4 hospitals
12 Carewest long-term care centres
100s of community programs
1 mission
Calgary Health Trust is inspiring the community to engage in building a healthier future by:

1. Developing World-Class Care
2. Impacting Albertans and their Families
3. Improving the Quality of Life for Those in Our Community

We raise money for health care across Calgary and surrounding areas, connecting our supporters with what matters most to the **1.5M PEOPLE** in the Calgary Zone and the **2.1M PEOPLE** that rely on Calgary’s hospitals for critical and specialized care.

With your generosity, we’ve raised over **$459M** for health care. This year alone, we disbursed **$11.2M** to important initiatives that are taking our health care from good to great.

THANK YOU
The honeycomb is one of the strongest and most efficient structures known to man. In building, its use results in reduced materials, weights and costs. In other words, the honeycomb allows us to do more with less. This perfectly represents both the history and the mandate of Calgary Health Trust which was created over 20 years ago through the visionary amalgamation of six former foundations in order to create a single, more efficient and effective fundraising organization.

CALGARY HEALTH TRUST IS ALL ABOUT CONNECTION. We connect the community with the priorities that will make the biggest impact on the most people through collaboration with our partners in health care. We connect you to see how innovative research and state-of-the-art technology make a difference in the services offered here in Calgary and surrounding areas, and the impact it can make on the world.
Newborns Need campaign

Newborns Need is a transformative approach to newborn health, aiming to create world-class care from preconception through to prenatal and postnatal care, to make a lifetime of difference.

The Newborns Need campaign will develop world-class research, care, education and support for newborns, children and their families – primarily focusing on babies born prematurely and/or with health complications.

The moment your newborn baby is placed in your arms for the very first time is a moment of overwhelming joy. But some babies have to spend their first moments, days, or even months in the Neonatal Intensive Care Unit (NICU).

Imagine a mom not being able to cuddle her newborn because they need to be placed in an incubator, or parents taking the first trip home from the hospital alone because their infant has to stay behind. These babies, and the families excitedly anticipating their safe arrival home, deserve the best possible start for the best possible future.

Nationally, 1 in 10 newborns require NICU care. In Calgary, this number has risen above the national average to 1 in 8. Our goal is to lower these statistics by investing in three critical areas.

CRITICAL WORLD-CLASS FACILITIES

- Redevelopment and expansion of Southern Alberta’s only in-born Level 3 NICU at Foothills Medical Centre where the smallest and sickest babies are cared for.
- Equipment for Labour and Delivery and the Level 2 NICU at Peter Lougheed Centre.
- A Care by Parent Room in the NICU at South Health Campus.
- A Pediatric Emergency Pod at South Health Campus.

ESSENTIAL TRANSFORMATIVE RESEARCH

- Working with partners like Alberta Health Services, University of Calgary and the community (including expectant parents and their clinicians) to impact the future through research and education geared towards reducing NICU admissions.

IMPERATIVE EMPOWERING KNOWLEDGE

- Programs like Postpartum Community Services and Family Integrated Care (FiCare) that help families manage the stress of a difficult time, prepare to take their baby home and reap health benefits for the child that extend into adulthood.

Nationally, 1 in 10 newborns require NICU care. In Calgary, this number has risen above the national average to 1 in 8.
“WE HAVE A **UNIQUE OPPORTUNITY** TO INVEST IN SOMETHING THAT WILL HAVE AN IMPACT FOR 60, 70 OR MAYBE EVEN 80 YEARS. YOU HAVE THE CHANCE TO BE PART OF THAT LEGACY.”

Dr. Chris Eagle, President and CEO, Calgary Health Trust
“Miraculously, he opened his eyes, wrapped his hand around the nurse’s finger... It was so emotional; beautiful and terrifying at the same time,”

Lindsay and Mike McTavish
“YOU HAVE NO IDEA THE NICU WORLD EVEN EXISTS, AND THEN YOUR WHOLE WORLD EXISTS BECAUSE OF THE NICU. IT REALLY CHANGES YOUR PERSPECTIVE ON A LOT OF THINGS.”

