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### AMENDED

Form 990-PF

#### **Return of Private Foundation**

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

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

For calendar year, 2008, or tax year beginning and ending Final return X Amended return G Check all that apply: Address change Initial return Name change Name of foundation A Employer identification number Use the IRS THE WALL FAMILY - POWER TOWNSEND label. 20-1980581 FOUNDATION, INC. Otherwise, Number and street (or P O box number if mail is not delivered to street address) print Room/suite B Telephone number or type. 1387 CUSTER, P.O. BOX 4879 406-442-2770 See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions HELENA, MT 59604-4879 D 1. Foreign organizations, check here Foreign organizations meeting the 85% test, check here and attach computation H Check type of organization: X Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation E If private foundation status was terminated I Fair market value of all assets at end of year | J | Accounting method: X Cash Accrual under section 507(b)(1)(A), check here Other (specify) (from Part II, col. (c), line 16) If the foundation is in a 60-month termination **≥**\$ (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here 331,041 (d) Disbursements for charitable purposes (cash basis only) Analysis of Revenue and Expenses Part I (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) ) expenses per books income income 37,500 N/A Contributions, gifts, grants, etc., received Check if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments ) 5,848 5,848 Dividends and interest from securities 5a Gross rents Net rental income or (loss) 62 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0. 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 43,348 5,848 Total. Add lines 1 through 11 0 0 0. 13 Other employee salaries and W 14 Pension plans, employee benefits 15 RS-0SC Expenses 16a Legal fees MAR 0 9 2010 606 0 606. b Accounting fees c Other professional fee OGDEN, UT and Administrative 17 Interest 18 Taxes 19 Depreciation and depletion Occupancy Travel, conferences, and meetings 22 Printing and publications 0 0. 381 Operating 23 Other expenses 24 Total operating and administrative 0 987 606. expenses. Add lines 13 through 23 7,100 7.100. Contributions, gifts, grants paid 26 Total expenses and disbursements. 7,706. 8,087 0 Add lines 24 and 25 27 Subtract line 26 from line 12: 35,261 8 Excess of revenue over expenses and disbursements 5,848 b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

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D	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
	ar L	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	295,780.		
	2	Savings and temporary cash investments		278,946.	278,946.
		Accounts receivable ►			
		Less; allowance for doubtful accounts	and the second s		The state of the s
	4	Pledges receivable ►		A STATE OF THE STA	
	•	Less: allowance for doubtful accounts	Makakan Arawa Arawa Arawa Makakana Makakan Makakan Sara (Ma	THE STREET, WHEN I WIN I WAS A STREET, WAS	stratum the same broken and a management of
	5	Grants receivable	<del></del>		<del></del>
	_	Receivables due from officers, directors, trustees, and other			
	6	•			
	_	disqualified persons		<del></del>	· ,
	7	Other notes and loans receivable	daning in the same with a same when the same h	Destruction and an amount of the contract of t	
		Less: allowance for doubtful accounts		- · · - · · · ·	
ste		Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
•	10a	Investments - U.S. and state government obligations			<u> </u>
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis	9 14 8 3 34 8-36	ment was a	
		Less accumulated degreciation			
	12	Investments - mortgage loans		•	
	13	Investments - other			
		Land, buildings, and equipment: basis			3 3 - 1 - 2 - 3
	17	Less accumulated depreciation	and the second contract of the second of the	The letters and a series of the series and the series of t	a maa atti aaaa ahdaa aa
	45	Other assets (describe			
	15	Other assets (describe			
	40	Tast access (As be assessed by all Glave)	295,780.	221 0/1	331,041.
_		Total assets (to be completed by all filers)	433,100.	221,041.	331,041.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
ies	19	Deferred revenue			ļ
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
į	21	Mortgages and other notes payable			
_	22	Other liabilities (describe >)			'
				_	- ',
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			, -
"		and complete lines 24 through 26 and lines 30 and 31.			
ces	24	Unrestricted			
<u>la</u>	25	Temporarily restricted			
Ba	26	Permanently restricted			
Net Assets or Fund Balanc		Foundations that do not follow SFAS 117, check here			
교		and complete lines 27 through 31.			,
ō	27	Capital stock, trust principal, or current funds	0.	0.	- 1
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	1
Ass	29	Retained earnings, accumulated income, endowment, or other funds	295,780.	331,041.	1
et	1	Total net assets or fund balances	295,780.	331,041.	1 :
Z	30	TOTAL HEL 499619 OF INITIA DATA HOCES	255,1001	331,041.	, ,
		T-1-1 lickillation and not constalling the language	295,780.	331,041.	
_	31	Total liabilities and net assets/fund balances		JJI, UHI	1
P	art	III Analysis of Changes in Net Assets or Fund E	Balances		
=					Τ
1		I net assets or fund balances at beginning of year - Part II, column (a), line	<sub>6</sub> 30		205 700
	•	st agree with end-of-year figure reported on prior year's return)		1	295,780.
2		r amount from Part I, line 27a		2	35,261.
3		er increases not included in line 2 (itemize)			0.
4		lines 1, 2, and 3		4	331,041.
5		reases not included in line 2 (itemize)		5	0.
6_	Tota	l net assets or fund balances at end of year (line 4 minus line 5) - Part II, (	column (b), line 30	6	331,041.
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FOUNDATI	ON, INC.		,	20-1980581

