SCANNED NOV 2 0 2020

Form **990-PF** Department of the Treasury Internal Revenue Service EXTENDED TO NOVEMBER 16, 2020 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.

orcale	lendar year 2019 or tax year beginning	····	, and ending				
Name	e of foundation			A Employer identification	number		
WEST	STERN UNION FOUNDATION			31-1738614			
Number	er and street (or P O box number if mail is not delivered to street a	ddress)	Room/suite	B Telephone number			
7001)1 E BELLEVIEW AVENUE		1404	720-332-6606			
City or	or town, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is pe	ending, check here		
-	IVER, CO 80237				<u></u>		
Chec	eck all that apply: Initial return	Initial return of a former	public charity	D 1. Foreign organizations	s, check here		
	Final return	Amended return	•				
	Address change	Name change		Foreign organizations med check here and attach cou	eting the 85% test, mputation		
Chec	eck type of organization X Section 501(c)(3) ex		03	 E If private foundation stat	tue was terminated		
_		Other taxable private foundation	05	under section 507(b)(1)			
Fair n	market value of all assets at end of year J Accounti	ng method: X Cash	Accrual	F If the foundation is in a l			
(from	· I —	her (specify)		under section 507(b)(1)			
▶ \$		nn (d), must be on cash basis.)		'"'	. ,,		
Part	t Analysis of Revenue and Expenses	(a) Revenue and (b) Net investment	(c) Adjusted net	(d) Disbursements		
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	ілсоте	income	for charitable purposes (cash basis only)		
1	1 Contributions, gifts, grants, etc., received	5,700,577. _{[4:04-3}		' pullbrine , joe - 1800			
2	2 Check If the foundation is not required to attach Sch. B						
3	Interest on savings and temporary cash investments	69,961.	69,961.	69,961.	STATEMENT 1		
4							
5	5a Gross rents						
	b Net rontal income or (loss)	RECEIVE	FD ** '@'	44 y W	7 . "		
6	62 Net gain or (loss) from sale of assets not on like 10	112000	טר	1 11 2 99	N 1 14 14 14 14 14 14 14 14 14 14 14 14 1		
<u>a</u>	Gross sales price for all b assets on line 6a	(n)					
Revenue 2	7 Capital gain net income (from Part IV, line 2)		029 ω \circ .				
8 8		9	<u> </u>	0.			
9		OGDEN.	TIT				
1 -	Gross sales less returns 0a and allowances	OGDLIV,					
י ו	b Less Cost of goods sold	i princi ti ti i		official and the	ton and the state of the state		
	c Gross profit or (loss)	, , , , , , , , , , , , , , , , , , ,			_		
11		2,848.	0.	2,848.	STATEMENT 2		
12		5,773,386.	69,961.	72,809.			
13		296,192.	0.	0.	296,192		
14		443,769.	0,	0.	443,769		
15		105,833.	0.	0.	105,833		
0 10	6a Legal fees						
Ú)	b Accounting fees STMT 3	30,500.	3,050.	3,050.	27,450		
	c Other professional fees STMT 4	308,765.	0.	0.	308,765		
ப் 9 17	V Cinci protocolonar topo						
# 18		-					
Administrative Ex 15 05 61 81 12					·		
ie 20	·				·· <u>·</u>		
된 20 21		20,207.	0.	0.	20,207		
D 22							
@	_	218,805.	0.	0.	218,805		
50 23 24	o cind expendes	, 2,		<u> </u>			
Operating 52	expenses. Add lines 13 through 23	1,424,071.	3,050.	3,050.	1,421,021		
Ö 25	·	4,006,107.	-,	-,,,,,,,,	4,006,107		
20		=,,,			-,200,20,		
26	• • • • • • • • • • • • • • • • • • • •	5,430,178.	3,050.	3,050.	5,427,128		
-	Add lines 24 and 25	3,430,170.	3,030.	3,030.	5,427,120		
	7 Subtract line 26 from line 12:	343,208.					
	a Excess of revenue over expenses and disbursements	343,200.	66,911.				
	b Net investment income (if negative, enter -0-)		00,311.	69,759.			
	c Adjusted net income (if negative, enter -0-) 12-17-19 LHA For Paperwork Reduction Act Notice			L 03,733.	Form 990-PF (2019		

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1	Total net assets or fund balances at beginning of year - Part II, column (a), line 29		T	
	(must agree with end-of-year figure reported on prior year's return)		1	 3,459,629.
2	Enter amount from Part I, line 27a		2	343,208.
3	Other increases not included in line 2 (itemize)		3	0.
4	Add lines 1, 2, and 3		4	 3,802,837.
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 29		6	3,802,837.
	<u> </u>			

