ay 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose	(25.26)	,s	
C	holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,	[S. P.]	ــــــــــــــــــــــــــــــــــــــ	,
		I/A <u>3b</u>		
	d the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u> X</u>
	d the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	100 36 T	أهطنت	ئين
h	d not been removed from jeopardy before the first day of the tax year beginning in 2017?	, <u>4b</u>		<u>X</u>

Form 990-PF (2017) CARDINAL HEALTH FOUNDATI Part VII-B Statements Regarding Activities for Which I	ON Form 4720 May Be I	Required (control	31-1746	458	F	age 6
• 5a During the year, did the foundation pay or incur any amount to:	FOITH 4720 Way De I	nequired (contin	uea)		es	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section(2) Influence the outcome of any specific public election (see section 4955);	,	ectly,	es X No	· · · · · · · · · · · · · · · · · · ·	, i	
any voter registration drive?	Y ₁	es X No		. ·	, ; (
(3) Provide a grant to an individual for travel, study, or other similar purposes(4) Provide a grant to an organization other than a charitable, etc., organization	۱۱ بها	es L No	*		,	
4945(d)(4)(A)? See instructions	ir described iii section		es X No		•	1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or				i	į
the prevention of cruelty to children or animals?			es 🗓 No	• -		į
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				
section 53.4945 or in a current notice regarding disaster assistance? See instr	uctions			5b		X
Organizations relying on a current notice regarding disaster assistance, check l						(
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for				-	İ	ļ
expenditure responsibility for the grant?	Ŋ	I/A	es L No	.		i
If "Yes," attach the statement required by Regulations section 53.4945-5(d)				-		;
6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?	pay premiums on		es X No	İ		ı
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?	(is Lat No	6b	1	$\tilde{\mathbf{x}}^{J}$
If "Yes" to 6b, file Form 8870.	or sonar sonom contract		Ì		_	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Y6	es 🗓 No			
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b		
Part VIII: Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highl	/ 			
1 List all officers, directors, trustees, and foundation managers and t		I () Composation	(d) Contributions to	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 plan and deferred compensation	acci	Expe	other ces
SEE STATEMENT 10		0.	0	•		0.
				+		
				ļ		
						
				+		
						
				_		
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	/ N-			
(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) acco all	Expe ount, o owan	nse other ces
NONE				1		
	··· -			<u> </u>		
		 - 		+		
				+		
				1		
		 		+		
Total number of other employees paid over \$50,000		·				0

Form **990-PF** (2017)

Form 990-PF (2017) CARDINAL HEALTH FOUNDATION		746458 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundar Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
]	•
	<u> </u>	· · · · · · · · · · · · · · · · · · ·
	 	
	-	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part X=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 produced.	cal information such as the	Expenses
4 17/2		
1 N/A		
/		_
2		
3		
4		
4		
Part X:B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on li	nes 1 and 2.	Amount
1 <u>N/A</u>		
2		
<u> </u>		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	•	0.
		

٤,

F	art X in Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndation	ns, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		
а		1a	42,442,344.
b		1b	1,528,174.
C		1c	
d	Total (add lines 1a, b, and c)	1d	43,970,518.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	43,970,518.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	659,558.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	43,310,960.
<u>6</u>	Minimum investment return Enter 5% of line 5	6	2,165,548.
į P	art: XI' Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations, check here and do not complete this part.)	d certai	n
1	Minimum investment return from Part X, line 6	1	2,165,548.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)	,	
C	Add lines 2a and 2b	2c	19,933.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2,145,615.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2,145,615.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7_</u>	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	2,145,615.
P	art:XII; Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	San Sair	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	9,962,017.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	E. S.	
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; and Part XIII, line 4	4	9,962,017.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b	5	19,933.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	9,942,084.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	ualifies	for the section

Form **990-PF** (2017)

