2012 ANNUAL REPORT

ENDOWMENT for Health

Improving the Health of New Hampshire’s People
**Our Mission**

To improve the health and reduce the burden of illness for the people of New Hampshire - especially the vulnerable and underserved.

An understanding of our mission begins by understanding the meaning of “health.” The term is best defined by the World Health Organization: Health is a state of complete physical, mental, and social well-being, not merely the absence of disease or infirmity.

This definition acknowledges that health care is an important factor in achieving health but is not the same as health.

While we are concerned about the health of individuals, our primary focus is to encourage improvements in health and health care systems that will benefit the vulnerable and underserved populations of New Hampshire.

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As you read of the Endowment’s many accomplishments in this report, it’s worth noting that 2012 was a year of transition, a fact that makes those accomplishments doubly remarkable. The business of searching for a new leader is all-encompassing, and the 2012 transition also included a significant reduction in staff due to retirements and new job opportunities for past colleagues—yet the Endowment staff never missed a beat.

From an institutional standpoint, the highlight of the year was certainly the arrival of Steve Rowe as our new president. His experience as a policymaker and attorney general in a neighboring state is only part of what led to his selection. At least equally important were his passion for protecting vulnerable populations and his record of creating equitable health and social policies.

We began with a solid succession plan and a strong Search Committee comprising Board, Advisory Council, and staff members. We also were fortunate to have incredibly good candidates, a blessing that made our task both easy and difficult. I especially thank Search Committee Chair Sue Chollet for her dedicated efforts.

The tireless and endlessly devoted Mary Kaplan also played an essential role in the transition, sharing her knowledge with Steve while acting as the glue that held everything together. Her deep knowledge about philanthropy and her extensive network of contacts in New Hampshire and nationally are invaluable.

I am equally impressed with the Endowment’s Board and Advisory Council. Both groups have traditionally been populated with outstanding people from all areas of the state and all walks of life. Our newest Board and Council members are no exception.

For me, it has been a rewarding and immensely enlightening two years as Chairman. Now, Sandy Pelletier has taken up the gavel – another example of a smooth transition, and another influence that will continue to improve and strengthen the Endowment.

*Cordell Johnston*

Chairman of the Board, 2012
The Endowment’s 2012 Annual Report provides a perfect opportunity to look back on a job well done, as well as to look forward to new challenges and opportunities. The Endowment is a remarkable organization because of its mission, its values and the extraordinary commitment of its Board, Advisory Council, staff and community partners. The organization’s past is one of tremendous accomplishment and pride.

Good health is essential for the realization of human potential. It’s also essential for a strong economy. During 2012, the Endowment deployed its human and financial resources to make systemic improvements in a number of important health areas, including advancing health equity and improving children’s mental health. We didn’t work alone, however. Great credit is due our grantees and other community partners. Success was only achieved through teamwork.

As the Endowment moves forward, we’ll continue to seek opportunities to leverage our resources and maximize the impact of our work. This will involve analyzing health challenges and opportunities presented by the state’s changing demographics, setting new organizational goals and objectives, and developing effective strategies to achieve them. These actions will be part of the strategic planning process that will occur in 2013.

In developing the roadmap for the Endowment’s future, we will be guided by the knowledge that improving New Hampshire’s health, especially for vulnerable and underserved populations, requires more than increased health care. It also requires a focus on the social determinants of health, the circumstances in which people are born, grow, live, work, and age.

I am appreciative and honored to serve as the Endowment’s new president. Personally and professionally, I have been fortunate to have had the advice and assistance of former Interim President Mary Vallier-Kaplan over the past few months. With her brilliant mind and guiding hands, Mary has made enormous contributions to the Endowment and to improving health outcomes in New Hampshire over the past twelve years. She deserves our utmost congratulations and thanks.

As you read this report, I hope you will share in our sense of pride in the Endowment and its past accomplishments. I hope you will also share in our continued resolve “to improve the health and reduce the burden of illness for the people of New Hampshire – especially the vulnerable and underserved.”