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Part I	V Capital Gains a	and Lo	sses for Tax on In	vestment	Income						
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)						(b) D	How ac - Purch - Dona	quired nase tion	(c) Date a (mo , da	icquired ly, yr.)	(d) Date sold (mo., day, yr.)
1a											
b	NON	E	<u>-</u>								
						<u> </u>					
_d	·		_ · _	, , , , , , , , , , , , , , , , , , , 		ļ					
<u>e</u>						Ц,					
(€	(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale							in or (loss) (f) minus (
<u>a</u>						\dashv				 	
<u>b</u>											
<u> </u>											
<u>d</u>											
Comi	olete only for assets showing	o gain in	column (h) and owned by t	l he foundation	on 12/31/69.			(1)	Gains (Co	ol. (h) gain	minus
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69. (j) Adjusted basis (k) Excess of col. (i)						(k), but n	ot less thar	1 -0-) or			
	FMV as of 12/31/69	· ·	as of 12/31/69		col (j), if any				Losses (from col. (h))
<u>a</u>											
<u>b</u>						_					
d d											
<u>е</u>											
	I gain net income or (net ca	nıtal loss	If gain, also enter If (loss), enter -0-	in Part I, line	7	}	2				
•	,				•	7					
If gain	ort-term capital gain or (los , also enter in Part I, line 8, s), enter -0- in Part I, line 8		ined in sections 1222(5) and c)	a (b):		}	3				
Part V	Qualification U	nder S	ection 4940(e) for	Reduced	Tax on Net I	nve	stme	nt Inco	me		
(For ontio	nal use by domestic orivate	foundate	ons subject to the section 4	940(a) tax on	net investment inc	come	.)			 	
•			•	(/		•	,				
If section	4940(d)(2) applies, leave th	iis part bl	ank.								
			tax on the distributable ame		•	od?					Yes X No
			mn for each year; see the in			tries.					
Calend	(a) Base period years ar year (or tax year beginnin	ıg IN)	(b) Adjusted qualifying dist	tributions	Net value of no	(c) nchar		ise assets		Distrib col. (b) div	(d) ution ratio ided by col. (c))
	2018		5,	,728,223.			3,	390,168			1.689658
	2017		5,	763,288.			2,	492,079	•		2.312643
	2016		6,	,625,117.			2,	688,129			2.464583
	2015		6,	,288,306.			2,	651,013			2.372039
	2014		8,	,508,523.			3,	250,280			2.617782
2 Total	of line 1, column (d)								2		11.456705
-			se period - divide the total o	on line 2 by 5.0), or by the numbe	r of y	ears/				
the fo	ındatıon has been ın existen	ice if less	than 5 years						3		2,291341
4 Enter 1	he net value of noncharitabl	le-use as:	sets for 2019 from Part X, I	ıne 5					4		3,180,153.
5 Multip	ly line 4 by line 3								5		7,286,815.
·											
6 Enter	1% of net investment incom	e (1% of	Part I, line 27b)						6		669.
7 Add lir	nes 5 and 6								7		7,287,484.
	qualifying distributions from								8		5,427,128.
	8 is equal to or greater than e Part VI instructions.	line 7, ch	neck the box in Part VI, line	1b, and comp	lete that part using	g a 19	% tax ra	te.	_		

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	rt VI Excise Tax Based on Investment Income (Section 4940			<u> 48 -</u>	see instru	uction	<u>s)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and en	nter "N/A" on lin	ie 1.				1
	Date of ruling or determination letter: (attach copy of letter if nec	essary-see ins	tructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	▶ 🔲 and ent	ter 1% , 🕨 📗	_1_		1	,338.
	of Part I, line 27b						- 1
C	All other domestic foundations enter 2% of line $27b$. Exempt foreign organizations, enter 4%	of Part I, line	12, col. (b) ノ				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; oth	ners, enter -0-)		2			0.
3	Add lines 1 and 2			3		1	,338.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; ot	thers, enter -0-)		4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5		1	,338.
6	Credits/Payments*						•
а	2019 estimated tax payments and 2018 overpayment credited to 2019	6a	0.				
b	Exempt foreign organizations - tax withheld at source	6b	0.				1
C	Tax paid with application for extension of time to file (Form 8868)	6c	1,350.				1
d	Backup withholding erroneously withheld	6d	0.				
7	Total credits and payments. Add lines 6a through 6d			7		1	,350.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	ched		8			0.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		▶	9			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		. ▶	10			12.
11	Enter the amount of line 10 to be: Credited to 2020 estimated tax		12. Refunded ▶	11	ļ		0.
Pa	rt VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or did it p	articipate or intervene	n		Yes	No
	any political campaign?				<u>1a</u>		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	ses? See the ins	structions for the definit	tion	1b		х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies o	of any materials	published or				
	distributed by the foundation in connection with the activities.				<u> </u>	_	
C	Did the foundation file Form 1120-POL for this year?				<u>1c</u>		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the						1 1
	(1) On the foundation. > \$ (2) On foundation managers.	.▶ \$	0.				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expendit	ture tax impose	d on foundation				
	managers > \$0.					-	
2	Has the foundation engaged in any activities that have not previously been reported to the IR	RS?			2	┷	Х
	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 in	nstrument, artıc	les of incorporation, or			_	
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				_3_		х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	?			4a	 	х
b	If "Yes," has it filed a tax return on Form 990-T for this year?			N,	/A 4b	┿	<u> </u>
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5	—	X
	If "Yes," attach the statement required by General Instruction T					Į	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	her:					
	By language in the governing instrument, or					•	
	 By state legislation that effectively amends the governing instrument so that no mandatory 	directions that	conflict with the state	law		_	
	remain in the governing instrument?				6	Х	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," compl	lete Part II, col.	(c), and Part XV		7	Х	
		_	_		ľ		
8a	Enter the states to which the foundation reports or with which it is registered. See instruction	ns. 🕨	SEE STATEMENT 6				
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the At	torney General	(or designate)			- 	
	of each state as required by General Instruction G? If "No," attach explanation				8b	X	 ,
	Is the foundation claiming status as a private operating foundation within the meaning of sec		or 4942(j)(5) for calen	dar			ļJ
	year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," comp				9	<u> </u>	
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedule	e listing their name	es and addresses		10		X
					Form 99	ルートト	(2019)