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7	r t			2,145,615
2 Undistributed income, if any, as of the end of 2017 a Enter amount for 2016 only			0.	
b Total for prior years:		0.	3	•
Excess distributions carryover, if any, to 2017: a From 2012 5, 628, 564.	•	37		
b From 2013 5,441,904. c From 2014 5,618,087.		t	·. 	s -
d From 2015 5,976,214. e From 2016 5,352,906.	- 00 017 675			
f Total of lines 3a through e 4 Qualifying distributions for 2017 from	28,017,675.			
Part XII, line 4: ►\$ 9,962,017. a Applied to 2016, but not more than line 2a	* , ,		0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.	·		2,145,615.
d Applied to 2017 distributable amount e Remaining amount distributed out of corpus	7,816,402.			2,145,615.
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))			4 2 4 4 5 4 5 4 5 4 5 4 5 4 5 4 5 4 5 6 6 6 6	0.
6 Enter the net total of each column as indicated below:	35,834,077.			•
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b	33,034,077.	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 2016. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2018		,		_ 0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions) 8 Excess distributions carryover from 2012	0.			<u>-</u>
not applied on line 5 or line 7 Excess distributions carryover to 2018 Subtract lines 7 and 8 from line 6a	5,628,564. 30,205,513.	,		
0 Analysis of line 9: a Excess from 2013 b Excess from 2014 c Excess from 2015 d Excess from 2016 e Excess from 2017 0 Analysis of line 9: 5,441,904. 5,618,087. 5,976,214. 5,352,906. 7,816,402.				

	L HEALTH FO			31-174	<u> 16458 Page 1</u>
Part XIV Private Operating F	oundations (see ins	structions and Part V	II-A, question 9)	N/A,	
1 a If the foundation has received a ruling of	or determination letter that	t it is a private operating			
foundation, and the ruling is effective fo	or 2017, enter the date of t	the ruling	>	·	
b Check box to indicate whether the foun	dation is a private operatir	ng foundation described	I in section	4942(j)(3) or 494	2(J)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
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				1	
•				 	
d Amounts included in line 2c not	1				
used directly for active conduct of					
exempt activities	<u> </u>		 	 	
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c			<i>f</i>	ļ	
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	İ				
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		/	<u> </u>		
c "Support" alternative test - enter:					
(1) Total support other than gross	/				
investment income (interest, dividends, rents, payments on	/				
securities loans (section				1	
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)	/				<u>_</u>
(3) Largest amount of support from	7			, "	
an exempt organization	1 /				
(4) Gross investment income					
Part XV Supplementary Info	rmation (Complet	te this part only	if the foundation	had \$5,000 or mor	e in assets
at any time during t	he year-see instr	uctions.)			
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh	o have contributed more t	than 2% of the total con	tributions received by the	foundation before the close	of any tax
year (but only if they have contributed n	nore than \$5,000). (See se	ection 507(d)(2).)			
NONE					
b List any managers of the foundation wh	o own 10% or more of the	e stock of a corporation	(or an equally large portion	on of the ownership of a part	inership or
other entity) of which the foundation has				• •	·
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., P	rograms:		
Check here if the foundation o			-	ot accept unsolicited reques	ts for funds. If
the foundation makes gifts, grants, etc,					
a The name, address, and telephone num	per or email address of the	e person to whom appli	cations should be address	sed:	
SEE STATEMENT 11					
b The form in which applications should b	e submitted and informati	ion and materials they s	hould include		
c Any submission deadlines:					
d Any restrictions or limitations on awards	S. Such as by geographical	Lareas, charitable fields	kinds of institutions, or o	ther factors:	
2 restrictions of miniations on awards	, ccon ac of goograpmou	. 2. 500, 5.12.112515 119105	, 22 2		

Form 990-PF (2017) CARDINAL HEALTH FOUNDATION

[Part XV | Supplementary Information (continued)

T git XV Supplementary informatio	T (CONTINUED)		_	
3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year				,
SEE ATTACHED LISTING	NONE		,	
				9,277,739,
·				
	,			
				1
			•	
•				
			-	
			.,	
•				
<u>.</u>	/	1		
Total			▶ 3a	9,277,739.
b Approved for future payment		,		
NONE			ν.	
NONE				
			•	
				