Steven Rowe
President
To know me is to understand how integrated my professional and personal worlds have always been. I mean, always. Around the age of five, I marched into my aunt’s hospital room in my “play” nurse’s uniform (cape and all) to take care of her. I totally believed that everyone thought I was the real thing! Eventually, I trained to be a nurse for real, but quickly left clinical care. Instead, I became aware of the importance of community health, having spent time as an undergraduate studying the health dynamics in the company-owned mill town of Burlington, North Carolina. I then spent my early working years as a public health nurse on the streets and in the projects of Roxbury, Massachusetts and later as an executive director at a Detroit community health center. Health leaders now know that health is determined by where people live, work, play, and learn. I guess I always inherently knew it.

My graduate education at the University of Michigan School of Public Health allowed me to learn from the sages of Medicaid and Medicare, as well as from early pioneers shaping quality initiatives and innovative models for national health insurance in the U.S. All the while, I continued to solidify my core belief in the basic right of all people to have good health. I still feel that deeply and have plenty more energy to keep working toward the achievement of this basic right.

I am fortunate to have worked in just about every setting within the multi-dimensional health system, including teaching and community-based hospitals, the health-insurance industry, in government-led public health settings, school health departments, community health centers, HMO’s, and home and hospice care. So you see, the little girl’s nursing costume has evolved into a lifetime uniform; a garment of sincere avocation.

Creating the Endowment for Health

In 2001, I was tapped by my longtime friend, Dr. James Squires, to join him in starting New Hampshire’s new statewide health foundation. We didn’t realize we were joining a national cohort of new health philanthropies and were to become part of an emerging field dedicated to investing in health improvement. How hard could it be, we wondered, to write checks from someone else’s bank account to help people do good things? In hindsight, this was more than a little naive. But we were soon joined by an amazing group of colleagues and community partners and learned many lessons together that will be sustained by many.

Sustainable Systems Change vs. Paying for Direct Services

Most people thought that the Endowment for Health was going to be a new source of revenue to fund the never-ending payment gaps in health care services - especially for the uninsured in New Hampshire. Quickly we learned that our annual grant payout was less than a rounding error in the
Medicaid budget. Our limited resources made it necessary to focus and be strategic. The Endowment is not a charity that pays for the immediate need of an individual, nor is it a substitute for the long-term financial responsibilities of state government. However, as a private foundation, we saw we could uniquely invest in long-term system change to address the root causes of health problems.

**Knowledge, Leadership, Collaboration and Supporting the Safety Net**

The Endowment for Health has been part of a whole new generation of philanthropy. Together with other funders, we brought some unique ingredients needed to improve systems. Foundations have the resources to invest in knowledge – understanding the root causes of the problem, quantifying them, accessing expertise and best practices, evaluating outcomes and networking with others who are working on the same problem. We can also use our independent voice to share and disseminate knowledge in the public arena without having a partisan agenda. Unlike most nonprofits, foundations also have the resources to nourish emerging and current leaders as well as to support convening opportunities and to help foster collaboration. It’s about providing a safe space for differing perspectives as they search for the best approach to serve the common good. Additionally, we can move quickly to provide resources that respond to unexpected needs and sudden opportunities.

**Turning the Titanic While Keeping Ourselves Afloat**

The United States is positioned, and somewhat driven, by a crisis. It must turn the Titanic of the medical industrial complex toward achieving health for all people. It must move away from the notion of just medical care and focus more on the social determinants of health. It must move upstream whenever possible. As a philanthropy, I am confident that the Endowment for Health will continue to set the example, using its funds and voice to advance this concept, while helping others to do the same. In the process, the foundation will no doubt continue to take risks and support others who take risks to achieve this goal.

Nonetheless, the Endowment must keep itself financially afloat during this long period of economic recovery. The foundation is required to spend five percent of its assets each year in a time when it is difficult to responsibly earn that amount in the market. We must carefully use our funds to address problems while sustaining our assets so others can continue to play this important role in the future.