Pa	art VII-A Statements Regarding Activities (continued)			
		,	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
•	section 512(b)(13)? If "Yes," attach schedule. See instructions	11	х	
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			·····
-	If "Yes," attach statement. See instructions	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	х	
	Website address Www.Westernunionfoundation.com		•	
14	720 222	6606		
	Located at ▶ 7001 E BELLEVIEW AVENUE, DENVER, CO ZIP+4 ▶80.			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			$\overline{\Box}$
	and enter the amount of tax-exempt interest received or accrued during the year	N,	/A	
16			Yes	No
	securities, or other financial account in a foreign country?	16	х	•
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country SEE STATEMENT 7			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	•		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . X Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		Х
	Organizations relying on a current notice regarding disaster assistance, check here	1		1
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2019?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines	ĺ.,		
	6d and 6e) for tax year(s) beginning before 2019?			
	If "Yes," list the years 🛌 ,,,,,,,,			1
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.			
	>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation or disqualified persons after			
	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Form 4720,			
	Schedule C, to determine if the foundation had excess business holdings in 2019.)	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			لــــا
	had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		X (0040)
	Fo	rm 99 0	・・トト	(2019)

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be R	equired _{(contin}	ued)		
5a During the year, did the foundation pay or incur any amount to				Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (sect	ion 4945(e))?	Y	es X No		ľ [
(2) Influence the outcome of any specific public election (see section 4955)	, or to carry on, directly or indire	ectly,		ľ	
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purpos	es?	Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	ion described in section				
4945(d)(4)(A)? See instructions		X Y	es L No		
(5) Provide for any purpose other than religious, charitable, scientific, literal	ry, or educational purposes, or f				
the prevention of cruelty to children or animals?		Y	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify to	under the exceptions described i	n Regulations	-		
section 53.4945 or in a current notice regarding disaster assistance? See ins	tructions			5b	X
Organizations relying on a current notice regarding disaster assistance, chec	k here		▶□		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption	from the tax because it maintain				
expenditure responsibility for the grant?		×Υ	es L No		
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, t	o pay premiums on				
a personal benefit contract?		Y∈	es 🗓 No 📙		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	a personal benefit contract?		_	6ь	X
If "Yes" to 6b, file Form 8870					
7a At any time during the tax year, was the foundation a party to a prohibited tax	x shelter transaction?	Y ₀	es X No		╙
b If "Yes," did the foundation receive any proceeds or have any net income attri	butable to the transaction?		N/A	7b	L
8 Is the foundation subject to the section 4960 tax on payment(s) of more than	\$1,000,000 in remuneration or				
excess parachute payment(s) during the year?			s X No		
Part VIII Information About Officers, Directors, Trus	tees, Foundation Mar	nagers, Highly			
Paid Employees, and Contractors					
1 List all officers, directors, trustees, and foundation managers and		(c) Compensation	(d) Contributions to	1-1 Fun	
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Exp account,	ense other
(a) name and accretion	to position	`enter'-0-)'	compensation	allowai	nces
	4				
SEE STATEMENT 9		296,192.	16,828.		<u> </u>
	4				
	_				
<u> </u>		ļ			
	_				
	4				
	_				
	<u> </u>	<u> </u>			
2 Compensation of five highest-paid employees (other than those in		enter "NONE."	(d) Contributions to	4-3 Eur	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred -	(e) Exp account,	
	devoted to position	(0)	compensation	allowai	
ARAH M DAVIS - 7001 E BELLEVIEW	SPECIALIST				
LVE, DENVER, CO 80327	40.00	239,063.	12,625.		0.
AUREN BELL - 7001 E BELLEVIEW AVE,	SR. MANAGER	1			
DENVER, CO 80327	40.00	135,038.	4,998.		<u> </u>
MILY LARSON - 7001 E BELLEVIEW AVE,	EXECUTIVE ADMIN				
DENVER, CO 80327	40.00	99,776.	16,947.		0.
SIA DREWS - 7001 E BELLEVIEW AVE,	MANAGER				
ENVER, CO 80327	40.00	62,234.	8,384.		0.
		•			
		<u> </u>			
Fotal number of other employees paid over \$50,000		,	<u> </u>		0
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Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
·	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	3,228,414.
C	Fair market value of all other assets	1c	168.
d		1d	3,228,582.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	3,228,582.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	48,429.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3,180,153.
6	Minimum investment return. Enter 5% of line 5	6	159,008.
P	art XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations an	d certa	ın
	foreign organizations, check here 🕨 🗓 and do not complete this part.)		
1	Minimum investment return from Part X, time-6	1	
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019 (This does not include the tax from Part VI.)	ll	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line.1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	
P	art 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	5,427,128.
b	Program-related investments - total from Part IX-B	16	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:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3ь	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	5,427,128.
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	5,427,128.
	Note: The amount on line 6 will be used in Part V. column (b) in subsequent years when calculating whether the foundation of	nalifies	for the section