Lindsay McTavish, grateful NICU Mom
Critical World-Class Facilities

EXPANDING NEONATAL INTENSIVE CARE AND MATERNITY SERVICES ACROSS CALGARY’S HOSPITALS

WHO BENEFITS: NICUs serve babies born prematurely, and also high-risk situations where newborns may require more care. Foothills Medical Centre is home to Southern Alberta’s only in-born Level III Neonatal Intensive Care Unit, where the smallest and sickest babies are cared for.

WHERE: Primarily Foothills Medical Centre with support for Peter Lougheed Centre and Rockyview General Hospital

WHY: In 2016 and 2017, over 5,700 infants were born and immediately admitted to Calgary’s NICUs from Calgary and across Southern Alberta. Immediate access to world-class neonatal care with the capacity, expertise and technology is required to meet the needs of a growing population.

Each year, Foothills Medical Centre sees about 1,200 Level 3 admissions and is one of the busiest NICUs in Canada. While they have never turned a patient away in over five years, they are operating at maximum capacity. This unit will be completely redesigned and rebuilt to new, exacting standards, expanding its current capacity in the process. The new unit will be a centre of excellence for Calgary, Canada and the world.

Foothills Hospital is home to Southern Alberta’s only in-born Level 3 NICU and cares for the sickest and most fragile newborns, as small as 24 weeks and weighing less than a pound of butter.

PRIORITY

CALBRIDGE HOMES LEADS THE CHARGE

Newborns Need is our opportunity to develop a world-class facility for caring for our smallest and most fragile patients. Currently, Foothills Hospital has the only in-born level III unit, meaning that for pregnancies known to be higher risk or more complicated, mothers can give birth at the hospital where their babies will be cared for. The focus of the new unit will be a family-centred approach, something that is very important to organizations like Calbridge Homes.

Calbridge Homes and Calgary Health Trust have been partners for eight years through the Foothills Hospital Home Lottery and Hospital Home Lottery, working together to build dream homes for hospital supporters to win big. Together, we’ve created even bigger wins, raising millions of dollars for priority projects across Calgary.

“Calbridge has committed $500,000 to the Foothills expansion,” says Bev Higham-Linehan, President and CFO of Calbridge Homes and member for the Newborns Need campaign cabinet.

With a 40 year history, Calbridge Homes was built on a strong family foundation, and family values continue to drive their business today. “As a member of the Calgary community, we are committed to investing in its future generations. This gift is important to Calbridge based on family. We are a family company, we are run by a family and our team is a family. We wanted to give back and help the families that are impacted by the neonatal intensive care unit.”

The contribution has also been made on behalf of Calbridge’s founders and owners – the late Raimondo Ferraro, and his sons Joe and Peter Ferraro. Raimondo Ferraro’s passion for home building first took root as a means to support his growing family following their immigration from Italy in 1959. For the next 19 years, Raimondo worked a variety of jobs until establishing Calbridge Homes in 1978 with his son, Joe Ferraro - the beginning of a life-long passion and bond between father and son.

Generosity of companies, individuals and organizations like Calbridge Homes is helping to make the vision for world-class care and a new unit at Foothills Hospital a reality. There are many bright minds coming together to plan for the new space including medical professionals, Alberta Health Services, researchers and families who have been through the experience to make the neonatal intensive care unit the best it can be.
"WE ARE A FAMILY COMPANY; WE ARE RUN BY A FAMILY AND OUR TEAM IS A FAMILY. WE WANTED TO GIVE BACK AND HELP THE FAMILIES THAT ARE IMPACTED BY THE NEONATAL INTENSIVE CARE UNIT."

Bev Higham-Linehan, President and CFO of Calbridge Homes and cabinet member for the Newborns Need campaign.
From ages 15 to 105, many individuals need the GI clinic whether for care, prevention or routine checkups.