**An Exciting New Chapter For the Endowment and For Me**

As I retire from the foundation, I thank you all for your partnership. Now is the time to make space for new ideas – for both the organization and for myself. My commitment to supporting the health of all people will continue in new and yet-to-be-discovered ways. This is not goodbye, but rather, ‘see you later.’ As the foundation moves onward, it seems fitting to offer this most ancient of sentiments: The spirit within me honors the spirit within you – Namaste.

*Mary Vallier-Kaplan*
Interim President / Vice President, 2012
Pediatric mental health disorders are more common than many realize. In New Hampshire, that number is an estimated 56,000 kids—one in five between the ages of five and 19. Unfortunately, most children in need of care do not receive it. The Endowment for Health works with various providers, family organizations, advocates, and child-serving systems to improve access through the creation of a unified system of care. We also work collectively to create the public and political will for system and policy change. Alongside others, the Endowment is working to enhance the efficacy, coordination and capacity of the children’s mental health systems, with a focus on early intervention and the use of research-based practices.

Creating an Integrated System of Care

Socio-emotional wellbeing is key to the future success of any child. Trauma, whether it be homelessness, family violence or abuse, can derail child development, lower educational attainment, and impact overall health, including mental health. The Endowment has funded projects to address the needs of children exposed to trauma through integrated behavioral health models, such as therapeutic childcare centers. Selecting and training care providers, educators and advocates to recognize trauma symptoms is a key piece of the puzzle, as is access to mental health treatment and consultation.
National research shows that the majority of youth in the juvenile justice system meet the criteria for at least one diagnosable mental health disorder. Studies also indicate that the prevalence of mental health and substance use disorders increase as youth are processed more deeply into the juvenile justice system. The Endowment for Health funded the Youth Law Project which provides civil legal advocacy to help kids get needed services and keep them in the community. Legal advocates are also effective in breaking down systemic barriers. They can help shape better policies within settings that serve and educate kids.

**Implementation of Research-Based Interventions**

The Endowment works to promote the use of research-based interventions for children and youth with emotional and behavioral disabilities. Through a number of initiatives, the Endowment has enhanced the workforce capacity of the public children’s mental health delivery systems. Rehabilitation for Empowerment, Natural Supports, Education and Work (RENEW) is one such intervention proven to improve high school completion, employment opportunities, and participation in higher education.
Advancing Health Equity

“To advance health equity we must all better understand what causes differences in health status and work together to undo the reasons these differences persist.”

New Hampshire is one of the healthiest states in the nation, but not everyone in New Hampshire has a fair opportunity to achieve their best possible health. Through our investments the Endowment is focusing attention and resources to advance health equity. We believe that reducing health disparities will improve overall community health. To advance health equity we must all better understand what causes differences in health status and work together to undo the reasons these differences persist. Working with the NH Health and Equity Partnership and other community partners, the Endowment is challenging everyone to make equity a priority.

Welcoming, Including and Integrating Newcomers

Our health is determined by much more than our health care – it’s determined by where and how we live, learn, work and play. Newcomer populations and minorities must feel welcomed, included and integrated in our communities. Done well, immigrant integration is a two-way process that enriches all of us and creates stronger, more vibrant communities. New Hampshire’s first-ever Immigrant Integration Conference in April 2012 provided opportunities for learning and idea exchange across sectors with folks who are working to make our state more welcoming for all.

Photo courtesy of FieldWork Photos
Creating a More Diverse Workforce

As our state’s population becomes more diverse, our health-care workforce must better reflect this change in demographics to ensure high quality, culturally effective care. Through major funding from Partners Investing in Nursing’s Future, a national initiative funded by the Robert Wood Johnson Foundation and the Northwest Health Foundation, and matched by local funders, the NH Nursing Diversity Pipeline Project named Fely Matillano, RN, our state’s first “Future of Nursing” Scholar. A critical care nurse at Concord Hospital, Nurse Matillano completed a master’s degree in nursing and is now teaching future nurses including those from diverse backgrounds.