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4940(e) reduction of tax in those years.

Form 990-PF (2019) Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) 1 a If the foundation has received a ruling or determination letter that it is a private operating 03/02/01 foundation, and the ruling is effective for 2019, enter the date of the ruling X 4942(j)(3) or b Check box to indicate whether the foundation is a private operating foundation described in section 4942(1)(5) Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (a) 2019 (b) 2018 (c) 2017 (d) 2016 (e) Total income from Part I or the minimum investment return from Part X for 69,759 68,782 12,486 23 135 174 162. each year listed 59,295 58,465, 19,665 10,613 **b** 85% of line 2a 148,038. c Qualifying distributions from Part XII, 5,427,128 line 4, for each year listed 5,728,223, 5,763,288 6,625,117 23,543,756. d Amounts included in line 2c not used directly for active conduct of 4,711,984 5,283,067 18,967,517. 4,653,197 4,319,269 exempt activities e Qualifying distributions made directly for active conduct of exempt activities 773,931 1,408,954 1,051,304 1,342,050 4,576,239. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: **X** 0. (1) Value of all assets (2) Value of assets qualifying 0. 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 391,683. 106,005 113,005 83,069 89,604 c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 0. 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in 0. section 4942(j)(3)(B)(iii) (3) Largest amount of support from 0. an exempt organization 0. Gross investment income Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2)) NONE b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here [X] if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or email address of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

Form 990-PF (2019)

Page 11

Part XV Supplementary Information	(continued)			
3 Grants and Contributions Paid During the Ye	ar or Approved for Future I	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year				
				;
GRANTS PAID - STATEMENT 12	NONE	SEE STMT 12	SEE STMT 12	
				4,006,107.
	,			
•				
			,	
				4 006 107
Total		ı	▶ 3a	4,006,107.
b Approved for future payment				
NONE				
		İ		
Total			▶ 3b	0.
			F	orm 990-PF (2019)

Page 12

+ V\/I A	Analysis of	Income-Producing	Activities
T XVI-A	Analysis of	Income-Producing	Activities

WESTERN UNION FOUNDATION

Enter gross amounts unless otherwise indicated.	Unrelated t	ousiness income	Exclu	ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) 1 Amount	Related or exempt function income
a					
b			t		
		, .	<u> </u>		
d			† · · · ·		
e	1			-	
1			1		
g Fees and contracts from government agencies				- 	
2 Membership dues and assessments					····
3 Interest on savings and temporary cash			<u> </u>		
investments			14	69,961.	
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:			:		
a Debt-financed property			İ		
b Not debt-financed property					
6 Net rental income or (loss) from personal			 		
property					
7 Other investment income			İ		· · · · · · · · · · · · · · · · · · ·
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:			<u> </u>		
a GAIN(LOSS) ON FOREIGN CURRENCY					
h TRANSLATION	- 				2,848
	_ 				2,030
C	_				
d					
de		0.		69 961.	2 848
e		0.	-	69,961.	
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e)		0.	-	69,961. 13	2,848 72,809
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations	.)		· ·	13	
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations	.)		empt	13	
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities	s to the Accom	plishment of Exe		13	72,809
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities	s to the Accom	plishment of Execution (e) of Part XVI-A		13	72,809
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accom	plishment of Execution (e) of Part XVI-A for such purposes).	contrib	Purposes uted importantly to the accomp	72,809
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accom	plishment of Execution (e) of Part XVI-A for such purposes).	contrib	Purposes uted importantly to the accomp	72,809
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Form **990-PF** (2019)

