Form 990-PF

Department of the Treasury

Return of Private Foundation

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

point enter social security numbers on this form as it may be made public.

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

				17.1/ 1				22.10
			lendar year 2018 or tax year beginning Jt	<u>-</u> ЛГХ Т	, 2018	, and ending		, 20 19
			f foundation .				A Employer identif	
	أسا	Blue	e Cross and Blue Shield of No	orth Carolina F	oundatio	n	56-22260	09
	Nı	ımber	and street (or P O box number if mail is not delivered to	street address)		Room/suite	B Telephone numb	er (see instructions)
			30x 2291		919-765-	1361		
	Çı	ty or to	own, state or province, country, and ZIP or foreign posta	ıl code			C If exemption applica	
]	Durl	nam, NC 27702	pending, check here	· · · · · · · · · · · · · · · · · · ·			
	G	Che	ck all that apply Initial return	Initial return	of a former p	oublic charity	D 1 Foreign organiza	tions, check here
			Final return	Amended ref	turn		2 Foreign organiza	
			Address change	Name change	е		85% test, check to	nere and attach
03	3 1	Che	ck type of organization X Section 501(c)(3) exempt private f	oundation	ΔI	E If private foundation	
	. 1		ection 4947(a)(1) nonexempt charitable trust	Other taxable pr				o)(1)(A), check here .
04	- 1		market value of all assets at J Acco		ash 🔀 Acc	rual	F If the foundation is	in a 60-month termination
•				ther (specify)			under section 507(b)(1)(B), check here
	_		▶ \$ 210,157,447 (Part I.	column (d) must be on ca	ish basis)		1	T (4) Disk
	ľ	art l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	(a) Revenue and expenses per books	(b) Net inve		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
		1	Contributions, gifts, grants, etc., received (attach schedule)	90,000,000				j
		2	Check If the foundation is not required to attach Sch B.]
		3	Interest on savings and temporary cash investments.					
		4	Dividends and interest from securities	3,986,555	3,98	6,555		
		5a	Gross rents					1
		b	Net rental income or (loss)					1
	ne	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all 99 078 818	444,452				!
	evenu	_	assets on line 6a		61 87	7,462		<u>-</u>
	Re	7	Capital gain net income (from Part IV, line 2)		01,07	7,402		<u> </u>
	_	8	Net short-term capital gain				· -	<u>'</u>
		9 10 a	Income modifications Of					
			and allowances					
			Gross profit or (loss) (attach schedule)					ļ
		11	Other income (attach schedule)	·	_			1
		12	Total. Add lines 1 through 11	94,431,007	65,86	4,017		3
	_	13	Compensation of officers, directors, trustees, etc					
	es	14	Other employee salaries and wages		_			
~~~	xpenses	15	Pension plans, employee benefits					
2002	×p	16a	Legal fees (attach schedule)	(20				
L	111	b	Accounting fees (attach schedule)	300			-	
_	~ \$	С	Other professional fees (attach schedule)					<u>-</u>
α	ira,	17	Interest					_
SEP 0 2 2020	isi	18	Taxes (attach schedule) (see instructions)	657,381				<del>-</del>
200	וַבַּׁי	19	Depreciation (attach schedule) and depletion.		-			
SEP 0.2	d	20	Occupancy				<u> </u>	
	P	21	Travel, conferences, and meetings					
SE	Žα	22	Printing and publications	2 000 000		0.050		2 424 607
0	ם קפ	23	Other expenses (attach schedule)	3,992,220	11	.8,250		3,424,697
	rati	23 24	Total operating and administrative expenses.	1 640 601	11	g 250		3,424,697
200	bei		Add lines 13 through 23	4,649,601 6,379,762	11	.8,250	· · · · · · · · · · · · · · · · · · ·	9,309,700
⊒. g	Ō	25	Contributions, gifts, grants paid	11,029,363	11	.8,250	<del></del>	12,734,397
<b>8</b> ਤੂੰ	$\dashv$	26	Total expenses and disbursements Add lines 24 and 25	11,029,303		.0,200	<del></del>	12,134,391
<b>70 Heceived in</b> 20 Batching Ogden		27	Subtract line 26 from line 12	83,401,644				!
2			Excess of revenue over expenses and disbursements	55, 101, 011	65,74	5.767		+
			Net investment income (if negative, enter -0-)		33,71	-,		1
		C	Adjusted net income (if negative, enter -0-)					1

Part II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	/Enc	d of year \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
al t II	Datative Streets	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-beari	ing	213,495	2,244,850	2,244,850
2		cash investments			
3	Accounts receivable				•
	Less allowance for dou	btful accounts ▶			
4	Pledges receivable ▶				
i	Less allowance for dou	btful accounts ▶			
5	Grants receivable				
6	Receivables due from	officers, directors, trustees, and other			
	disqualified persons (att	tach schedule) (see instructions)			
7	Other notes and loans r	eceivable (attach schedule)	1		
1	Less allowance for dou	btful accounts ▶			
2 8 E	Inventories for sale or us	e			
	Prepaid expenses and d	eferred charges			
10a	Investments - U.S. and state	e government obligations (attach schedule)	2,759,050	2,781,125	
Ь	Investments - corporate	stock (attach schedule)	90,280,874	174,182,710	1
C	Investments - corporate	bonds (attach schedule)	31,282,409	30,487,825	30,487,825
11	Investments - land, buildings and equipment basis	<u> </u>			
	Less accumulated deprecia (attach schedule)	ation >			
12	Investments - mortgage	loans			
13	Investments - other (atta	ach schedule)			
14	Land, buildings, and equipment basis	<b>&gt;</b>	<u> </u>	<del> </del>	
	Less accumulated deprecia (attach schedule)				
15	Other assets (describe ▶	SEE STATEMENT 6	402,566	460,93	7 460,937
		completed by all filers - see the			
	instructions Also, see p	age 1, item I)	124,938,394	210,157,447	210,157,447
17	Accounts payable and a	ocrued expenses			1
18	Grants payable		8,895,079	5,965,141	<u> </u>
	Deferred revenue				
	Loans from officers, directo	ors, trustees, and other disqualified persons			
급 21	Mortgages and other no	ites payable (attach schedule)		<del></del> -	1
<u>ت</u> 22	Other liabilities (describe	SEE STATEMENT 7 )	283,546	626,270	)
		es 17 through 22)	9,178,625	6,591,411	_ , i
		v SFAS 117, check here ▶ 🔀			}
<u>S</u>	and complete lines 24	through 26, and lines 30 and 31.			.