Building Awareness and Addressing Policy to Advance Health Equity

Improving access to health care and ensuring culturally effective staff are critical steps toward addressing disparities, but achieving health equity will take even more. Capturing demographic data helps health-care teams assess how specific patient populations are treated and the outcomes they experience. Collecting and reviewing racial, ethnic and language data in health-care settings helps providers identify where improvements can be made to deliver the right care at the right time. Good data is an essential tool to better care for patients and improving overall community health.
Reducing Economic Barriers to Health

“The Endowment for Health continues its work to create a more sustainable, equitable health system in New Hampshire.”

As the nation and the state work toward an improved health-care system, the Endowment for Health continues its work to create a more sustainable, equitable health system in New Hampshire – one that builds on the high-quality care we’ve come to expect, while improving health outcomes, reducing cost and increasing access for our most vulnerable populations.

To achieve these goals, the Endowment’s work has focused on the availability of objective, factual information about important health-care policy and systems issues as well as public discourse and education. The foundation has also invested in the state’s health advocacy organizations which monitor, educate and advocate on key state health issues, especially the implementation of the Affordable Care Act.

*Raising Public Awareness*

The Endowment for Health funded and co-sponsored a series of public discussions based on the screening of a national documentary on innovative health-care models. In partnership with NH Public Television and the NH Citizens Health Initiative, six such screenings and discussions took place all around the state. After the screening of the T.R. Reid documentary, U.S. Health Care: The Good News, a New Hampshire-based panel of experts discussed innovative care models happening right in our own backyard and raised public awareness of key issues facing New Hampshire in its quest for high-quality, affordable care.
As a long-time funder of the NH Citizens Health Initiative, the Endowment in 2012 helped to launch NHCHI to new leadership and a new home at the UNH Institute of Health Policy and Practice. NHCHI has been making steady inroads toward creating a system that leads to better health, better care and lower cost for everyone in New Hampshire. Part of this work centers on innovative primary care models that promote a team approach to primary care with a high level of patient engagement in the management of their own overall health and wellness.

Supporting NH’s Health Advocacy Community

The Endowment for Health holds a strong belief in building the capacity of NH’s health advocacy community that helps to shape more equitable health policy for all New Hampshire people. NH Voices for Health and the NH Citizens Alliance are examples of such pivotal organizations. They conduct advocacy related to important health initiatives including implementation of the Affordable Care Act and expansion of health insurance coverage for low-income people.
Supporting Other Efforts

“There are many other opportunities and needs that the foundation is uniquely positioned to address.”

Beyond the Endowment’s theme work, there are many other opportunities and needs that the foundation is uniquely positioned to address. The Endowment works to enhance the capacity of the state’s health nonprofit and public health systems, responds to urgent and unanticipated short-term needs, funds research on important demographic trends and works to build knowledge of New Hampshire state leaders and policymakers.

Building Knowledge

The Endowment for Health regularly sends state policymakers to national convenings as a way to ensure they stay abreast of all significant trends and best practices. One such example is the health programming offered by the National Conference of State Legislatures. The foundation offers these opportunities annually to policymakers from both sides of the aisle.
In addition to funding research and convening on important health topics, the Endowment for Health is also interested in supporting research that helps the state better understand demographic shifts and trends. All these changes are key to improving the social determinants of health as well as the future economic viability of the state. One such report funded in 2012 was the groundbreaking report, New Hampshire Demographic Trends in the Twenty-First Century by the Carsey Institute’s Lead Demographer Ken Johnson.