923621 12-17-19

Form 9	90-PF (2019) WESTERN	UNION FOUNDA	rion			31-17	738614	P	age 13
Part			egarding Tran	sfers to a	nd Transactions a	nd Relation	nships With Nonch	aritable		
		Exempt Organ	izations							
1 D	d the o	rganization directly or indi	rectly engage in any	of the followin	ig with any other organizati	on described in	section 501(c)		Yes	No
(0	ther th	an section 501(c)(3) organ	nizations) or in sectio	n 527, relating	g to political organizations?	•				
a Tr	ansfers	from the reporting found	ation to a noncharita	ble exempt or	ganization of .					
(1) Cast	1						1a(1)	L_	х
(2) Othe	r assets						1a(2)		х
b 0	ther tra	nsactions;								.
(1) Sale:	s of assets to a noncharita	ible exempt organiza	tion				1b(1)		Х
(2) Purc	hases of assets from a no	ncharitable exempt o	organization				1b(2)	<u> </u>	X
(3) Rent	al of facilities, equipment,	or other assets					<u>1b(3)</u>		Х
(4) Rein	nbursement arrangements	i					1b(4)		Х
(5) Loar	is or Ioan guarantees						1b(5)		X
(6) Perfe	ormance of services or me	embership or fundrai	sing solicitatio	ns			1b(6)	ļ	X
	-	of facilities, equipment, ma	- :	· •	· ·			1c		Х
							fair market value of the god		sets,	
					ed less than fair market val	ue in any transad	ction or sharing arrangeme	nt, show in		
	1	d) the value of the goods,			e exempt organization	(4) =				
(a) Line	no	(b) Amount involved	(c) Name o		e exempt organization	(a) Descr	ription of transfers, transactions,	and sharing arr	angeme	nts
			ļ	N/A	 					
								-		
			-							
	_		 							
	_					-				
	_									
	- -					-				
	_ -						·			
	1						<u> </u>			
						ĺ				
			-							
		1								
ın	section	501(c) (other than section	n 501(c)(3)) or in se	-	or more tax-exempt organ	izations describ	ed	Yes	Х] No
<u>b</u> If	"Yes," c	omplete the following sch			(b) Type of organization	T	(c) Description of relat	honohin		
		(a) Name of org	ganization		(b) Type of organization	 	(c) Description of relat	понятір		
		N/A				 				
						 				
						+				
	Linder	r penalties of persury. I declare t	that I have examined this	return including	accompanying schedules and s	tatements, and to ti	he best of my knowledge			
Sign					taxpayer) is based on all informa			May the IRS or return with the	e prepar	er
Here		E Kosco	٤.		8/14/20	EXECU	TIVE DIRECTOR	x Yes		str No
		nature of officer or trustee	 }		Date	Title		Tes res	·	140
		Print/Type preparer's na		Preparer's s		Date	Check If P	TIN		
		,, , , , , , , , , , , , , , , , , , , ,		' ' '	-	1	self- employed			

Form **990-PF** (2019)

P00614618

38-1357951

Paid

Preparer

Use Only

RYAN C. HARRIS

Firm's EIN

Phone no. 303-740-9400

08/14/20

RYAN C. HARRIS

Firm's name PLANTE & MORAN, PLLC

Firm's address ▶ 8181 E TUFTS AVE, SUITE 600

DENVER, CO 80237

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

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

2019

Employer identification number Name of the organization 31-1738614 WESTERN UNION FOUNDATION Organization type (check one) Section: Filers of: Form 990 or 990-EZ 501(c)() (enter number) organization 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** X 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, 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 totaling \$5,000 or more during the year ▶ \$ 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)

Name of organization

Employer identification number

WESTERN	TINTON	FOUNDATIO	n

31-1738614

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	CRA. 96 NO. 16 - 200, VALLE CALI, COLOMBIA	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ANDREA CAPPO 1200 NINETEENTH STREET NW, SUITE 1000 WASHINGTON, DC 20036	\$50,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	ANDREA HERMANN SCHUBERTRING 11 VIENNA, A-1010, ASHMORE AND CARTIER ISLAN	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	BOBBY BAKSHI 330 POTRERO AVE SUNNYVALE, CA 94085	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	BRAD MOULDEN 301 S ROCKRIMMON BLVD DENVER, CO 80919	\$18,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	BRETT HANNATH 3307 HILLVIEW AVE PALO ALTO, CA 94304	\$8,000.	Person X Payroll