24	Unrestricted		105,600,183	194,535,838	
25		. <b></b>	10,159,586	9,030,198	3
26					<u> </u>
24 25 26 27 28 29 30 30 30 30 30 30 30 30 30 30 30 30 30		ot follow SFAS 117, check here ▶ 📖			
-	and complete lines 27	-			'
27	•	cipal, or current funds			<u> </u>
ນ 28		land, bldg , and equipment fund			1
29 1		ulated income, endowment, or other funds	115 750 760	202 566 026	1
30 d		I balances (see instructions)	115,759,769	203,566,036	. 1
z 3730		net assets/fund balances (see	124 020 204	210 157 445	,  ·
			124,938,394	210,157,447	
		nges in Net Assets or Fund Bala			
		palances at beginning of year - Part	• •	-	115 750 760
	-	ed on prior year's return)			00 401 644
2 Ente	er amount from Part I,	line 27a	AMENIE O		4 404 600
3 Oth	er increases not includ	ded in line 2 (itemize) ► SEE STATE	THENT 8		222 566 226
	reases not included in		<del></del>	5	222 222
6 Tota	al net assets or fund b	alances at end of year (line 4 minus	line 5) - Part II, column (b	o), line 30 6	203,566,036

a b c d e Comple (i) FMV a b c d e 2 Capita 3 Net sh If gain Part I,	(a) List and des 2-story br 2-sto	or (not canital loss)	(g) Cost or other basis plus expense of sale  by the foundation on 12/31/69 (k) Excess of col (i) over col (j), if any  ain, also enter in Part I, line 7 pss), enter -0- in Part I, line 7 1222(5) and (6) cructions If (loss), enter -0- in		(h) Gain or (los ((e) plus (f) minu Gains (Col (h) ga (k), but not less the Losses (from col	ain minus han -0-) or
b c d e (e) Gro a b c d e Comple (i) FMV a b c d e 2 Capita 3 Net sh If gain Part V (For optional	2-story brows as sales price  ete only for assets shas of 12/31/69  all gain net income nort-term capital gain, also enter in Paline 8	owing gain in column (h) and owned  (j) Adjusted basis as of 12/31/69  or (net capital loss) { If gails (loss) as defined in sections int I, line 8, column (c) See institutions (common stock, 200 sections (c) see institutions (c) see instit	(g) Cost or other basis plus expense of sale  by the foundation on 12/31/69  (k) Excess of col (i) over col (j), if any  uin, also enter in Part I, line 7 pss), enter -0- in Part I, line 7 1222(5) and (6) cructions If (loss), enter -0- in	P - Purchasi D - Donatio	(h) Gain or (los ((e) plus (f) minu	(mo, day, yr) ss) ss) ss (g)) ann minus han -0-) or
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a b c d e 2 Capita 3 Net sh If gain Part I, Part V	al gain net income nort-term capital ga n, also enter in Pa line 8	as of 12/31/69  or (net capital loss) { If ga   If (loss)   If (lo	over col (j), if any  ain, also enter in Part I, line 7 ass), enter -0- in Part I, line 7 1222(5) and (6) cructions If (loss), enter -0- in		Losses (from col	(h))
b c d e 2 Capita 3 Net sh If gain Part I, Part V	nort-term capital gan, also enter in Paline 8	or (net capital loss)  If (louin or (loss) as defined in sections in the line 8, column (c) See inst	oss), enter -0- in Part I, line 7 } 1222(5) and (6) cructions If (loss), enter -0- in }	2	61	.,877,462
c d e 2 Capita 3 Net sh If gain Part I, Part V	nort-term capital gan, also enter in Paline 8	or (net capital loss)  If (louin or (loss) as defined in sections in the line 8, column (c) See inst	oss), enter -0- in Part I, line 7 } 1222(5) and (6) cructions If (loss), enter -0- in }	2	61	,877,462
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2 Capita 3 Net sh If gain Part I, Part V For optiona	nort-term capital gan, also enter in Paline 8	or (net capital loss)  If (louin or (loss) as defined in sections in the line 8, column (c) See inst	oss), enter -0- in Part I, line 7 } 1222(5) and (6) cructions If (loss), enter -0- in }	2	61	.,877,462
3 Net sh If gain Part I, Part V	nort-term capital gan, also enter in Paline 8	or (net capital loss)  If (louin or (loss) as defined in sections in the line 8, column (c) See inst	oss), enter -0- in Part I, line 7 } 1222(5) and (6) cructions If (loss), enter -0- in }	2	61	. <b>,</b> 877 <b>,</b> 462
For optiona		nder Section 4940(e) for Red		3		
For optiona			luced Tax on Net Investment I	ncome		
	undation liable for t		utable amount of any year in the b	ase perio	d?	Yes X No
•		<u> </u>	ar, see the instructions before maki	ing any ei	ntries	
I LINE	(a)				(d)	
	e period years (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
	2017	10,417,507	118,309,064		(66. (5) 6	0.0881
	2016	7,376,842	105,106,900	-		0.0702
	2015	8,795,112	100,953,187			0.0871
	2014	9,669,055	111,216,336			0.0869
	2013	6,039,485	111,579,449			0.0541
	•				-	
2 Total	of line 1. column (c	)		2		0.3864
		for the 5-year base period - divide				
-	₹	oundation has been in existence if		3		0.0773
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
4 Enter t	the net value of no	ncharitable-use assets for 2018 fr	om Part X, line 5	4	152	2,165,814
				_	1 1	762 /17
5 Multip	ly line 4 by line 3.			5	11	,762,417
6 Enter				6		657 <b>,</b> 458
	1% of net investme	ent income (1% of Part I, line 27b).		<del></del>		
		ent income (1% of Part I, line 27b).		7	12	2,419,875

	•	2	
Form 990-PF (2018)	•		
·	 		 

orm !	990-PF (2018)	,	F	Page 4
Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	nstru	uction	s)
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 if necessary - see instructions)			_ !
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		657 <u>,</u>	458_
	here X and enter 1% of Part I, line 27b			l
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of		_	]
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			
3	Add lines 1 and 2		657 <u>,</u>	458
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		657,	458
6	Credits/Payments			
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 659,016			
b	Exempt foreign organizations - tax withheld at source			ł
С	Tax paid with application for extension of time to file (Form 8868) 6c			- 1
d	Backup withholding erroneously withheld			!
	Total credits and payments Add lines 6a through 6d		659,	016
	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1,	558
	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ 1,558 Refunded ▶ 11			
Par	t VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			'
	published or distributed by the foundation in connection with the activities	_	<b>.</b> -	
С	Did the foundation file Form 1120-POL for this year?	1 c		X
ď	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation ► \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers   \$			_
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities			:
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			٠
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		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) satisfied either			
	By language in the governing instrument, or			i
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that			_ ;
	conflict with the state law remain in the governing instrument?	6	Х	
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	7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			'
	NORTH CAROLINA			
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	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		_	ا ا
	4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes,"	[		
	complete Part XIV	9		X Z
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		Х

Form **990-PF** (2018)

Par	t VIP-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within	the '		
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	1	,	Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disquali			
	person had advisory privileges? If "Yes," attach statement See instructions	I		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application	1 4 4	Х	
-	Website address www.bcbsncfoundation.org			
14	The books are in care of ▶ JOHN LUMPKIN  Telephone no ▶ 919-7	65-1361		
	Located at ▶ P.O. BOX 2291, DURHAM, NC ZIP+4 ▶ 27702			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other auth		Yes	No
	over a bank, securities, or other financial account in a foreign country?	مه ا		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name	I		
	the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	i	Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes	lo		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
		lo		1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	lo		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	lo		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
		lo		1
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
		lo		
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulation	ons		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		Х
	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, t	hat		
	were not corrected before the first day of the tax year beginning in 2018?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a privi	ate		
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2018?	o		
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)	(2)		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	to		
	all years listed, answer "No" and attach statement - see instructions )	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		i .	