Creating Safer, Healthier Neighborhoods

As a prime example of leveraging national funds, the Endowment provided matching dollars to the City of Manchester Roadmaps to Health Community Grant. In partnership with other local funders and the Robert Wood Johnson Foundation, the project will increase resident engagement and the community’s sense of safety by piloting three public schools as community schools. The grant will improve the city’s capacity for providing educational opportunities for residents of all ages, increase linkages to physical and mental health services, and improve access to social services including everything from food and housing resources to care coordination and domestic violence support. The program promotes solutions that make it easier for people to be healthy in their own communities by focusing on specific factors that affect health, such as education, employment, social support, and community safety.
2012 Grants

Mental Health of NH’s Children & their Families

NH’s Early Childhood and Family Mental Health Competencies
Community Bridges
$46,119

The Family Place
Families in Transition
$100,000

New Hampshire Children’s Behavioral Health Collaborative: Creating a unified system of care
Health Strategies of New Hampshire
$14,240

Sustaining the National Alliance on Mental Illness
National Alliance on Mental Illness-New Hampshire
$25,000

New Hampshire Legal Assistance
Youth Law Project
New Hampshire Legal Assistance
$142,968

Advocacy for Autism Treatment and Supports
Opportunities Now
$30,000

Interagency Collaboration: Improving Outcomes for Children with Autism Spectrum Disorders
Southeastern Regional Education Service Center, Inc. (SERESC)
$7,631

Implementation of Core Competencies of Personnel Working in Children’s Behavioral Health in New Hampshire
University of New Hampshire
$65,507

RENEW III: Creating A Sustainable Infrastructure for the Delivery of RENEW to New Hampshire’s Youth
University of New Hampshire
$107,526

Integrated Mental Health at the Tiger Treatment Center
West Central Behavioral Health
$41,770

Economic Barriers to Access

Planning to Improve Health Outcomes for Older Adults
Grafton County Senior Citizens Council, Inc.
$5,000

Health Reform Implementation Support
Health Strategies of New Hampshire
$10,000

Health Reform Knowledge Building
Health Strategies of New Hampshire
$218,688

Manchester Food Hub Planning Project
International Institute of Boston/New Hampshire
$30,597

Assessing NH State Budget

Changes

New Hampshire Center for Public Policy Studies
$35,645

Health Care Access and Affordability
New Hampshire Citizens Alliance
$40,000

A New Hampshire Public Television Special Presentation - NH Health Care: Is There Good News?
New Hampshire Public Broadcasting
$8,905

New Hampshire Voices for Health
New Hampshire Voices for Health
$150,000

NH Public Policy Program
Planned Parenthood of Northern New England
$65,000

Convening Leaders in Aging and Long-Term Care Policy
University of New Hampshire
$4,974

Planning for NH Health Roadmap Process
University of New Hampshire
$13,703

NH Citizen’s Health Initiative
University of New Hampshire
$114,882

Consultation/Negotiation with Managed Care Organizations
White Mountain Community Health Center
$3,500

Geographic Barriers to Access-
Transportation

Community Alliance of Human Services - Volunteer Driver Program
Community Alliance of Human Services
$10,000

Transportation Solutions New Hampshire
Foundation for Healthy Communities
$19,950

Advancing Health Equity

New Hampshire Nursing Diversity Pipeline Project Endowment for Health
$26,802

NH Health & Equity Partnership Foundation for Healthy Communities
$58,923

Immigrant Integration Conference Health Strategies of New Hampshire
$3,000

Laconia New American Integration Initiative Lakes Region Partnership for Public Health, Inc.
$98,078

Validating the Refugee Experience & Promoting Emotional Wellbeing National Alliance on Mental Illness-New Hampshire
$12,600

Building Community Based Leadership and After School Programs for/with Immigrants and Refugees of NH Second Start
$17,700

Non-Theme

The Health Coverage Fellowship Blue Cross Blue Shield of Massachusetts Foundation
$18,000

Summit on Fetal Alcohol Spectrum Disorders: Prenatal to Grave Child & Family Services of New Hampshire
$3,625

Sustaining the Children’s Alliance of NH Children’s Alliance of New Hampshire
$25,000

Roadmaps to Healthy Communities City of Manchester Department of Health
$25,000

Federal Grant Workshop Council on Fund Raising New Hampshire (CONFR)
$2,500

“I Am for the Child” Statewide Outreach Campaign Court Appointed Special Advocates (CASA) of New Hampshire
$25,000