Name of organization

Employer identification number

WESTERN UNION FOUNDATION 31-1738614

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	CHRIS MOTLEY FIFTH THIRD CENTER, FOUNTAIN SQUARE CINCINNATI, OH 45202	\$12,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	CHRISTA MARZAN 919 THIRD AVE NEW YORK, NY 10022	\$12,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	COMMUNITY CURRENCY EXCHANGE ASSOCIATION OF IL 9449 S KEDIE AVE STE 424 EVERGREEN PARK, IL 60805	\$150,000.	Person X Payroli
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	CROWE HORWATH 1801 CALIFORNIA STREET DENVER, CO 80202	\$12,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	DAVID DIEZ ONE BNY MELLON CENTER PITTSBURGH, PA 15258-0001	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	DELOITTE 1601 WEWATTA ST. STE 400 DENVER, CO 80202	\$8,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)

923452 11-06-19

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13	ETHAN ROJHANI 1801 CALIFORNIA STREET DENVER, CO 80202	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14	FOUR WINDS INTERACTIVE 1221 BROADWAY DENVER, CO 80203	\$8,005.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15	GARY RICH 12510 E. BELFORD AVE. ENGLEWOOD, CO 80112	\$6,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16	GAVIN HOLLES 550 CALIFORNIA ST. SAN FRANCISCO, CA 94104	\$50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
17	GIROS Y FINANZAS CARRERA 43A NO. 30-25 MEDELLIN, COLOMBIA	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18	HIKMET ERSEK 7001 E BELLEVIEW AVE DENVER, CO 80237	\$3,332,974.	Person X Payroll Noncash (Complete Part II for noncash contributions)

923452 11-06-19

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
19	HOWELL CONSTRUCTION 8085 E, HARVARD AVE DENVER, CO 80231	\$12,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20	HY-VEE 5820 WESTOWN PARKWAY WEST DES MOINES, IA 50266	\$25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
21	1700 PENNSYLVANIA AVE WAHSINGTON DC, DC 20006	\$15,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
22	JACOB PAYNE 950 17TH ST. DENVER, CO 80202	\$12,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
23	JEFF MOTTICE 8959 TYLER BLVD MENTOR, OH 44060	\$12,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
24	JEFFREY CHAMBRELLO 3500 PIEDMONT ROAD, NE ATLANTA, GA 30305	\$18,000.	Person X Payroll

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Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
25	JOAN BALIS 535 ANTON SUITE 100 COSTA MESA, CA 92626	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
26	JOHN MARZANO 8536 CONCORD CENTER DR. DENVER, CO 80112	\$12,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
27	JULIE PEPITONE 950 17TH ST. DENVER, CO 80202	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
28	KERRY AGIASOTIS 7001 E BELLEVIEW AVE DENVER, CO 80237	\$23,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
29	KRISHNA VEERARAGHAVAN 125 BOARD ST. NEWYORK CITY, NY 10004	\$12,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
30	MRISTEN STEHLIK 1331 17TH ST. #808 DENVER, CO 80237	\$12,000.	Person X Payroli

923452 11-06-19

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	<u> </u>
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
31	LAUREN CAVENDER 555 17TH ST. SUITE 205 DENVER, CO 80237	\$8,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
32	MARINA SAMBORSKAYA 2625 AUGUSTINE DRIVE SANTA CLARA, CA 95054	\$16,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
33	MARK WILLIAMS 1900 SIXTEENTH STREET DENVER, CO 80202	\$12,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
34	MARYANNE VASQUEZ 1601 WASHINGTON AVE MIAMI, FL 33139	\$12,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
35	MATTHEW GERSTENBERG 400 CAPTIAL MALL SUITE 3000 SACRAMENTO, CA 95814	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
36	MICHAELA SCHUSTER GEORG-COCH PLATZ2 WIEN, ASHMORE AND CARTIER ISLAN 1018	\$35,000.	Person X Payroll

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Schedule B (Form 990, 990-EZ, or 990-PF) (2019)	Page 2
Name of organization	Employer identification number
WESTERN UNION FOUNDATION	31-1738614

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	
(a) No.	(b) . Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
37	MOLLY DRENNAN 50 S. LASALLE ST. CHICAGO, IL 60606	\$8,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4.	(c) Total contributions	(d) Type of contribution
38	MPHASIS 460 PARK AVE S RM 1101 NEW YORK CITY, NY 10016	\$18,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
39	MT CONSUMER-BASED TRANSACTIONS 7001 E BELLEVIEW AVE DENVER, CO 80237	\$29,468.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
40	NANCY BISONO AV. ABRAHAM LINCOLN #308 SANTO DOMINGO, DOMINICAN REPUBLIC 51000	\$12,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
41	NOEL GREENLAND 2-6 TRAFFORD PLACE KINGSTON, JAMAICA 5	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
42	ODILON ALMEIDA 7001 E BELLEVIEW AVE DENVER, CO 80237	\$60,000.	Person X Payroll