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823521 01-02-09

Part IV   Capital Gains	and Lo	sses for Tax on In	vestment	Income					
		nd(s) of property sold (e.g or common stock, 200 shs			1, b	low acquired - Purchase - Donation	(c) Date a		(d) Date sold (mo., day, yr.)
<u>1a</u>					ļ				<del></del>
b NO	NE				<u> </u>	<del></del>			
C					<del> </del>				
<u>d</u>					<del>  -</del>				
e	- (4) [	Description allowed	(a) Can	t or other bear	$\perp$	·	(h) Go	un or (loce	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
(e) Gross sales price	(1) [	Depreciation allowed (or allowable)		t or other basis opense of sale				in or (loss (f) minus (	
<u>a</u>			-						
<u>b</u>									
<u>C</u>				<del></del>				<del></del>	<del></del>
<u>d</u>				<del></del>		•			
Complete only for assets shown	on dain in	column (h) and owned by	the foundation	on 12/31/69			(I) Gains (C	of (p) usin	minus
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69	(k) Exc	cess of col. (I)		(	òl. (k), but n		n -0-) <b>or</b>
a b				<del></del>	$\neg \neg$	<del></del>			
C			<del>                                     </del>				•	·	<u></u>
d		· .							
e		······							· <del>-</del> ··
		∫ If gain, also ente	r in Dort I. line '		$\neg$				
2 Capital gain net income or (net ca		) { If (loss), enter -0	- in Part I, line	7	}	2			
3 Net short-term capital gain or (lost if gain, also enter in Part I, line 8, if (loss), enter -0- in Part I, line 8			nd (6):		}	3			
Part V Qualification U	Inder S	Section 4940(e) for	Reduced	Tax on Ne	t Inv	estment li	ncome		
Was the foundation liable for the sec If "Yes," the foundation does not qua 1 Enter the appropriate amount in	lify under	section 4940(e). Do not co	omplete this pa	rt.		· · · · · · · · · · · · · · · · · · ·		-	Yes X No
(a) Base period years Calendar year (or tax year beginn	ıng ın)	(b) Adjusted qualifying dis	stributions	Net value of n	(c) oncha	ritable-use asso	ets	Dıstrıl (col. (b) dı	(d) bution ratio vided by col. (c))
2007			985.			212,14	5.		.004643
2006		<u> </u>	441.			4,50			.097848
2005			540.			32,92			.016399
2004			0.	<del></del>		14,77	75.		.000000
2003		· · · · · · · · · · · · · · · · · · ·						<del></del>	<del></del>
2 Total of line 1, column (d)							2		.118890
3 Average distribution ratio for the the foundation has been in existe			on line 2 by 5,	or by the numbe	er of ye	ears	3		.029723
			line 5				4		293,322.
4 Enter the net value of noncharitable-use assets for 2008 from Part X, line 5					5		8,718.		
5 Multiply line 4 by line 3									
6 Enter 1% of net investment inco	me (1% of	r Part I, line 27b)					6		58.
7 Add lines 5 and 6							7		8,776.
8 Enter qualifying distributions fro							_8_		7,706.
If line 8 is equal to or greater tha See the Part VI instructions.	n line 7, c	heck the box in Part VI, lin	e 1b, and comp	olete that part us	ing a	1% tax rate.			
823521 01-02-09						<u> </u>			Form <b>990-PF</b> (2008