Homelessness Policy Expansion Families in Transition
$16,000

Healthy Eating/Active Living Plan Foundation for Healthy Communities
$50,000

Health Strategies Operating Support Health Strategies of New Hampshire
$3,000

Core Capacity Assessment Tool Assistance Health Strategies of New Hampshire
$4,200

Leadership and Capacity Development Health Strategies of New Hampshire
$27,500

NH BPI Partners Initiative Health Strategies of New Hampshire
$10,000

Collective Impact Institute Lakes Region United Way, Inc.
$5,000

Leadership New Hampshire 20th Anniversary Video Leadership New Hampshire
$5,000

Sustaining Leadership NH Leadership New Hampshire
$10,000

NH CIH (Collaboration to Improve Health) Manchester Community Health Center
$3,250
It's Not the Daily Planet
Any more - Working With the Media to Effectively Get Your Message Out
New Futures
$2,500

Nonprofit Sector Messaging Project Part II
New Hampshire Center for Nonprofits
$5,200

Advocacy Capacity Tool Pilot Project
New Hampshire Center for Nonprofits
$5,507

Sustaining the NH Center for Nonprofits
New Hampshire Center for Nonprofits
$25,000

Creating Nonprofit Advocacy Capacity in NH
New Hampshire Center for Nonprofits
$30,641

Sustaining the NH Center for Public Policy Studies
New Hampshire Center for Public Policy Studies
$25,000

Investing in New Hampshire Communities by Strengthening Nonprofit Advocacy
New Hampshire Charitable Foundation
$50,000

Communications
New Hampshire Fiscal Policy Institute
$8,334

Sustaining the NH Fiscal Policy Institute
New Hampshire Fiscal Policy Institute
$50,000

Sustaining NH Legal Assistance
New Hampshire Legal Assistance
$25,000

Psychology Internship Consortium
New Hampshire Psychological Association Educational Foundation
$36,765

Sustaining NH Public Health Association
New Hampshire Public Health Association
$25,000

Sustaining New Hampshire Public Radio
New Hampshire Public Radio
$25,000

Strengthening Families Summit
NH Children's Trust Fund
$5,000

CAN Prevention—Public Health Education
NH Children's Trust Fund
$5,000

North Country Health Improvement Initiative
North Country Health Consortium
$3,940

Wheelchair Health In Motion
Sunset Hill Educational Institute
$24,250

Sustaining the Institute for Health, Law & Ethics
University of NH School of Law
$25,000

Oral Health Workforce Expansion Initiative
Children's Alliance of New Hampshire
$1,000

Oral Health Forum
New Hampshire Public Health Association
$1,000

New Hampshire Oral Health Coalition
New Hampshire Public Health Association
$25,000

Tamworth Dental Center
Tri County Community Action Program, Inc.
$9,080

University of New England College of Dental Medicine Planning Grant
University of New England
$25,000
Letter from the Treasurer

The Endowment for Health has a responsibility to maximize dollars available for grantmaking while ensuring resources entrusted to it are available to continue its important work tomorrow and in perpetuity. Since its inception, the Endowment has granted more than $36 million to non-profit community partners to improve the health of the people of New Hampshire. Balancing the needs of today while ensuring the Endowment will benefit future generations is challenging in the current environment.

This year the Endowment Board’s Finance Committee implemented policies that provide more predictable and consistent spending year to year. These policies ensure the Endowment’s assets will have impact today, while being protected for future use. The Finance Committee also implemented changes to its IRS reporting methods that allow for a more consistent spending even in down markets.

The Endowment Board’s Investment Committee continues to employ an investment strategy with long-term policy targets to generate returns to support present and future grant making needs. In so doing, the Committee strives to outpace the rate of inflation to preserve and bolster the purchasing power of the assets while minimizing the volatility of returns and improving capital preservation characteristics. We are pleased with the progress to date and will continue to be diligent in portfolio construction and investment manager oversight. While volatility might return to the capital markets in 2013, we are confident that we have the proper investment strategy to achieve the long-term financial goals of the Endowment.