	<b>&gt;</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time daming the year.	lo		
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation	or		
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by	4		
	Commissioner under section $4943(c)(7)$ ) to dispose of holdings acquired by gift or bequest, or (3) the lapse			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if			
	foundation had excess business holdings in 2018 )			v
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpose	es? 4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize	I .		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 201		0 DE	Χ

orm	990-PF (2018)			·		F	Page <b>6</b>
Рa	rt VII-B Statements Regarding Activities	for Which Form	4720 May Be Red	uired (continued)	1		
5a	During the year, did the foundation pay or incur any am	ount to				Yes	No
	(1) Carry on propaganda, or otherwise attempt to influ	ience legislation (section	on 4945(e))?	. Yes X No	,		
	'(2) Influence the outcome of any specific public el						İ
	directly or indirectly, any voter registration drive?			Yes X No	,		
	(3) Provide a grant to an individual for travel, study, or				,		
	(4) Provide a grant to an organization other than a	• •				'	
	section 4945(d)(4)(A)? See instructions				,		
	(5) Provide for any purpose other than religious, c						'
	purposes, or for the prevention of cruelty to children				,		i l
b	If any answer is "Yes" to 5a(1)-(5), did any of the				·		
-	Regulations section 53 4945 or in a current notice rega			*	5b		X
	Organizations relying on a current notice regarding disa	•	-			<del> </del>	
С	If the answer is "Yes" to question 5a(4), does the						
·	because it maintained expenditure responsibility for the		•		.		i .
	If "Yes," attach the statement required by Regulations s	_					
e -	. , ,	, ,	roethy to now promise	<b></b>			
6a	Did the foundation, during the year, receive any fu	•		Yes X No			'
b	on a personal benefit contract?			. — —	6b		X
U	If "Yes" to 6b, file Form 8870	ectly of indirectly, on a	a personal benefit contra	act,	·   00		
7a	At any time during the tax year, was the foundation a p	norty to a prohibited to	v chalter transaction?	Yes X No		1	
b	If "Yes," did the foundation receive any proceeds or ha				7b		<del>-</del>
	Is the foundation subject to the section 4960 tax on pa	•		3011-11-11-1	'   ''	<del>                                     </del>	
8	remuneration or excess parachute payment(s) during the	• • •		. Yes X No		' `	
Da	rt VIII Information About Officers, Director					l .	
	and Contractors						
1	List all officers, directors, trustees, and foundate	tion managers and (b) Title, and average		. See instructions. (d) Contributions to			
	(a) Name and address	hours per week	(If not paid,	employee benefit plans	(e) Expen other al		
EE	STATEMENT 10	devoted to position	enter -0-)	and deferred compensation			
		-					
	· .	+					-
		-	•				
		-					
		1					
		-					
2	Compensation of five highest-paid employees	(other than thos	se included on lin	e 1 - see instructi	ons) If n	one	enter
-	"NONE."	(01.101 1.101			oo,	,	
		(b) Title, and average		(d) Contributions to employee benefit	(e) Expen	se accoi	unt
(a	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred compensation	other al	lowance	es
ON	 F	<del> </del>		compensation			
- 11	<u> </u>	•					
	ho	.					
				<del> </del>			
		-					
		-					
				_			
	<u> </u>	-1					

3 Five highest-pai	d independent contractors for professional services.	See instructions. If none, enter "NONE	st ,
<del></del>	ame and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
	BLUE SHIELD OF NORTH CAROLINA		
	DURHAM, NC 27702	PROFESSIONAL SERVICES	1,703,470
	receiving over \$50,000 for professional services		
	ary of Direct Charitable Activities		
organizations and other be	largest direct charitable activities during the tax year. Include relevant neficianes served, conferences convened, research papers produced, etc.		Expenses
1 SEE STATEMENT	11		
			317,408
2 SEE STATEMENT	12		
			229,683
3 SEE STATEMENT	13		
			357,498
4 SEE STATEMENT	14		
			741,888
Part IX-B Summ	ary of Program-Related Investments (see instruct	ions)	
	program-related investments made by the foundation during the tax year	on lines 1 and 2	Amount
1 N/A			
2			<u> </u>
All other program-related i	nvestments See instructions		
3			
Total. Add lines 1 throu	ugh 3		

rar	see instructions)	ign roun	dations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		-
а	Average monthly fair market value of securities	1a	147,331,450
	Average of monthly cash balances	1b	6,724,667
	Fair market value of all other assets (see instructions)	1c	426,943
	Total (add lines 1a, b, and c)	1d	154,483,060
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	154,483,060
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	2,317,246
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	152,165,814
6	Minimum investment return. Enter 5% of line 5	6	7,608,291
Par	<b>Table 2 Distributable Amount</b> (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ▶ and do not complete this part )	dations	
1	Minimum investment return from Part X, line 6	1	7,608,291
2 a	Tax on investment income for 2018 from Part VI, line 5 2a 657, 458		
	Income tax for 2018 (This does not include the tax from Part VI). 2b		
	Add lines 2a and 2b	2c	657,458
3	Distributable amount before adjustments Subtract line 2c from line 1	3	6,950,833
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	6,950,833
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	6,950,833
Par	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	12,734,397
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	!	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
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	12,734,397
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b See instructions	5	657,458
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	12,076,939
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when ca	Iculating	whether the foundation

qualifies for the section 4940(e) reduction of tax in those years

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Part XIII Undistributed Income (see Instru	ctions)			Page 9
	(a)	(b)	(c)	(d)
1 Distributable amount for 2018 from Part XI,	Corpus	Years prior to 2017	2017	2018 6,950,833
line 7	<del></del> -			1
2 Undistributed income, if any, as of the end of 2018				,
a Enter amount for 2017 only				
b Total for prior years 20,20,20			-	
3 Excess distributions carryover, if any, to 2018 a From 2013 639,013				1
4 177 110				
2 020 125				
2 260 920				
4 940 156				
C 110111 2017	15,854,234			
f Total of lines 3a through e				1
line 4 ▶ \$12,734,397				
a Applied to 2017, but not more than line 2a				1
b Applied to undistributed income of prior years (Election required - see instructions)				į
c Treated as distributions out of corpus (Election				
required - see instructions)				i
d Applied to 2018 distributable amount				6,950,833
e Remaining amount distributed out of corpus	5,783,564			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as			·	ı
indicated below:	21,637,798			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	21,037,730			<del> </del>