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	ONION TOURDATION	<u></u>	
Part I	Contributors (see instructions) Use duplicate copies of Part I if additiona	I space is needed	
(a) No.	(b) Name, address, and ZiP + 4	(c) Total contributions	(d) Type of contribution
43	PLS GLOBAL ALLIANCE FOR AFRICA ONE SOUTH WACKER DR. 36TH FLOOR CHICAGO, IL 60606	\$30,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
44	7001 E BELLEVIEW AVE DENVER, CO 80237	\$50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
45	ROMAN VACCARI 21 MAIN STREET, COURT PLAZA SOUTH HACKENSACK, NJ 7601	\$12,000.	Person X Payroll
(a) <u>N</u> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
46	ROSS JENKINS 525 VINE STREET UNIT 340 DENVER, CO 27101	\$30,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
47	SCOTT ELDER 7700 E TECHNOLOGY WAY DENVER, CO 80237	\$17,499.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
48	SHERYL TODA 3536 HARDING AVE HONOLULU, HI 96816	\$	Person X Payroll

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Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	I space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
49	500 FRANK W. BURR BLVD TEANECK, NJ 07666	\$30,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
50	7001 E BELLEVIEW AVE DENVER, CO 80237	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
51	STEPHANIE SHERMAN 1400 WEWATTA STREET SUITE 600 DENVER, CO 80202	\$12,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
52	TED DANIELSON 300 EAST TASMAN DRIVE SAN JOSE, CA 94134	\$12,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
53	TODD PINGARO 1400 16TH MALL SUITE 500 DENVER, CO 80202	\$12,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
54	VESTA CORPORATION 5400 MEADOW RD 5TH FL LAKE OSWEGO, OR 97035	\$12,000.	Person X Payroll

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WESTERN	UNION FOUNDATION	3	1-1738614
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional additional copies of Part I if additional copie	onal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
55	WACOM 1455 NW IRVING STREET PORTLAND, OR 97209	\$12,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
56	WESTERN UNION BUSINESS SOLUTIONS 85 BROAD ST., FLOOR 18 NEW YORK, NY 10004	\$106,478.	Person X Payroll
(a) N o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Omnicash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		_	Person Payroll Oncash Complete Part II for noncash contributions)

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Name of organization

Employer identification number

WESTERN UNION FOUNDATION

31-1738614

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if ac	dditional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

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Transferee's name, address, and ZIP + 4

(e) Transfer of gift

Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAV	INGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT 1	
SOURCE	REVE	(A) REVENUE NET I PER BOOKS I		(C) ADJUSTED NET INCOME	
INTEREST INCOME		69,961.	69,961.	69,961.	
TOTAL TO PART I, LINE 3		69,961.	69,961.	69,961.	
FORM 990-PF	OTHER I	NCOME		STATEMENT 2	
DESCRIPTION	•	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
GAIN(LOSS) ON FOREIGN CURRENCE TRANSLATION		2,848.	0.	2,848.	
TOTAL TO FORM 990-PF, PART I	, LINE 11	2,848.	0.	2,848.	
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 3	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	30,500.	3,050	3,050	27,450	
TO FORM 990-PF, PG 1, LN 16B	30,500.	3,050	3,050	27,450.	
FORM 990-PF C	OTHER PROFES	SIONAL FEES		STATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
PROFESSIONAL FEES	308,765.	0	. (308,765.	
TO FORM 990-PF, PG 1, LN 16C	308,765.	0	. (308,765.	
=			= =====================================	= ======	

FORM 990-PF	OTHER E	XPENSES	STATEMENT 5		
DESCRIPTION .	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
EQUIPMENT COSTS	90,730.	0.	0.	90,730.	
TELECOM	4,912.	0.	0.	4,912.	
OFFICE SUPPLIES	402.	0.	0.	402.	
ADVERTISING	116,773.	0.	0.	116,773.	
OTHER	5,486.	0.	0.	5,486.	
DUES AND SUBSCRIPTIONS	60.	0.	0.	60.	
LOGISTICS	442.	0.	0.	442.	
TO FORM 990-PF, PG 1, LN 23	218,805.	0.	0.	218,805.	