This past year was one of noteworthy events: the U.S. elections, fiscal cliff showdown, health care reform debates, EU solvency questions, and slowing growth in China. Few investors were in the mood for volatility and many shied away from high risk assets to avoid further uncertainty. As the fiscal year drew to a close, however, resolutions of some issues – and perhaps complacency toward others – saw the S&P500 gain 30.2%, led by strong gains in financial and consumer discretionary stocks. Further, investors in small-cap, developed international, and especially emerging markets equities were rewarded handsomely with strong returns and volatility far lower than where that index began the year.

In this environment, the value of the Endowment’s assets rose 15.2% (net of fees and expenses) through the fiscal year-end on September 30, 2012, outperforming its benchmark indices. Since inception, the Endowment’s asset portfolio has grown at a rate of 2.3% ahead of inflation. Total assets were valued at $78.5 million at fiscal year-end.

Our special thanks go to the Investment and Finance Committee members who serve the interests of the public by providing their insight and expertise without compensation.

Marshall Rowe
Treasurer and Chairman of the Investment and Finance Committees

<table>
<thead>
<tr>
<th>INVESTMENT COMMITTEE</th>
<th>FINANCE COMMITTEE MEMBERS</th>
<th>Consultants:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stephen Handley</td>
<td>Randy Foose</td>
<td>William McCarron and Ryan O’Quinn from</td>
</tr>
<tr>
<td>Greg McConahey</td>
<td>Marshall Rowe, Chair</td>
<td>Prime Buchholz and Associates,</td>
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<td>James Oates</td>
<td>Richard Showalter</td>
<td>Portsmouth, New Hampshire</td>
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<td>Marshall Rowe, Chair</td>
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<td>Richard Showalter</td>
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<tr>
<td>John Snow</td>
<td></td>
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<tr>
<td>Rodney Tenney</td>
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ENDOWMENT FOR HEALTH, INC. AND SUBSIDIARY*
CONSOLIDATED STATEMENTS OF FINANCIAL POSITION
As of September 30, 2012 and 2011

*In July 2007, Health Strategies of New Hampshire, Inc. (wholly-owned subsidiary of the Endowment for Health, Inc.) was created in order to conduct initiatives, projects, programs, research and data collection and analysis; independently and with others, to address key issues and public policies that promote the health of New Hampshire residents and the health of their health care system.

### Assets

<table>
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<tr>
<th>2012</th>
<th>2011</th>
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<tbody>
<tr>
<td>Cash and cash equivalents</td>
<td>$248,003</td>
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<tr>
<td>Investments</td>
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<td>Mission investing/program related investments</td>
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<td>Accounts receivable</td>
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<td>Prepaid federal excise tax</td>
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<td>Other prepaid expenses</td>
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<td>Property and equipment, net</td>
<td>3,731</td>
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<td><strong>Total Assets</strong></td>
<td><strong>$78,546,022</strong></td>
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### Liabilities and Net Assets

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<th>2012</th>
<th>2011</th>
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<td>Grants payable</td>
<td>$1,458,219</td>
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<td>Accounts payable and accrued expenses</td>
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<td><strong>Total liabilities</strong></td>
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<td>Unrestricted net assets</td>
<td><strong>77,014,742</strong></td>
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<tr>
<td><strong>Total liabilities and net assets</strong></td>
<td><strong>$78,546,022</strong></td>
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For a full understanding of the Audited Financial Statements, including the notes to the financial statements, visit our website at [http://www.endowmentforhealth.org](http://www.endowmentforhealth.org)
### ENDOWMENT FOR HEALTH, INC. AND SUBSIDIARY
### CONSOLIDATED STATEMENTS OF ACTIVITIES