<b>b</b> Prior years' undistributed income Subtract				·
line 4b from line 2b	<del></del> -			<u> </u>
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)				ļ
tax has been previously assessed	. <u>-</u>			+
d Subtract line 6c from line 6b Taxable				
e Undistributed income for 2017 Subtract line	<del></del>		<del></del>	1
4a from line 2a Taxable amount - see instructions				i
f Undistributed income for 2018 Subtract lines				
4d and 5 from line 1. This amount must be				
distributed in 2019	· · -			1
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				i
required - see instructions)				<u>                                     </u>
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions)	639,013			
9 Excess distributions carryover to 2019.				
Subtract lines 7 and 8 from line 6a	20,998,785			
10 Analysis of line 9				
a Excess from 2014 4,177,110				
<b>b</b> Excess from 2015 3,820,135				
c Excess from 2016 2,368,820				1
<b>d</b> Excess from 2017 4,849,156				
e Excess from 2018 5, 783, 564				
				Form 990-PF (2018)

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	<del></del>			and Part VII-A, ques		1 1
Пa	If the foundation has foundation, and the rulin					
b	Check box to indicate					(j)(3) or 4942(j)(5)
	Enter the lesser of the ad-	Tax year		Prior 3 years		
	justed net income from Part	(a) 2018	<b>(b)</b> 2017	(c) 2016	(d) 2015	(e) Total
	I or the minimum investment		<del>                                     </del>	<u> </u>		
	return from Rart X for each					
	year listed					-
D	85% of line 2a			-		
С	Qualifying distributions from Part					
	XII, line 4 for each year listed				<del>-</del>	
u	Amounts included in line 2c not used directly for active conduct					
	of exempt activities				<del>                                     </del>	<del>- </del>
е	Qualifying distributions made		$\downarrow$			
	directly for active conduct of exempt activities. Subtract line					
_	2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets			$\times$		
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test-					
	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
c	"Support" alternative test - enter					
٠	(1) Total support other than					
	gross investment income	1				
	(interest, dividends, rents, payments on securities					
	loans (section 512(a)(5))	<i>y</i>				
	or royalties)				<del>-</del>	+
	(2) Support from general public and 5 or more					
	exempt organizations as	1				1
	provided in section 4942 ()(3)(B)(III)					
	(3) Largest amount of sup-					
	port from an exempt organization					
	(4) Gross investment income.					
Рa	rt XV Suppleme	ntary Information (	Complete this pa	rt only if the found	dation had \$5,000	or more in assets at
	any time d	luring the year - see	e instructions.)			
1	Information Regarding	g Foundation Manage	ers:		-	
а	List any managers of	the foundation who	have contributed mo	ore than 2% of the to	ital contributions rece	eived by the foundation
	before the close of any	y tax year (but only if t	hey have contributed	more than \$5,000) (	See section 507(d)(2)	)
ION	NE					
		the foundation who	own 10% or more	of the stock of a cor	rporation (or an equa	lly large portion of the
v	ownership of a partne					.,go poro oo
	- · · · · · · · · · · · · · · · · · · ·	,		J		
ION	NE.					
	Information Regardin	- Cantribution Cran	4 Cift Lean Sahalar	hin eta Dragrama:		
2	Č	~		-		
						and does not accept
	•			rants, etc., to individu	iais or organizations i	under other conditions,
	complete items 2a, b,				<del> </del>	<del></del>
	The name, address, a	and telephone number	or email address of	the person to whom a	pplications should be a	ddressed
	E STAEMENT 15					
b	The form in which app	olications should be su	ibmitted and informa	tion and materials the	y should include	
SE	E STATEMENT 16					
c	Any submission deadl	ines				·
	-					
SEI	E STATEMENT 16					
		imitations on award	s, such as by geor	raphical areas, chari	itable fields, kinds of	f institutions, or other
u	factors		-, as by goog	, areas, onan		
₽ſ	R THE HEALTH ANI	O WELL-BEING OF	FVERYONE IN A	IORTH CAROLINA		
JSA	V THE HEALTH ANI	2 WELL DETING OF	TAPITIONE THE	OMITTO CAMOUNT		Form <b>990-PF</b> (2018)
8E14	90 1 000					roim <b>330-FF</b> (2018)

Part XV Supplementary Information (	continued)			
3 Grants and Contributions Paid Dur Recipient Name and address (home or business)	ing the Year or App	roved for	Future Payment	
Recipient	show any relationship to	Foundation status of	Purpose of grant or contribution	Amount "
Name and address (home or business)	or substantial contributor	recipient	Contribution	<del>. ,</del>
a Paid during the year SEE STATEMENT 17	or substantial contributor	recipient		9,309,700
••				
Total				9,309,700
b Approved for future payment SEE STATEMENT 18				5,965,141
Total	·		▶ 3h	5,965,141

4,

Part XVI-	A Analysis of Income-Prod	ucing Acti	ivities		<del></del>	··
Enter gross	amounts unless otherwise indicated	Unrela	ated business income	Excluded by	y section 512, 513, or 514	(e)
•	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
•		· · · · · · · · · · · · · · · · · · ·				(See matidotions)
_						
				-		
						_
f					·	
g Fees	and contracts from government agencies					
2 Members	ship dues and assessments					
	n savings and temporary cash investments •					
	s and interest from securities			14	3,986,555	
5 Net renta	al income or (loss) from real estate			<u></u>	<u> </u>	
a Debt-	financed property					
<b>b</b> Not d	lebt-financed property					
6 Net rental	I income or (loss) from personal property			10	444 450	
7 Other in	vestment income			18	444,452	
8 Gain or (le	oss) from sales of assets other than inventory					
9 Net inco	me or (loss) from special events				-	
	ofit or (loss) from sales of inventory					
	venue a					
	· · · · · · · · · · · · · · · · · · ·					
e	A11 1 (1) (1)				4,431,007	
	Add columns (b), (d), and (e)				·	4,431,007
	dd line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calci				13	1, 131,001
Part XVI-			ccomplishment of Ex	cempt Puri	noses	
Line No.	Explain below how each activit					
▼	accomplishment of the foundation	on's exemp	t purposes (other than t	by providing	tunas for such purposes	s) (See instructions )
N/A					<del></del>	
						·
						·
				_		
					<del></del>	
					<del></del>	
		<u> </u>				
			<u>-</u>			
	<del></del>		<u>-</u>	-		
-						

Form 99	30-PF (								ge I
Part	ΧŮΙΙ	Information R Exempt Organ		nsfers to and Trans	actions and	d Relationships With No	onchari	table	;
1 [	Old the	e organization direct	ly or indirectly ei	ngage in any of the foll	owing with ar	ny other organization describe	ed	Yes	No
11	n sed	ction 501(c) (other				on 527, relating to politic		,	
		zations?							
				noncharitable exempt			4 - (4)		X
									X
•	•						· ·  1a(2)	<del>' </del>	
		transactions						-	x x
									$\frac{1}{X}$
									X
									X
									X
									X
								1	X
								<u> </u>	
						Column (b) should always s			
						If the foundation received le			
			·		1	of the goods, other assets, of			
(a) Line	e no	(b) Amount involved	(c) Name of nor	ncharitable exempt organization	(d) Des	cription of transfers, transactions, and	shanng am	angeme	nts
N/A				-					
		<u>-</u>		·					
	.	·							
_									
		. <del></del>			_				
							_		
d	lescril		(other than secti	ated with, or related to on 501(c)(3)) or in secti		e tax-exempt organizations	Y	es X	] No
		(a) Name of organization	<u> </u>	(b) Type of organizat	ion	(c) Description of rela	itionship		
					_				
	Under	penalties of perjury, I decla tt, and complete Declaration of	re that I have examined preparer (other than taxe	d this return, including accompan payer) is based on all information of	ying schedules and which preparer has a	statements, and to the best of my known knowledge	wledge and	belief, it	is true
Sign		Xta. X		5/13/20	VP	May the			
Here	Sigi	nature of officer or trustee	mere	Date	Title	with the			below? X No
		Print/Type preparer's na	me	Preparer's signature	· .	Date Check	ıf PTIN		
Paid		1		1		not analysis	اد		

Firm's EIN

Phone no

Preparer

Use Only

Firm's name

Firm's address

#### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service Name of the organization

#### Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2018

Employer identification number

Blue Cross and Blue Shield of North Carolina Foundation 56-2226009 Organization type (check one) Filers of: Section: 501(c)( ) (enter number) organization Form 990 or 990-EZ 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018) Name of organization Blue Cross and Blue Shield of North Carolina Foundation

Employer identification number 56-2226009

Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is n	eeded. 	