**PRIORITY**

**Gastrointestinal Endoscopy Unit (GI) – Centre of Excellence**

**THE REDEVELOPMENT AND EXPANSION OF AN ENDOSCOPY CLINIC AT RGH WILL IMPROVE ACCESS TO THERAPEUTIC ENDOSCOPY ACROSS CALGARY AND SURROUNDING AREAS.**

**WHO WILL THIS SERVE:** Digestive disorders do not discriminate by age, ethnicity or gender. At some point in your life you will need to access GI care, if not for treatment then for screening or prevention.

**WHERE:** Rockyview General Hospital

**WHY:** Next to lung cancer, colorectal cancer is the second most common cause of cancer deaths in men and the third most common in women. Irritable Bowel Syndrome (IBS) rates in Canada are estimated to be highest in the world, with 5 million people affected by the disease. Inflammatory Bowel Disease (IBD), also on the rise in Canada, has had an alarming increase in prevalence in children under 10 years old.

**LEGACY GIFTS HELP SHAPE THE FUTURE OF HEALTH CARE**

When you go for an annual checkup, you always hope for a positive outcome. But for some people this isn’t always the case. Imagine being the 22-year-old diagnosed with colorectal cancer, the 51-year-old with a family history who learns a polyp was found during their latest colonoscopy, the 74-year-old who struggles to swallow or the 28-year-old diagnosed with Crohn’s Disease. The Rockyview General Hospital GI Endoscopy clinic can help these patients receive timely diagnosis and treatment resulting in the best possible outcomes.

Support for the GI Clinic has been an incredible example of how legacy gifts and greatest needs funding can come together to make a difference in unimaginable ways. This project strives to be the first of its kind! Already rated one of the most efficient GI clinics in Calgary, the innovative 21st century design will enhance efficiency and effectiveness throughout the GI Clinic, the Rockyview General Hospital site and the Calgary Zone.

A major piece of funding for this space has been provided through estates:

- Estate of Florence and Lloyd Cooper
- Estate of Ethel Ross
- Estate of Margaret Louise Brady
- Estate of Steven Blitz

Legacy giving is a way to ensure that the funding is there when it’s needed most, where it is needed the most for things that may not be anticipated even today.

Legacy Donations represent a lifetime of memories. This group of donors includes a Holocaust survivor who spoke 6 languages, a speed skating athlete and an environmental lobbyist. Thanks to their gifts to the GI project, strong legacies will live on and continue to help others in some of their most critical times of need.

Legacy gifts take on many forms, from bequests to endowments they all have one thing in common, the desire to make a difference for many generations to come.
“LEGACY GIVING IS A WAY TO ENSURE THAT THE FUNDING IS THERE WHEN IT’S NEEDED MOST, WHERE IT IS NEEDED THE MOST FOR THINGS THAT MAY NOT BE ANTICIPATED EVEN TODAY.”

— Shahr Savizi, Planned Giving Officer, Calgary Health Trust
A troubling fact is that one in ten Canadians has kidney disease and millions more are at risk. And the majority of people with kidney disease don’t know they have it.

**Hemodialysis Development Project**

**INCREASING THE UNIT BY NINE DIALYSIS STATIONS AND SERVE AN ADDITIONAL 54 HEMODIALYSIS PATIENTS.**

**WHO DOES IT SERVE:** Individuals suffering from kidney failure. When the kidneys no longer work, dialysis is required to remove waste from the blood, restore the proper balance of electrolytes in the blood and eliminate extra fluid from the body.

**WHERE:** Peter Lougheed Centre

**WHY:** Receiving hemodialysis can mean 624 hours a week in treatment, so providing the best care for these patients is incredibly important. The largest increase in demand for hemodialysis is from Calgary’s NE, with a 49% increase in the number of hemodialysis patients who reside in northeast Calgary or immediate areas since 2011. Of all the quadrants, the NE is the fastest growing and has the least number of dialysis stations.

**BRINGING HEMODIALYSIS CARE CLOSER TO HOME**

“Kidney disease is group of conditions that affect kidneys. We have two kidneys and different conditions can affect them including high blood pressure and diabetes. The kidneys become damaged and over many years they can fail,” Dr. Muruve tells us.