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THE WALL FAMILY - POWER TOWNSEND FOUNDATION, INC 20-1980581 Form 990-PF (2008) Page 4 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions Part VI and enter "N/A" on line 1. 1a Exempt operating foundations described in section 4940(d)(2), check here (attach copy of ruling letter if necessary-see instructions) Date of ruling letter: b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% 1 of Rart I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 Credits/Payments:
a 2008 estimated tax payments and 2007 overpayment credited to 2008
OFGINGO 6 Credits/Payments: 117 **b** Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 6d Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_\_ if Form 2220 is attached 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Enter the amount of line 10 to be: Credited to 2009 estimated tax Refunded Part VII-A Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in 1a X any political campaign? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities. c Did the foundation file Form 1120-POL for this year? 10 d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0 . (2) On foundation managers. ▶ \$ (1) On the foundation. > \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. managers. > \$ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 If "Yes." attach a detailed description of the activities. 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes

> 6 7

N/A

4a

4b

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: · 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? 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV. 88 Enter the states to which the foundation reports or with which it is registered (see instructions) MT

b if the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation

4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?

b If "Yes," has it filed a tax return on Form 990-T for this year?

If "Yes," attach the statement required by General Instruction T.

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV)? If "Yes," complete Part XIV

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

10 Form 990-PF (2008)

8b

AMENDED

POWER TOWNSEND Form 990-PF (2008) 20-1980581 Page 5 FOUNDATION, INC. Part VII-A | Statements Regarding Activities (continued) 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) X 11 12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008? 12 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A 14 The books are in care of ► MIKE WALL Telephone no. > 406 - 442 - 2770Located at ▶ 1387 CUSTER, HELENA, MT ZIP+4 ▶59604 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year N/A Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required No Yes File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year did the foundation (either directly or indirectly): Yes X No (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) Yes X No a disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No 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 Yes X No 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 page 20 of the instructions)? N/A1b Organizations relying on a current notice regarding disaster assistance check here 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 2008? 10 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)): a At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2008? If "Yes," list the years ▶ 2007 , 2005 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 X 2b statement - see instructions.) 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

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2008)

had not been removed from jeopardy before the first day of the tax year beginning in 2008?

b If "Yes," did it have excess business holdings in 2008 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 Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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X

3b

4a

Yes X No

N/A

during the year?

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Part VII-B   Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)	<u> </u>
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,	1	
any voter registration drive?		☐ Ye	es X No	-   -
(3). Provide a grant to an individual for travel, study, or other similar purposes	?	☐ Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section			-
509(a)(1), (2), or (3), or section 4940(d)(2)?		☐ Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			1 1
the prevention of cruelty to children or animals?		Ye	es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations	_	
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	ere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for				
expenditure responsibility for the grant?	N	ī/A	s No	
If "Yes," attach the statement required by Regulations section 53 494	5-5(d)		-	
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Ye	es 🗶 No 📙	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		-	6b X
If you answered "Yes" to 6b, also file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No	
b If yes, did the foundation receive any proceeds or have any net income attribut				7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	inagers, Higniy	y	
List all officers, directors, trustees, foundation managers and their	compensation		<del></del>	
The tar officers, an ectors, business, roundation managers and then		(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
MIKE WALL	PRESIDENT	enter sos)	Compensation	allowarious
1387 CUSTER	REGIDENT			
HELENA, MT 59604	1.00	0.	0.	0.
KEVIN WALL	VICE PRES/SEC			
1387 CUSTER	111111111111111111111111111111111111111	, , , , , , , , , , , , , , , , , , , ,		
HELENA, MT 59604	1.00	0.	0.	0.
		1		
	1			
	1			
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none,	enter "NONE."		
(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	(e) Expense account, other
(a) Name and address of each employee paid more than \$50,000	devoted to position	(C) Compensation	and deferred compensation	allowances
NONE		-		1
				<u>                                     </u>
			<u> </u>	
	]		1	
	1			
		1	1	1