(a) No.	(b) Name, address, and ZIP + 4	(c) (d) Total contributions Type of contri		
	BLUE CROSS AND BLUE SHIELD OF NORTH CAROLINA PO BOX 2291  DURHAM, NC 27702	\$\$	Person Payroll Noncash  (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
	,		Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
			Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution	
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)	

Employer identification number

56-2226009

Part II	Noncash Property (see instructions).	. Use duplicate copies of	Part II if additional space is needed

ĺ	FMV (or estimate) (See instructions)	(d) Date received
355,689.05 SHARES, VANGUARD INSTITUTIONAL IN	NDEX FUND	
	\$\$	02/19/2019
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	  _ \$	
(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
. (b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	Description of noncash property given  (b)  (b)  Description of noncash property given	(b) Description of noncash property given  (c) FMV (or estimate) (See instructions)  (b) Description of noncash property given  (c) FMV (or estimate) (See instructions)  (c) FMV (or estimate) (See instructions)  (d) FMV (or estimate) (See instructions)  (e) FMV (or estimate) (See instructions)  (f) Description of noncash property given  (c) FMV (or estimate) (See instructions)  (d) FMV (or estimate) (See instructions)

### Attachment for Form 990-PF for taxable year ended 6/30/19

#### Statement 3

### Part II, Line 10a - Investments - Govt. Obligations (Market Value Valuation)

FEDERAL HOME LOAN BANKS

Total Investments - Govt. Obligations at Market Value

### Statement 4

### Part II, Line 10b - Investments - Corporate Stock (Market Value Valuation)

BAIRD ULTRA SH BD INST	848,379	common shares
BAIRD AGGREGATE BD INST	2,470,982	common shares
CAUSEWAY:EMER MKT INST	1,660,299	common shares
DODGE & COX INTL STOCK	728,368	common shares
VANGUARD INSTL INDX INST	170,752	common shares
VANGUARD MD-CP I INST	498,364	common shares
VANGUARD SC V I ETF	137,988	common shares
FLORENCE S C SPL OBLIG	500,000	
FLORENCE S C SPL OBLIG	500,000	

### Total Investments - Corporate Stock at Market Value

#### Statement 5

#### Part II, Line 10c - Investments - Corporate Bonds (Market Value Valuation)

AFLAC INC

AMERISOURCEBERGEN CORP

ATLANTIC CITY ELECTRIC CO

BANK OF NEW YORK MELLON

BRANCH BANKING AND TRUST CO

CAMPBELL SOUP CO

CHILDREN'S HOSPITAL MEDICAL CENTER

COMCAST CORP

**DUKE ENERGY CAROLINAS LLC** 

GE CAPITAL INTERNATIONAL FUNDING CO

GENERAL ELECTRIC CO

HIGHMARK INC

JPMORGAN CHASE & CO

LOEWS CORP

MEDTRONIC INC

METLIFE INC

NATIONAL PENN BANCSHARES INC

NATIONAL RURAL UTILITIES COOPERATIVE FINANCE CORP

PNC BANK NA

PRAXAIR INC

PREMIER HEALTH PARTNERS

SIMON PROPERTY GROUP LP

STATE STREET CORP

WAKE FOREST UNIVERSITY BAPTIST MEDICAL CENTER

WAL MART STORES INC

Attachment for Form 990-PF for taxable year ended 6/30/19

### Statement 6 Part II, Line 15 - Other Assets (Market Value Valuation)

	Beginning	Ending
Excise Taxes Receivable	1,016	1,635
Interest Receivable	292,457	381,562
Dividends Receivable	327	5,003
Prepaid Expenses	84,800	32,360
Sales Tax Refund Receivable	. 23,967	40,378
Total Other Assets	402,566	460,937

### Statement 7

### Part II, Line 22 - Other Liabilities

	Beginning	Ending
Deferred Tax Liability	254,979	605,051
Accrued Program Expenses	1,247	2,583
Accrued Expenses	27,320	18,636
Total Other Liabilities	283,546	626,270
	<del></del>	

### **Statement 8**

### Part III, Line 3 - Other Increases not included in Line 2

Unrealized Gains on Investments	4,754,694
Change in Deferred Taxes on Investments	-350,072
Rounding	1
Total Other Increases	4,404,623

Blue Cross and Blue Shield of North Carolina Foundation EIN 56-2226009
Attachment for Form 990-PF for taxable year ended 6/30/2019

### Statement 9 Part IV, Capital Gains and Losses for Tax on Investment Income

(a)		(b) How	(c) Date	(d)
Description of Pro	operty Sold	Acquired	Acquired	Date Sold
BAIRD AGGREGATE BD INST	251,974 Shares	Р	VAR	2/22/19
DOMINION RESOURCES INC	1,000,000 Shares	Р	3/2/11	12/14/18
VANGUARD INSTL INDX INST	16,341 Shares	Р	VAR	VAR
VANGUARD SC V I ETF	1,432 Shares	Р	VAR	VAR
VANGUARD MD-CP I INST	31,393 Shares	Р	VAR	VAR
VANGUARD INSTL INDX INSP	355,689.05 Shares	D	VAR	2/19/19

Subtotal

### Attachment for Form 990-PF for taxable year ended 6/30/19 Statement 10

### Part VIII, Line 1 - List of Officers, directors, trustees, foundation managers

(a) Patrick Conway, MD P.O Box 2291 Durham, NC 27702	(b) Director 1	(c) None	(d) None
Jack Kenley P.O. Box 2291 Durham, NC 27702	Director 0.5	None	None
John T. Roos P.O Box 2291 Durham, NC 27702	Director 0 5	None	None
John Lumpkin, MD P O Box 2291 Durham, NC 27702	President 40	None	None
Lisa Carey, MD P.O Box 2291 Durham, NC 27702	Director 0.5	None	None
Danielle Gray P O Box 2291 Durham, NC 27702	Director 0 5	None	None
Nick Chiarello P O. Box 2291 Durham, NC 27702	Treasurer 1 5	None	None
Stran Summers P.O. Box 2291 Durham, NC 27702	VP, Finance 1.5	None	None
Danielle Breslin P O. Box 2291 Durham, NC 27702	VP, Operations 40	None	None
Alexander Chu P.O Box 2291 Durham, NC 27702	Secretary 1 5	None	None
Rahul Rajkumar, MD P.O. Box 2291 Durham, NC 27702	Director 0.5	None	None
Mitch Perry	Director	None	None

Attachment for Form 990-PF for taxable year ended 6/30/19

Statement 11

Part IX-A, Line 1 – Direct Charitable Activities

Be Active Kids teaches preschool children about the importance of physical activity. Day care providers are along with a free kit containing teaching materials and curriculum guides. The program is available in all 100 Carolina.