Dr. Daniel Muruve is the Medical Director of the Southern Alberta Renal Program and is passionate about providing care to people living with this devastating disease. Calgary’s northeast, where the Peter Lougheed Centre is located, has the highest growing population of people affected by kidney disease, and the space is much needed. Many people in NE Calgary who need dialysis must travel to other centres for their treatment.

Being a hemodialysis patient is a lifelong commitment and that process is considered a life-sustaining therapy for individuals whose kidneys have failed. When you are in treatment, it can be 3 times a week for about 4 hours and equivalent to a part-time job; especially when you consider additional travel time. Because of the length of time spent there, the hemodialysis unit becomes a home away from home for its patients, and staff become like family.

“We want to build a dialysis unit or chronic care centre for people with kidney disease that is part of the 21st century. We don’t simply want to put together a conventional hemodialysis unit we want to figure out how to best care for people with kidney disease not just with dialysis but using other approaches to make life easier.”

A troubling fact is that one in ten Canadians has kidney disease and millions more are at risk. And the majority of people with kidney disease don’t know they have it.

“This can be a devastating disease because there is no cure. It has a huge impact on families, personal relationships and finances.”

While the new unit won’t cure the disease, it will open up space and add privacy to add quality of life for its patients. The unit will also provide two isolation rooms and meeting space for staff, and family for education and private conversations.

“The best thing we can do for kidney disease is be involved, be aware and create a healthy health care system. I encourage everyone to be aware of it and know what it means to have kidney disease,” Dr. Muruve.
"The best thing we can do for kidney disease is be involved, be aware and create a healthy health care system. I encourage everyone to be aware of it and know what it means to have kidney disease."

– Dr. Muruve.
The Bob Glasgow Grief Support Centre has been helping people find hope for more than two decades.

IMPACT

**SUPPORT THROUGH UNSPEAKABLE TRAGEDY**

For a reason that no one ever wants to experience, Ravi and Rajni Bale have made an important contribution to the Grief Support Program. In August 2017, their two children, Rashmi and Ritvik, passed away in a motor vehicle accident.

The Bales came to Canada from India 15 years ago and established a life here as a happy family of four. Ravi and Rajni remember their children as being extremely unique and generous. They were the type of people that signed their organ donor cards immediately and without question when they came here to live, as an act that Ravi thinks was a result of open thinking—keeping the end in mind, even more than generosity.

Their son, Ritvik, was only 20 years old when his life was tragically cut short. “He was always looking out for and caring for others. We had so many beautiful moments spent as a family and our future is cherishing those memories,” Ravi remembers fondly. Ritvik had been accepted into the SAIT auto mechanics program and was to start school that September.

Rashmi, their 24-year-old daughter, had just graduated from law school and planned on a career in human rights. Her incredible generosity continued after succumbing to her injuries in hospital, when the wish she made to become a donor dramatically changed the lives of five individuals and their families, and sight-saving reconstructive surgery will benefit up to six more individuals.

After the accident, Ravi and Rajni attended a six week evening support group for parents who had lost children. Through donor funding, the Grief Support program is able to connect individuals with others who are experiencing loss in similar ways.

Though it will never change their grief, the experience provided them with tools to direct their energy into creating a legacy for their children. “Rajni is learning a new hobby, quilting using the children’s clothes,” explains Ravi. The couple also made a donation to the program in honour of their children to help ensure comfort can be provided to others facing unimaginable loss.

“Our goal is to try to stop [what happened to our children] from happening to anyone else and help others with the resources we have. We have no other ship to sail on, so if there’s any way to keep their name alive we will do it. That will give us the motivation to move forward.”

IMPOR

**Donor Funded Grief Support Program**

**THE BOB GLASGOW GRIEF SUPPORT CENTRE**

**WHO DOES THIS SERVE:** Individuals who have experienced the loss of a loved one, whether it’s a parent, child, spouse or other loved one.