*For Years Ended September 30, 2012 and 2011*

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
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<tbody>
<tr>
<td><strong>Revenue and investment gains (losses)</strong></td>
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<tr>
<td>Investment income</td>
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<td>Realized gain on investments</td>
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<td>Unrealized gain (loss) on investments</td>
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<td>Grant income</td>
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</tr>
<tr>
<td>Contributions</td>
<td>300</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total Revenue and investment gains (losses)</strong></td>
<td>$10,721,348</td>
<td>($140,378)</td>
</tr>
</tbody>
</table>

| **Program expenses** |          |          |
| Grant expense        | $2,063,621 | $2,165,917 |
| Salaries and benefit expense | 457,789   | 622,942  |
| Professional service expense | 167,535   | 151,384  |
| Program support expense | 47,057    | 36,370   |
| Miscellaneous expense | 3,718     | 3,067    |
| **Total program expenses** | $2,739,720 | $2,979,680 |

| **Management and general expenses** |          |          |
| Salaries and benefit expense        | $330,344  | $343,938  |
| Professional service expense        | 220,592   | 198,105   |
| Building and related expense        | 89,254    | 91,928    |
| Investment management expense       | 78,380    | 114,761   |
| Administrative support expense      | 77,467    | 85,808    |
| Office expense                      | 68,149    | 67,612    |
| Federal excise tax expense          | 45,457    | 95,427    |
| Depreciation expense                | 1,147     | 1,147     |
| **Total management and general expenses** | $910,790   | $998,726  |

**Total Expenses** | $3,650,510 | $3,978,406 |

**Increase (decrease) unrestricted net assets from operations** | $7,070,838 | ($4,118,784) |

**Tax settlement with the Internal Revenue Service** | 0 | $259,789 |

**Increase (decrease) in unrestricted net assets** | $7,070,838 | ($3,858,995) |

**Unrestricted net assets, beginning of the year** | $69,943,904 | $73,802,899 |

**Unrestricted net assets, end of the year** | $77,014,742 | $69,943,904 |

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**ENDOWMENT FOR HEALTH BOARD OF DIRECTORS**

**Public Members**
- Karin Caruso
- Susan Chollet
- Eleanor Dunfee-Freburger
- Eddie Edwards
- Orville “Bud” Fitch
- Randy Foose
- Cordell Johnston, Chairman
- Esteban Lopez
- Caroline McCarley
- Gregory McGonagle
- Cindy Rosenwald
- Marshall Rowe, Treasurer
- Adrienne Rupp

**Non-public Members**
- Margaret Franckhauser, Secretary
- Yvonne Goldsberry
- Sandra Pelletier, Vice Chair
- Richard Showalter, Jr.

**ADVISORY COUNCIL MEMBERS**

**Public Members**
- BELKNAP COUNTY
  - Liz Merry
  - Kate Miller
- CARROLL COUNTY
  - Donna Sargent
  - Frances Strayer
- CHESHIRE COUNTY
  - Martha Bauman
- COOS COUNTY
  - Margaret McClellan
- GRAFTON
  - Laurie Harding
- HILLSBOROUGH COUNTY
  - Cynthia Dokmo
  - Fogia Ijaz
- HILLSBOROUGH COUNTY
  - Ken Bartholomew
  - Keith Harrison
- ROCKINGHAM
  - Sanders Burstein
- STRAFFORD COUNTY
  - Jim Lewis
- COOS COUNTY
  - Ed Shanshala
- HILLSBOROUGH COUNTY
  - Sanders Burstein
- ROCKINGHAM
  - Ann Peters, Chair
- STRAFFORD
  - Jay Couture
- STRAFFORD
  - Linda Howard

**Staff**
- Karen Agee, Director of Communications
- Cheryl Dempsey, Administrative Manager
- Kim Firth, Program Director
- Sue Fulton, Director of Grants Management and Finance
- Kelly Laflamme, Program Director
- Peg LePage, Administrative Assistant
- Steve Rowe, President (8/1/12 to 9/30/12)
- Mary Vallier-Kaplan, Interim President/Interim President/Interim President/Interim President/