FORM 990-PF	LIST OF	STATES	RECEIVING	COPY C	OF RETURN	STATEMENT 6

STATES

 $\verb|AL,AK,AR,CA,CO,CT,FL,GA,HI,IL,KS,KY,ME,MD,MA,MI,MN,MS,NH,NJ,NM,NY,NC,ND,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV,WI,NV,DC \\$

FORM 990-PF	NAME OF FOREIGN COUNTRY IN WHICH	STATEMENT 7
	ORGANIZATION HAS FINANCIAL INTEREST	

NAME OF COUNTRY

ARGENTINA LITHUANIA FORM 990-PF

SCHEDULE OF CONTROLLED ENTITIES
PART VII-A, LINE 11

STATEMENT 8

NAME OF CONTROLLED ENTITY

EMPLOYER ID NO

FUNDACION WESTERN UNION ARGENTINA

ADDRESS

EXCESS BUSINESS HOLDING [] YES [X] NO

1111 18TH FLOOR

CABA N/A BS AS 1005, ARGENTINA

NAME OF CONTROLLED ENTITY

EMPLOYER ID NO

WESTERN UNION FOUNDATION LITHUANIA'

ADDRESS

EXCESS BUSINESS HOLDING [] YES [X] NO

J. BALCIKONIO G. 3 VILNIUS, LITHUANIA

	ST OF OFFICERS, DIRECT FOUNDATION MANAGER		STAT	EMENT 9
NAME AND ADDRESS	TITLE AND CO		EMPLOYEE BEN PLAN CONTRIB	
JACQUELINE MOLNAR 7001 E BELLEVIEW AVENUE, SUITE 1404 DENVER, CO 80237	CHAIRMAN OF THE BO		0.	0.
JEAN CLAUDE FARAH 7001 E BELLEVIEW AVENUE, SUITE 1404 DENVER, CO 80237	BOARD MEMBER	0.	0.	0.
ANNE-MARIE FORTIER 7001 E BELLEVIEW AVENUE, SUITE 1404 DENVER, CO 80237	BOARD MEMBER	0.	0.	O.
AMINTORE SCHENKEL 7001 E BELLEVIEW AVENUE, SUITE 1404 DENVER, CO 80237	TREASURER	0.	0.	0.
KAREN WOLF 7001 E BELLEVIEW AVENUE, SUITE 1404 DENVER, CO 80237	TREASURER	0.	0.	0.
ERNESTO BOADA 7001 E BELLEVIEW AVENUE, SUITE 1404 DENVER, CO 80237	BOARD MEMBER	0.	· 0.	0.
SOBIA RAHMAN 7001 E BELLEVIEW AVENUE, SUITE 1404 DENVER, CO 80237	BOARD MEMBER	0.	0.	0.
SOHINI RAJOLA 7001 E BELLEVIEW AVENUE, SUITE 1404 DENVER, CO 80237	BOARD MEMBER	0.	0.	0.

WESTERN UNION FOUNDATION			31-17	38614
TYLER MCPHERSON-WILMAN 7001 E BELLEVIEW AVENUE, SUIT: 1404 DENVER, CO 80237	BOARD MEMBER E 1.00	0.	0.	0.
IGNACIO VIDELA 7001 E BELLEVIEW AVENUE, SUIT 1404 DENVER, CO 80237	BOARD MEMBER E	0.	0.	0.
RICHARD WILLIAMS 7001 E BELLEVIEW AVENUE, SUITS 1404 DENVER, CO 80237	BOARD MEMBER E 2.00	0.	0.	0.
ELIZABETH ROSCOE 7001 E BELLEVIEW AVENUE, SUITI 1404 DENVER, CO 80237	EXECUTIVE DIRECTOR E 40.00	296,192.	16,828.	0.
TOTALS INCLUDED ON 990-PF, PAGE	GE 6, PART VIII	296,192.	16,828.	0.

FORM 990-PF

SUMMARY OF DIRECT CHARITABLE ACTIVITIES

STATEMENT 10

ACTIVITY ONE

WESTERN UNION FOUNDATION, A CHARITABLE CORPORATION, WAS INCORPORATED IN THE STATE OF COLORADO ON JULY 20, 1999 AS A PHILANTHROPIC ORGANIZATION TO FACILITATE CHARITABLE GIVING PROGRAMS WORLDWIDE. THROUGH THE DONATIONS OF THE WESTERN UNION COMPANY (WESTERN UNION), ITS EMPLOYEES, AGENTS, VENDORS, BUSINESS UNITS, CUSTOMERS, AND OTHER BUSINESS PARTNERS, WESTERN UNION FOUNDATION AND SUBSIDIARIES SUPPORT TRAINING, EDUCATION AND DISASTER RELIEF EFFORTS AS PATHWAYS TOWARD ECONOMIC OPPORTUNITY AND A BETTER FUTURE. SINCE THEIR INCEPTION, WESTERN UNION FOUNDATION HAS COMMITTED MORE THAN \$125 MILLION IN GRANTS AND OTHER GIVING TO NONGOVERNMENTAL ORGANIZATION IN MORE THAN 175 COUNTRIES AND TERRITORIES.

EXPE	NSES
	1,421,021.

TO FORM 990-PF, PART IX-A, LINE 1