**WHERE:** Richmond Road Diagnostic Centre

**WHY:** The Bob Glasgow Grief Support Centre offers individual and group counseling to those grieving the loss of a loved one. Countless individuals have benefited from the specialized care offered by the counselors, staff, and volunteers at the Grief Support Centre. Donations help fund the library, counselling, grief groups and education facilitated by specialists in grief and bereavement care.
“WHAT GRIEF SUPPORT HELPED US TO UNDERSTAND IS THAT SOCIETY IS A SPECTRUM OF PEOPLE WHEN IT COMES TO DEALING WITH GRIEF.”

- Ravi and Rajni Bale
In supporting Carewest, you are **providing people with the pride and passion** we all need to maintain vibrant and meaningful lives.
COMMUNITY GROUPS WILL BE ENCOURAGED TO VOLUNTEER THEIR TIME IN THE GARDEN, TRULY MAKING PEOPLE LIKE DIANE A MEMBER OF THE GREATER COMMUNITY.
By having community support, projects such as this can come to fruition where it was otherwise not possible. We are very thankful for the support of the community in making this pediatric pod a reality.

WHO DOES THIS SERVE: Being on the outskirts of Calgary, communities surrounding South Health Campus are both attractive and affordable for young families. The increasing number of young families moving to these communities, and the distance to the Alberta Children’s Hospital (approx. 40 km), will result in consistently increasing numbers of pediatric emergency visits over the next several years.

WHERE: South Health Campus

WHY: Pediatric emergency services are in high demand at South Health Campus, accounting for 25 per cent of the daily volumes. As patient volumes and acuity increase for all age groups, it becomes challenging to keep this pediatric care area separate without compromising access to emergency care for other patient groups. On occasion, this has exposed children to non-ideal, adult situations.

25 per cent of emergency visits to South Health Campus are children.

Emergency Space for Kids

EMERGENCY PEDIATRIC POD

WHO DOES THIS SERVE: Being on the outskirts of Calgary, communities surrounding South Health Campus are both attractive and affordable for young families. The increasing number of young families moving to these communities, and the distance to the Alberta Children’s Hospital (approx. 40 km), will result in consistently increasing numbers of pediatric emergency visits over the next several years.

WHERE: South Health Campus

WHY: Pediatric emergency services are in high demand at South Health Campus, accounting for 25 per cent of the daily volumes. As patient volumes and acuity increase for all age groups, it becomes challenging to keep this pediatric care area separate without compromising access to emergency care for other patient groups. On occasion, this has exposed children to non-ideal, adult situations.

PRIORITY

SPECIAL CARE FOR KIDS

Since opening their doors in 2013, South Health Campus has provided pediatric emergency care to thousands of families. There are four dedicated beds in South Health Campus’ emergency room, and though the care each family receives is excellent, the busy space amongst the adults is less than ideal. “We recognized early on that in an ideal state, these pediatric patients would be cared for in a dedicated pediatric space separate from the care of our adult patients. Emergency Departments are loud and chaotic environments that can be frightening to young children,” says Dr. Colin Del Castillo, Facility Medical Director at South Health Campus.

For children who require emergency services, a drive to Alberta Children’s Hospital is approximately 40 km away. The Alberta Children’s Hospital Emergency Department physicians provide 12 hours of coverage within the South Health Campus Emergency Department on a daily basis. In addition, other care providers within the department such as Registered Nurses and Respiratory Therapists have received enhanced pediatric training.

Currently, physicians from the Alberta Children’s Hospital provide coverage daily. What’s missing is the specialized space for children within the unit, which is what the Pediatric Pod is all about.

“The pediatric pod allows us to have kid-friendly rooms that will be warm and welcoming to patients and their families. All rooms will be private and large enough to accompany the entourage that usually travels with a pediatric patient,” Dr. Del Castillo explains. “The addition of space will also allow for decreased wait times as our rate limiting step in assessing patients is often the lack of ability of spaces to see patients. Also, in the current state, we often see an encroachment of the adult ED population into the pediatric space which will not occur in the dedicated pediatric pod.”