			•	
			1	
			<u></u>	
′ •		,		
r	•			
Total	<u> </u>		▶ 3h	

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		ded by section 512, 513, or 514	(e)	
v	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt	
1 Program service revenue:	code	Amount	code	Amount	function income	
a				!		
b	1					
c						
d	·		<u> </u>			
e						
f	·					
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash						
investments						
4 Dividends and interest from securities			14	833,131.		
5 Net rental income or (loss) from real estate:	g, 'à	(1.44° +)	. ' . ;	The state of the s		
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property						
7 Other investment income						
8 Gain or (loss) from sales of assets other	-					
than inventory		•	18	1,254,045.		
9 Net income or (loss) from special events			1		·	
10 Gross profit or (loss) from sales of inventory						
11 Other revenue:						
a						
b						
С						
d						
e						
12 Subtotal. Add columns (b), (d), and (e)		0.	•	2,087,176.	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13	2,087,176.	
(See worksheet in line 13 instructions to verify calculation	ns.)					
Part XVI-B Relationship of Activity		omnlishment of Ex	emn	t Purnoses		
relationship of Activity			(Cp			
Line No Explain below how each activity for which			contrib	outed importantly to the accon	nplishment of	
the foundation's exempt purposes (other	r than by providing fu	nds for such purposes)				
,_					<u> </u>	
		<u></u>		<u> </u>		
		 			 	
		•				
		<u></u>				

Form **990-PF** (2017)

Part XVII	Information Re Exempt Organ		sfers to a	and Trans	actions a	nd Relations	hips With No	ncharitable	;	
1 Did the o	rganization directly or indi		of the follows	no with any off	ner organizati	on described in sec	tion 501(c)	,,,*	Yes	No
	an section 501(c)(3) organ							1,3		
	from the reporting found				9			ļ, ,		
(1) Cash	· -			3				1a(1)		Х
(2) Othe								1a(2)		X
b Other train								1	2 + -	
	s of assets to a noncharita	ble exempt organiza	tion					[1b(1)	1	Х
	hases of assets from a no					•		1b(2)		X
	al of facilities, equipment,		or gameanon					1b(3)		X
	bursement arrangements							1b(4)		X
• •	is or loan guarantees	-						16(5)		X
	ormance of services or me	mbership or fundra	sina salicitatio	ากร				1b(6)		X
	of facilities, equipment, ma							1c		X
	wer to any of the above is	- ·			(h) should al	ways show the fair i	market value of the	<u> </u>	sets	
or service	es given by the reporting for d) the value of the goods, i	oundation. If the fou	ndation receiv						,0.0,	
a) Line no	(b) Amount involved			e exempt orgai	nization	(d) Description	n of transfers, transacti	ons, and sharing ar	rangeme	mts
	(-,	(2)	N/A			(-,				
										
					···			<u></u>		
								·		
				- .						
								• • • • • • • • • • • • • • • • • • • •		
		<u> </u>		• •						
						_				
in section	ndation directly or indirect 501(c) (other than section complete the following sche	n 501(c)(3)) or in se		or more tax-e	xempt organi	zations described		Yes	X] No
	(a) Name of orga	anization		(b) Type of c	rganization		(c) Description of re	elationship		
	<u> </u>						 			
	<u></u>		 				_ 	 		
Under	penalties of perjury, I declare to	hat I have everyward the	a satura unaludus		cohodular and	statements and to the	host of my knowledge			
	elief, it is true, correct, and com			n taxpayer) is bas		ation of which prepare		return with the shown below	e prepare	3r
Sigr	nature of officer or trustee			Date		Title				
_	Print/Type preparer's na	me	Preparer's s	ignature		Date	Check if self- employed	PTIN		
Paid	CHRISTINA :	ZIMMERMAN	CHRIST	INA ZII	MMERM	11/12/18		P01461	057	
Preparer Use Only	Firm's name ► GBQ						Firm's EIN ► 2			
,	Firm's address ▶ 23	O WEST ST	REET	SUITE '	700			 		
		LUMBUS. O	-				Phone no. 61	4-221-1	120	