Expenses = \$317,408

Statement 12

Part IX-A, Line 2 – Direct Charitable Activities

The Blue Cross and Blue Shield of North Carolina Foundation Nonprofit Leadership Academy is an eleven-n development program that brings together staff and board members for a dynamic professional learning expe intended to develop and enhance the strategic and operational flexibility, insight, and teamwork necessary fo success. The program was developed in 2014, with 14 nonprofits in the first cohort, 16 in the second, and 14

Expenses = \$229,683

Statement 13

Part IX-A, Line 3 – Direct Charitable Activities

The Blue Cross and Blue Shield of North Carolina Foundation provides education and technical assistance to charitable organizations. This would include, but is not limited to, educational conferences and seminars, and and related assistance to enhance the grantees' ability to achieve desired outcomes.

Expenses = \$357,498

Statement 14

Part IX-A, Line 4 – Direct Charitable Activities

The Blue Cross and Blue Shield of North Carolina Foundation provides education and technical assistance to charitable organizations. This would include, but is not limited to, educational conferences and seminars, and and related assistance to enhance the grantees' ability to achieve desired outcomes. This portion of the educa assistance expenses are specifically for the Foundation's Community-Centered Health initiative.

Expenses = \$741,888

Attachment for Form 990-PF for taxable year ended 6/30/19

Statement 17 Part XV, Line 3a

### **Grants and Contributions Paid During the Year**

Name and Address	<u>Donee</u> <u>Relationship</u>	Foundation Status	
Appalachian Sustainable Agriculture Project 306 West Haywood St Asheville, NC 28801	None	Public Charity	Focus attention education and support lifelon families
Blue Ridge Parkway Foundation, Inc 717,S Marshall St Suite 105B Winston-Salem, NC 27101	None	Public Charity	Support the sta ongoing effort- outdoors for th installation of
Blueprint NC 2912 Highwoods Blvd Suite 204 Raleigh, NC 27604	None	Public Chanty	Support the de disaster recove from rapid-res
Care Share Health Alliance PO Box 32014 Raleigh, NC 27622	None	Public Charity	Provide technic opportunities f the health of lo Carolinians
Caswell Family Medical Center, Inc PO Box 1448/439 US Hwy 158W Yanceyville, NC 27379	None	Public Chanty	Build rural dev resident-led an wealth-buildin increase health
Community Foundation of Greater Greensboro, Inc 330 S Greene St, Ste 100 Greensboro, NC 27401	None	Public Chanty	Relaunch the c infrastructure a increase the lea Latinx-serving
de Beaumont Foundation Inc 7501 Wisconsin Ave , Suite 1310E Bethesda, MD 20814	None	Private Foundation	Support "bold, driven" (BUIL North Carolina
de Beaumont Foundation Inc 7501 Wisconsin Ave , Suite 1310E Bethesda, MD 20814	None	Private Foundation	Support up to a participate in t Health Challen Local, and Dat multi-sector, comove resource transform heal
Duke University 201 Science Dr., Box 90239 Durham, NC 27708	None	Public Charity	Expand coalition capacity for a 'University to e

Attachment for Form 990-PF for taxable year ended 6/30/19

Attachment for Form 990-PF for taxable year en	ueu 0/30/19		<u> </u>
Gaston Family Health Services 200 E Second Ave	None	Public Charity	Reduce obesity by engaging re
Gastonia, NC 28052			conditions
·			
Greensboro Housing Coalition, Inc 1031 Summit Avenue, Suite 1E-2	None	Public Charity	Improve socio- to improve hea
Greensboro, NC 27405			community-cei Greensboro
HandsOn Northwest North Carolina	None	Public Charity	Mobilize peop
751 W Fourth Street, Suite 200 Winston-Salem, NC 27101			community che training and le- operate more e
Hunger and Health Coalition PO Box 1837	None	Public Charity	Expand and sti
Boone, NC 28607			within low-we, for food securi offices, connec nutrition educa leadership in V
Legal Aid of North Carolina, Inc	None	Public Charity	Improve health
224 S Dawson Street PO Box 26626			eastern North (
Raleigh, NC 27611			housing condit social determin
Lincoln Community Health Center, Inc 1301 Fayetteville Street Durham, NC 27707	None	Public Charity	Develop capac social determir center environi
Medserve 5316 Bennington Drive	None	Public Charity	General operat
Greensboro, NC 27410			successful tran
Medserve 5316 Bennington Drive	None	Public Charity	General operat
Greensboro, NC 27410			successful tran
Montgomery County Partnership for Children, Inc 404-A North Main St	None	Public Charity	Expand the foctor increase foo
Troy, NC 27371			Montgomery C
Mountain Area Health Education Center, Inc 121 Hendersonville Road Asheville, NC 28803	None	Public Charity	Eliminate disp County by 202 indicating that
			white babies
Mountain Community Health Partnership 116 Seven Mile Ridge Burnsville, NC 28714	None	Public Chanty	Develop a busi support to crea care serving M

Attachment for Form 990-PF for taxable year ended 6/30/19

North Carolina Center for Nonprofit Organizations, Inc 5800 Faringdon Place	None	Public Charity	Develop statev sector about M
Raleigh, NC 27609			
North Carolina Community Health Center Association 4917 Waters Edge Drive, Suite 165 Raleigh, NC 27606	None	Public Charity	Improve health through the de Workers as par
North Carolina Community Health Center Association 4917 Waters Edge Drive, Suite 165 Raleigh, NC 27606	None	Public Charity	Organizational association gro
North Carolina Community Health Center Association 4917 Waters Edge Drive, Suite 165 Raleigh, NC 27606	None	Public Chanty	Strengthen par advocates, and for farmworker workforce safe agricultural cor Carolina
North Carolina Congress of Parents and Teachers 3501 Glenwood Ave Raleigh, NC 27612-4934	None	Public Chanty	Build a strong recommendation activate parent for healthy sch
North Carolina Congress of Parents and Teachers 3501 Glenwood Ave Raleigh, NC 27612	None	Public Charity	Build a strong recommendation activate parent for healthy sch
North Carolina Dental Society Foundation 1600 Evans Road Cary, NC 27513	None	Public Chanty	Provide high q North Carolini clinic
North Carolina Dental Society Foundation 1600 Evans Road Cary, NC 27513	None	Public Charity	Pilot a public-į based dental pi schools in Edg
North Carolina Department of Public Instruction School Nutrition Section 6324 Mail Service Center Raleigh, NC 27699	None	Public Charity	Enhance culina Nutrition Profe appealing stud and small equi Forward activi
North Carolina Institute of Medicine 630 Davis Drive, Suite 100 Morrisville, NC 27560	None	Public Chanty	Support legisla creating and he fellowship and
North Carolina Institute of Medicine 630 Davis Drive, Suite 100 Morrisville, NC 27560	None	Public Charity	Improve the he Carolinians by analysis, conve building conse

Attachment for Form 990-PF for taxable year ended 6/30/19

North Carolina Recreation and Park Association. Inc.