“By having community support, projects such as this can come to fruition where it was otherwise not possible. We are very thankful for the support of the community in making this pediatric pod a reality.”

This project is the perfect example of partnerships coming to gether to create something great. The partnership between South Health Campus and Alberta Children’s Hospital creates a seamless example of care for children and their families.
“THE PEDIATRIC POD ALLOWS US TO HAVE KID-FRIENDLY ROOMS THAT WILL BE WARM AND WELCOMING TO PATIENTS AND THEIR FAMILIES.”  

- Dr. Colin Del Castilho, Medical Director at South Health Campus
Financial Summary

Calgary Health Trust has a diverse fundraising portfolio consisting of donations, which include Major Gifts and Bequests, Annual Giving, Tributes and Memorials, and Grateful Patient donations, as well as Special Events, our two Hospital Home Lotteries, Grants and Investment Income. Since being founded in 1996, we have raised $459M for health care in our community.

OUR FUNDRAISING ACTIVITIES AND ADMINISTRATIVE COSTS

Calgary Health Trust is dedicated to ensuring that its operational costs incurred through activities such as accounting, marketing, and data management are as lean and effective as possible. We work hard to ensure that our cost to raise a dollar is benchmarked with like charities throughout Canada.

In FY 2018 our fundraising cost to raise a dollar was 19%.

EVENTS AND LOTTERIES

Our Foothills Hospital Home Lottery and Hospital Home Lottery are programs that have a great return on investment. They are essential to our overall success and make up over 54%, or almost $24.5M, of our total gross fundraising revenue. We continuously evaluate the return on our investment of both of our lottery programs. The expenses of these programs include the purchase of prize, consultant fees and investments in marketing and we make every effort to run our lotteries as efficiently and effectively as possible.

Our events equate to 10% of our total revenue and are comprised largely of community fundraisers and partnership events. One of the most successful partnership events in fiscal 2017/2018 was the Jayman Rockyview Invitational, raising net proceeds of $440k.

REVENUE AND DISBURSEMENT SUMMARY

Last fiscal year (ending March 31, 2018), Calgary Health Trust raised just over $45M in net revenue. Our revenue from donations comprise over 35% of our total revenue for FY 2018. With a generous bequest left to the organization by the Estate of Lloyd and Florence Cooper, the Trust reported just over $14.6M received in Major Gift and Bequest revenue. We received over $2.3M in grant revenue from Alberta Health Services, which was a significant contribution towards our operations, though this will deplete in the upcoming years as the organization strives to be independently operated. As a result, we continue to make investments in our business to grow unrestricted revenues and ensure our long-term success. Calgary Health Trust earned over $1.4M in revenue from investment income for our operating fund.

In FY 2018, the organization disbursed over $11.2M to hospitals, community care and research initiatives. This is a $2M increase from the previous year. Calgary Health Trust is raising money for a number of large capital campaigns in the areas of neonatal health and gastroenterology. Our efforts precede construction on these projects and therefore delay disbursements of revenue in these areas.

We take our accountability of monies raised by Calgary Health Trust very seriously and are held to the highest standards of fundraising practice by our volunteer committees consisting of a Governance Committee and Finance and Audit Committee as well as our Board of Directors.
On May 30, 2018, our independent auditors, Ernst & Young LLP, issued an unqualified audit report on the financial statements of the Calgary Health Trust for the year ended March 31, 2018. The 2017/18 audited financial statements, including the independent auditors’ report thereon, are available on the Calgary Health Trust website (www.calgaryhealthtrust.ca) or by contacting the Calgary Health Trust office at (403) 943-0615.

The following information summarizes the financial position and the operations and changes in fund balances for the Calgary Health Trust for the year ended March 31, 2018.