FORM 990-PF	DIVIDENDS	AND INTER	EST	FROM SECUR	ITIES ST	PATEMENT	1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTI NET INCO	
BLACKROCK GLOBAL							
ASSET	197,218.			51,446.			
BLACKROCK TOTAL PIMCO GLOBAL ASSET	183,632.	3/,1/	0.	146,462.	146,462.		
ALLOC.	197,368.		0.	197,368.	197,368.		
PIMCO TOTAL RETURN	61,906.		0.	61,906.	61,906.		
VANGUARD INFLATION PROTECT SEC	12,507.		0.	12,507.	12,507.		
VANGUARD TOTAL BOND MKT INDEX	116,309.	3,04	6.	113,263.	113,263.		
VANGUARD TOTAL	•	-			•		
INTL STOCK	249,912.		0.	249,912.			
VANGUARD TREAS	267. —————		0. — —	267.	267.		
TO PART I, LINE 4	1,019,119.	185,98	8. =====	833,131.	833,131.		
FORM 990-PF		LEGAL	FEE	S	Sī	CATEMENT	2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVEST- T INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	
LEGAL FEES		5,280.		0.			0.
TO FM 990-PF, PG 1,	5,280.	5,280. 0.				0.	
FORM 990-PF		ACCOUNTI	NG F	== EES	ST	ATEMENT	<u> </u>
							_
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) INVEST- I INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAE PURPOSE	
ACCOUNTING FEES		2,400.		0.			0.
TO FORM 990-PF, PG		2,400.		·			

FORM 990-PF	OTHER PROFES	SIONAL FEES	STATEMENT 4			
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
CONSULTING	8,540.	0.		0.		
SHARED SERVICES PAYROLL & BENEFITS	566,817.	0.		566,817.		
SHARED SERVICES TRAVEL/OTHER MISC.	88,368.	0.	t	0.		
EMPLOYEE GIVING PROGRAM (TRUIST)	72,787.	0.		72,787.		
TO FORM 990-PF, PG 1, LN 16C	736,512.	0.		639,604.		
FORM 990-PF	TAX	ES	S	TATEMENT 5		
DESCRIPTION .	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
FEDERAL INCOME TAX OH AG FILING	58,104. 200.	0.		0.		
TO FORM 990-PF, PG 1, LN 18	58,304.	0.		0.		
FORM 990-PF	OTHER E	XPENSES ,	S	ratement 6		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
INVESTMENT FEES LICENSING FEES BANK SERVICES PROGRAM RELATED	93,846. 1,855. 213. 44,674.	93,846.		0. 0. 0. 44,674.		
TO FORM 990-PF, PG 1, LN 23	140,588.	93,846.		44,674.		

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FOOTNOTES

STATEMENT

FORM 990-PF, PART I, LINE 16C & PART VIII

DURING FYE 06/30/2018, THE FOUNDATION PAID CARDINAL HEALTH (A SUBSTANTIAL CONTRIBUTOR) \$655,185 FOR SERVICES RENDERED TO THE FOUNDATION. THE SERVICES PROVIDED INCLUDE: \$566,817 FOR 77.4% OF THE COMPENSATION AND BENEFITS OF THE DIRECTOR AND OTHERS PROVIDING SERVICES TO THE FOUNDATION; AND \$88,368 FOR TRAVEL AND EXPENSE REIMBURSEMENTS.

THE FOUNDATION DOES NOT HAVE PAID EMPLOYOEES. INSTEAD, IT REIMBURSES CARDINAL HEALTH FOR SERVICES PROVIDED TO THE FOUNDATION. THOSE PROVIDING SERVICES TO THE FOUNDATION (INCLUDING THE DIRECTOR), ARE EMPLOYEES OF CARDINAL HEALTH. IT HAS BEEN DETERMINED THAT 77.4% OF THEIR TIME THROUGHOUT THE YEAR IS SPENT ON FOUNDATION ACTIVITIES. THEREFORE, CARDINAL HEALTH CHARGES THE FOUNDATION 77.4% OF THEIR PAID COMPENSATION AND BENEFITS ON AN ANNUAL BASIS. FOR THOSE EMPLOYEES OF CARDINAL HEALTH WHO PROVIDE SERVICES TO THE FOUNDATION, AND WHICH THE FOUNDATION REIMBURSES CARDINAL HEALTH FOR 77.4% OF THE COMPENSATION AND BENEFITS, THE FOLLOWING AMOUNTS WERE PAID: COMPENSATION AND BONUS (\$566,817)