North Carolina Recreation and Park Association, Inc	None	Public Charity	Work with a co
883 Washington St			lens to policies
Raleigh, NC 27605	1		graduate stude
			Parks, Recreat
•			to help grow th
•			equity
·			
North Carolina State University	None	Public Charity	Expand NC fai
2701 Sullivan Drive	rione	Tuone Charky	strengthening t
Campus Box 7514			Coalition of N
Raleigh, NC 27695	į		support, throu
Managai, 110 2 10 2 2			trainings, farm
	***		
North Carolina State University	None	Public Chanty	Grow and strei
2701 Sullivan Drive			
Campus Box 7514			place-based in
Raleigh, NC 27695	<u> </u>		environments I
1			food system ar
			,
North Carolina State University	None	Public Charity	Train an aspiri
Sponsored Programs & Regulatory Compliance			professionals,
2701 Sullivan Drive, Suite 240, Box 7214			an evolving, in
Raleigh, NC 27695-7514		İ	development ti
			outdoor enviro
Opportunities Industrialization Center, Inc	None	Public Charity	Address racial
P O Box 2723		<b> </b> '	gentrification a
Rocky Mount, NC 27802-2723			Mount
D. J. T. J. D. J. C. and	None	Public Chanty	Develop region
Piedmont Triad Regional Council 1398 Carrollton Crossing Drive	None	rubile Charity	support partne
Kernersville, NC 27284			health, and hea
Remersville, NC 27284			impact health (
			changes in Noi
			landing so we can
D. L. T. I.B. I.B. I. C.	None	Public Charity	Create a model
Piedmont Triad Regional Development Corporation 1398 Carrollton Crossing Drive	None	Fuolic Charity	community me
			organizations,
Kemersville, NC 27284			healthy, and re
			county Piedmo
			people
Reinvestment Partners	None	Public Chanty	Expand the Bu
110 E Geer St	1		program (now
Durham, NC 27701			and eight new
		i	patients financ
1			food and wrap
			increased food
The Community Foundation of Western North Carolina, Inc	None	Public Charity	Develop and o
4 Vanderbilt Park Drive, Suite 300	, some	. aono onanty	skills of nonpr
			and cultivate o
Asheville NCC2XXU3	E		Western North
Asheville, NC 28803		ľ	AA CZICIII IAOIIII
Asheville, NC 28803			Western North
Asheville, NC 28803  The Community Foundation of Western North Carolina, Inc	None	Public Charity	Develop and o

Attachment for Form 990-PF for taxable year ended 6/30/19

Trangle Community Foundation None OP Public Charity Build the capa Suite 220 University of North Carolina at Chapel Hill 104 Auprot Drvs. Suite 220 University of North Carolina at Chapel Hill 104 Auprot Drvs. Suite 2205 Chapel Hill, NC 27599 University of North Carolina at Chapel Hill 104 Auprot Drvs. Suite 2205 Chapel Hill, NC 27599 University of North Carolina at Chapel Hill 104 Auprot Drvs. Suite 2200, CB# 1350 Chapel Hill, NC 27599 University of North Carolina at Chapel Hill 104 Auprot Drvs. Suite 2200, CB# 1350 Chapel Hill, NC 27599 University of North Carolina Wilmington Chapel Hill, NC 27599 University of North Carolina Wilmington Off S College Rd Wilmington, NC 28403 University of North Carolina Wilmington Off S College Rd Wilmington, NC 28403 University of North Carolina Wilmington Off S College Rd Wilmington, NC 28403 West Grayson Street Marnon, NC 28403 West Grayson Street Marnon, NC 28752 West Grayson Street Warnon, NC 28752 Western Prodinont Council Of Governments P O Box 9026 Hickory, NC 28603 Western Prodinont Council Of Governments P O Box 9026 Hickory, NC 28603 Western Prodinont Council Of Governments P O Box 9026 Hickory, NC 28603 None Public Charity Engage youth Inversity Development of the Charity Engage youth Inversity Development of the Charity Engage youth Inversity Development of the Charity Engage youth Inversity Development of the Charity Engage youth Inversity Development of the Charity Engage youth Inversity Development of the Charity Engage youth Inversity Development of the Charity Engage youth Inversity Development of the Charity Engage youth Inversity Development of the Charity Engage youth Inversity Development of the Charity Engage youth Inversity Development of the Charity Engage youth Inversity Development of the Charity Engage youth Inversity Development of the Charity Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage Engage	Attachment for Form 330 II for taxable year ended			
Deliversity of North Carolina at Chapel Hill   None   Public Charity   Conduct a sea inform leaders   stackholders   Campus Box 1350   Chapel Hill, NC 27599   Chapel Hill, NC 27510   Chapel Hill,	Suite 201	None	Public Charity	
Inform leaders	Durham, NC 27/09			
ONUTRITION AND CAPAIR   Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Chair Carpoins   Cha	104 Airport Dr, Suite 2200 Campus Box 1350	None	Public Chanty	inform leaders)
## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease ## defease	104 Airport Drive, Suite 2200, CB# 1350	None	Public Chanty	(Nutrition and Child Care) uli care and educa
West Marion Community Forum 220 West Grayson Street Manon, NC 28752  Western Predmont Council Of Governments Po Box 9026 Hickory, NC 28603  Wouth Empowered Solutions 4021 Carya Drive, Suite 160 Raleigh, NC 27610  Raleigh, NC 27610  Research of Medicad trans  Respective Supplicadership role declaration in Medical Carya Drive, Suite 160 Raleigh, NC 27610  Research of Medical Carya Carya Drive, Suite 160 Raleigh, NC 27610  Respective Supplicadership role declaration in Mone Public Chanty  Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respective Supplications Respe	601 S College Rd	None	Public Charity	through works assistance, and
220 West Grayson Street Marnon, NC 28752  Western Ptedmont Council Of Governments P O Box 9026 Hickory, NC 28603  Wouth Empowered Solutions 4021 Carya Drive, Suite 160 Raleigh, NC 27610  Youth Empowered Solutions 4021 Carya Drive, Suite 160 Raleigh, NC 27610  Youth Empowered Solutions 4021 Carya Drive, Suite 160 Raleigh, NC 27610  None Public Chanty Engage youth movement built committees, he concessions, at the increase of the increase of the capa will be capa that address the create healther.	601 S College Rd	None	Public Charity	agency to supp leadership role
P O Box 9026 Hickory, NC 28603  Wouth Empowered Solutions Youth Empowered Solutions A021 Carya Drive, Suite 160 Raleigh, NC 27610  None  Public Charity  Engage youth movement buil committees, he concessions, at the increase of the state to characteristics.  None  Public Charity  Build the capathe state to characteristics to characteristics to characteristics. The concessions is the increase of the state to characteristics. The concessions is the increase of the state to characteristics. The concessions is the increase of the state to characteristics. The concessions is the increase of the state to characteristics. The concessions is the increase of the state to characteristics. The concessions is the increase of the state to characteristics. The concessions is the increase of the capathe state to characteristics. The concessions is the increase of the capathe state to characteristics. The concessions is the increase of the capathe state to characteristics. The concessions is the increase of the capathe state to characteristics. The concessions is the increase of the capathe state to characteristics. The concessions is the increase of the capathe state to characteristics. The concessions is the increase of the capathe state to characteristics. The concessions is the capathe state to characteristics. The concessions is the capathe state to characteristics. The concessions is the capathe state to characteristics. The concessions is the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the capathe state of the c	220 West Grayson Street	None	Public Chanty	partners and gi driven solution food, child care disparities in A