### Calgary Health Trust

**SUMMARY OF FINANCIAL POSITION**

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<thead>
<tr>
<th></th>
<th>2018</th>
<th>2017</th>
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<tbody>
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<td><strong>ASSETS</strong></td>
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<td>Cash</td>
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<td>Amounts receivable</td>
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<td>Investments – at market</td>
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<td>Other assets</td>
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<td><strong>Total Assets</strong></td>
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<td>121,369,422</td>
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<td><strong>LIABILITIES</strong></td>
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<tr>
<td>Current</td>
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<tr>
<td>Accounts payable &amp; accrued liabilities</td>
<td>1,945,916</td>
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<td>Charitable disbursements payable</td>
<td>3,206,673</td>
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<td>Deferred revenue – lotteries and events</td>
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<td><strong>Total Liabilities</strong></td>
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<td><strong>FUND BALANCES</strong></td>
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<td>Operating Fund</td>
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<td>Endowment Fund</td>
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<tr>
<td>Accumulated remeasurement (losses)/gains</td>
<td>(643,418)</td>
<td>16,377</td>
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<tr>
<td><strong>Total Fund Balances</strong></td>
<td>139,996,761</td>
<td>121,369,422</td>
</tr>
</tbody>
</table>

### Calgary Health Trust

**SUMMARY OF OPERATIONS AND CHANGES IN FUND BALANCES**

<table>
<thead>
<tr>
<th></th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenue</strong></td>
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<td>$</td>
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<tr>
<td>Donations</td>
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<tr>
<td>Lotteries (net)</td>
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<tr>
<td>Events (net)</td>
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<td>2,666,884</td>
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<tr>
<td><strong>Total Revenue</strong></td>
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<td>19,712,695</td>
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<tr>
<td><strong>Expenditures</strong></td>
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<tr>
<td>Operating expenses</td>
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<td>5,896,955</td>
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<tr>
<td>Charitable Disbursements</td>
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<td>8,254,489</td>
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<td><strong>Total Expenditures</strong></td>
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<td>14,151,440</td>
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<td><strong>Excess of revenue over expenditures</strong></td>
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<td>$13,198,950</td>
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<tr>
<td><strong>Fund balances, beginning of year</strong></td>
<td>$106,419,415</td>
<td>$93,220,465</td>
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<tr>
<td><strong>Fund balances, end of year</strong></td>
<td>$122,193,117</td>
<td>$106,419,415</td>
</tr>
</tbody>
</table>
Thank you to our Board of Directors

M Ann McCaig, Emeritus
William Sembo, Chair
Lesley Conway, Vice Chair
Sandy Edmonstone, Vice Chair
David Routledge, Vice Chair
Dr. Chris Eagle, Ex-Officio

Carlo Bellusi
Angela Butler
Barry Davy
Gary Durbienuk
Bruce Edgelow
Robert Hawes
Beverly Higham-Linehan
Dr. Richard Hu
Brenda Huband

Sarah Kennedy
Robert King
Bobby Libin
Cynthia Moore
William Osler
Dan Silvester
Roger Smith
Gregory Turnbull

In Memorial

MR. J. SHERROLD MOORE
1929 - 2018

Mr. Moore was a long-time Calgary Health Trust volunteer and a loyal steward of the Calgary community.

Mr. Moore joined Calgary Health Trust as a member of the Rockyview Development Council in 1997 and later was appointed as a Member of Calgary Health Trust’s Board of Directors in 2002.

Sherrold was passionate about health care and Calgary Health Trust. He held the highest standards on accountability and brought wisdom and professional advice to our Board dealings as well as to the activities of the Rockyview General Hospital Development Council. He was a very respected business leader and philanthropist, but first and foremost he was a kind and thoughtful man.

In 2015, Mr. Moore was the recipient of a Centennial Award, awarded from the Province of Alberta to those who have contributed greatly to their fellow citizens, community and the Province of Alberta.

We are incredibly fortunate to have benefited from the passion, knowledge and philanthropic spirit of Mr. J. Sherrold Moore.

“VOLUNTEERS DO NOT NECESSARILY HAVE THE TIME; THEY JUST HAVE THE HEART.”
~ Elizabeth Andrews

FOOTHILLS MEDICAL CENTRE FUND DEVELOPMENT COUNCIL
Kirk Bailey, Chair
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