FORM 990-PF OTH	ER INVESTMENTS		STATEMENT 8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
PIMCO TOTAL RETURN FUND	FMV	1,768,743.	1,768,743.
LOOMIS	FMV	5,680,678.	5,680,678.
BLACKROCK GLOBAL ASSET	FMV	3,871,216.	3,871,216.
PIMCO GLOBAL ASSET ALLOCATION	FMV	3,886,352.	3,886,352.
STATE STREET GLOBAL ADVISORS	FMV	1,945,581.	1,945,581.
BLACKROCK TOTAL STOCK MARKET	FMV	7,366,949.	7,366,949.
VANGUARD TOTAL BOND MKT INDEX	FMV	4,040,963.	4,040,963.
VANGUARD TOT INTL STOCK IX INST	FMV	7,958,639.	7,958,639.
VANGUARD INFLATION	FMV	1,980,240.	1,980,240.
TOTAL TO FORM 990-PF, PART II, LIN	E 13	38,499,361.	38,499,361.
FORM 990-PF EXPLANATION CONCERN	ING PART VII-A,	LINE 8B	STATEMENT 9

EXPLANATION

THE OHIO ATTORNEY GENERAL'S OFFICE DOES NOT REQUIRE FOUNDATIONS TO ANNUALLY FILE THEIR FORM 990-PF IN ENTIRETY. THE OHIO ATTORNEY GENERAL DOES REQUIRE AN ANNUAL REPORT TO BE FILED ON-LINE, WHICH THE ORGANIZATION WILL FILE PRIOR TO THE DUE DATE.

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STATEMENT

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS

	AND FOUNDATION MANA			
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
JON GIACOMIN 7000 CARDINAL PLACE DUBLIN, OH 43017	CHAIR 1.00	0.	0.	0.
RAMON GREGORY 7000 CARDINAL PLACE DUBLIN, OH 43017	VICE CHAIR 1.00	0.	0.	0.
TRAVIS LEONARD 7000 CARDINAL PLACE DUBLIN, OH 43017	TREASURER 1.00	0.	0.	0.
JESSICA MAYER 7000 CARDINAL PLACE DUBLIN, OH 43017	SECRETARY 1.00	0.	0.	0.
PAM KIMMET 7000 CARDINAL PLACE DUBLIN, OH 43017	BOARD MEMBER 1.00	. 0.	0.	0.
KATHRYNE REEVES 7000 CARDINAL PLACE DUBLIN, OH 43017	BOARD MEMBER 1.00	0.	0.	0.
TIFFANY OLSON 7000 CARDINAL PLACE DUBLIN, OH 43017	BOARD MEMBER 1.00	0.	0.	0.
MICHELLE HOLCOMB 7000 CARDINAL PLACE DUBLIN, OH 43017	BOARD MEMBER 1.00	0.	0.	0.
ANDREW ALDERMAN 7000 CARDINAL PLACE DUBLIN, OH 43017	BOARD MEMBER 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	E 6, PART VIII	. 0.	0.	0.

FORM 990-PF

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

STATEMENT 11

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

CARDINALHEALTH.COM/COMMUNITY

FORM AND CONTENT OF APPLICATIONS

ONLY ELECTRONIC SUBMISSIONS WILL BE ACCEPTED.

ANY SUBMISSION DEADLINES

NONE

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

THE CARDINAL HEALTH FOUNDATION SUPPORTS REGIONAL AND NATIONAL HEALTH CARE INITIATIVES, VOLUNTEERISM, AND HEALTHY AND LIVABLE COMMUNITIES.