4021 Carya Drive, Suite 160 Raleigh, NC 27610  Youth Empowered Solutions 4021 Carya Drive, Suite 160 Raleigh, NC 27610  None  Public Charity  Build the capathe state to charter that address the create healthier	P O Box 9026	None	Public Charity	medical care, g employment of by decreasing i increasing heal
4021 Carya Drive, Suite 160  Raleigh, NC 27610  that address the create healthier	4021 Carya Drive, Suite 160	None	Public Chanty	movement buil committees, he concessions, ac
Total	4021 Carya Drive, Suite 160	None	Public Charity	the state to cha that address th
	Total	1		

Attachment for Form 990-PF for taxable year ended 6/30/19

# Statement 18 Part XV, Line 3b Grants and Contributions Approved for Future Payment

Name and Address	Donee Relationship	Foundation Status	
Blue Ridge Parkway Foundation, Inc	None	Public Charity	Support the st
717 S Marshall St Suite 105B			ongoing effort
Winston-Salem, NC 27101			outdoors for th
		2 5 1	installation of
de Beaumont Foundation Inc	None	Private Foundation	Support up to
7501 Wisconsin Ave , Suite 1310E			participate in t Health Challen
Bethesda, MD 20814			Local, and Dat
			multi-sector, co
			move resource
			transform heal
Gaston Family Health Services	None	Public Charity	Reduce obesity
200 E Second Ave	rone	Tuone Charty	by engaging re
Gastonia, NC 28052			conditions
,			<u> </u>
Greensboro Housing Coalition, Inc	None	Public Charity	Improve socio
1031 Summit Avenue, Suite 1E-2			to improve hea
Greensboro, NC 27405			community-cei
			Greensboro
Hands-on Northwest North Carolina	None	Public Chanty	Mobilize peop
751 W Fourth Street, Suite 200			community cha
Winston-Salem, NC 27101			training and le
Lincoln Community Health Center, Inc	None	Public Charity	Operate more e Develop capac
1301 Fayetteville Street	INOILE	r done Charity	social determin
Durham, NC 27707			center environi
Bulliani, No 27707			
Medserve	None	Public Charity	General operat
5316 Bennington Drive			pipeline progra
Greensboro, NC 27410			successful tran
NC Child	None	Public Charity	Address persis
3109 Poplarwood Court			and lack of acc
Raleigh, NC 27604			change, and co
No di Contro Consesso of Branch and Trankers	None	Public Charity	Build a strong
North Carolina Congress of Parents and Teachers 3501 Glenwood Ave	None	Fuolic Charity	recommendation
Raleigh, NC 27612			activate parent
Raidign, No 27012			for healthy sch
		1	
North Carolina Institute of Medicine	None	Public Charity	Improve the he
630 Davis Drive, Suite 100	•		Carolinians by
Morrisville, NC 27560			analysis, conve
			building conse
			the health issue
North Carolina Institute of Medicine	None	Public Charity	Support legisla
630 Davis Drive, Suite 100		1	creating and he
Morrisville, NC 27560			fellowship and
			1
North Carolina Partnership for Children, Inc	None	Public Charity	Increase the nu
1100 Wake Forest Rd		1	at a healthy we
Raleigh, NC 27604			three major sta

Attachment for Form 990-PF for taxable year ended 6/30/19

Piedmont Triad Regional Development Corporation	None	Public Charity	Create a mode
1398 Carrollton Crossing Drive			community m
Kernersville, NC 27284			organizations,
			healthy, and re
			county Predmo
			people
Reinvestment Partners	None	Public Charity	Expand the Bu
110 E Geer St			program (now
Durham, NC 27701			and eight new
			patients financ
			food and wrap
·			increased food
The Community Foundation of Western North Carolina, Inc	None	Public Charity	Develop and o
4 Vanderbilt Park Drive, Suite 300	None	r ablic charity	skills of nonpr
Asheville, NC 28803			and cultivate c
Asieville, No 20003			Western North
			W cotem / torm
The North Carolina Albert Schweitzer Fellowship, Inc	None	Public Chanty	Provide fellow
PO Box 1636			graduate level
Davidson, NC 28036		i	integrate a foci
			Fellowship pro
University of North Carolina at Chapel Hill	None	Public Charity	Scale-up and d
104 Airport Dr, Suite 2200			(Nutrition and
Campus Box 1350		]	Child Care) ul
Chapel Hill, NC 27599			care and educa
•			increasing self
University of North Carolina Wilmington	None	Public Charity	Strengthening
601 S College Rd			through works
Wilmington, NC 28403			assistance, and
			efforts for incr
Total			

### Blue Cross and Blue Shield of North Carolina Foundation Attachment to 2018 Form 990PF Part VII-B Question 5

Expenditure Responsibility Statement For the year ending June 30, 2019

Pursuant to Regulation §53.4945-5(d)(2), Blue Cross and Blue Shield of North Carolina Foundation provides the following information with respect to expenditure responsibility grants:

(i) Grantee:

de Beaumont Foundation 7501 Wisconsin Avenue

Bethesda, MD 20814

(ii) Date & Amount Of Grants:

August 13, 2018 - \$155,000 (project The BUILD Health

Challenge)

(iii) Purpose:

The BUILD Health Challenge contributes to the development of a new norm in the U.S., one that puts multi-sector, community-driven partnerships at the center of health in order to reduce health disparities caused by systemic or social inequity. The project supports "bold, upstream, integrated, local, and data-driven" (BUILD) community health interventions in

North Carolina.

(iv) Reports:

Organization submitted final narrative and financial summaries in a report dated 12/06/2019, reflecting proper use of the funds for appropriate charitable purposes under the grant agreement.

(v) Diversions:

To the knowledge of Blue Cross and Blue Shield of North Carolina Foundation and based on the report furnished by de Beaumont Foundation, no funds have been diverted to any activity other than the activity for which the grant was originally

made and all funds have been expended.

(vi) Verification:

Based upon the financial and narrative reports received in (iv) above, sufficient information was received from de Beaumont Foundation disclosing that the organization had complied with

the terms of the grant agreement.

### Blue Cross and Blue Shield of North Carolina Foundation Attachment to 2018 Form 990PF Part VII-B Question 5

Expenditure Responsibility Statement For the year ending June 30, 2019

Pursuant to Regulation §53.4945-5(d)(2), Blue Cross and Blue Shield of North Carolina Foundation provides the following information with respect to expenditure responsibility grants:

(vii) Grantee: de Beaumont Foundation

7501 Wisconsin Avenue Bethesda, MD 20814

(viii) Date & Amount April 9, 2019 - \$300,000 (project The BUILD Health

Of Grants: Challenge 3.0)

(1x) Purpose: This grant supports communities to participate in the third

funding round of the BUILD Health Challenge (BUILD)—a Bold, Upstream, Integrated, Local, and Data-driven initiative

working to catalyze multi-sector, community-driven partnerships, and move resources, attention, and action

upstream to transform health.

(x) Reports: Organization submitted narrative and financial summaries

in a progress report dated 1/31/2020, reflecting proper use of the

funds for appropriate charitable purposes under the grant

agreement.

(xi) Diversions: To the knowledge of Blue Cross and Blue Shield of North

Carolina Foundation and based on the report furnished by de Beaumont Foundation, no funds have been diverted to any activity other than the activity for which the grant was originally

made and all funds have been expended.

(xii) Verification: Based upon the financial and narrative reports received in (iv)

above, sufficient information was received from de Beaumont Foundation disclosing that the organization had complied with

the terms of the grant agreement.

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