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Total number of other employees paid over \$50,000

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Paid Employees, and Contractors (continued)	, Highly
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."	
(a) Name and address of each person paid more than \$50,000 (b) Ty	pe of service (c) Compensation
, NONE	
Total number of others receiving over \$50,000 for professional services	▶ 0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	as the Expenses
1 EXPENDITURES FOR CHARITABLE PURPOSES	
	7,100.
2	
3	
4	
Part IX-B Summary of Program-Related Investments	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 <u>N/A</u>	
2	
All other program-related investments. See instructions.  3	

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Total, Add lines 1 through 3

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Pi	Minimum Investment Return (All domestic foundations must complete this part. Foreign foun	dations, se	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	297,789.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	297,789.
е	Reduction claimed for blockage or other factors reported on lines 1a and	ł	
	1c (attach detailed explanation) 1e 0.	`	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	297,789.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,467.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	293,322.
6	Minimum investment return. Enter 5% of line 5	6	14,666.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here  and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	14,666.
2 a	Tax on investment income for 2008 from Part VI, line 5		
b	Income tax for 2008. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	117.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	14,549.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	14,549.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	14,549.
Р	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	<u>7,706.</u>
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	7,706.
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	7,706.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	jualifies for	the section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
,	Corpus	Years prior to 2007	2007	2008
1 Distributable amount for 2008 from Part XI,				14 ~40
line 7				14,549.
2 Undistributed income, if any, as of the end of 2007 a Enter amount for 2007 only	-	,	9,639.	
b Total for prior years:	<del></del>		3,033.	<del></del>
2005,		661.		
3 Excess distributions carryover, if any, to 2008:	· · · · · · · · · · · · · · · · · · ·			
a From 2003		, '		w.
b From 2004	! ~			,
c From 2005				
d From 2006	• 			
e From 2007				
f Total of lines 3a through e	0.			}
4 Qualifying distributions for 2008 from				
Part XII, line 4: ►\$ 7,706.				-
a Applied to 2007, but not more than line 2a	• •	,	7,706.	
<b>b</b> Applied to undistributed income of prior				-
years (Election required - see instructions)	_	0.		^
c Treated as distributions out of corpus	· · · · · · · · · · · · · · · · · · ·			
(Election required - see instructions)	0.			:
d Applied to 2008 distributable amount		<u> </u>		0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2008	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))	. ,		,	
6 Enter the net total of each column as	, ,,	· ,		, <u>, , , , , , , , , , , , , , , , , , </u>
indicated below:	, 		, ,	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				-
line 4b from line 2b		661.		
c Enter the amount of prior years'			-	
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		<del></del>
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		661.		
e Undistributed income for 2007. Subtract line	-			
4a from line 2a. Taxable amount - see instr.			1,933.	
f Undistributed income for 2008. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2009				14,549.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			<del></del>
8 Excess distributions carryover from 2003				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2009.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:				
a Excess from 2004	-		1	
b Excess from 2005	{			
c Excess from 2006	-			
d Excess from 2007	1			
e Excess from 2008	<u> </u>	<u> </u>	<del></del>	- 000 DF

Part XIV   Private Operating Fo	Oundations (see ins	structions and Part V	(II-A guestion 9)	N/A	J-1300361 Fage II
1 a If the foundation has received a ruling of				N/A	
foundation, and the ruling is effective for					
,	•	•	Lun coction	4942(j)(3) or	4942(j)(5)
b Check box to indicate whether the found	Tax year	iy iounuation described	Prior 3 years	4342())(3) 611	1 4342(])(3)
2 a Enter the lesser of the adjusted net income from Part I or the minimum	(a) 2008	(b) 2007	(c) 2006	(d) 2005	(e) Total
investment return from Part X for	(4) 2000	(5) 200.	(0) 2000	(-)	
each year listed <b>b</b> 85% of line 2a	<del> </del>	<del></del>	-	-	
c Qualifying distributions from Part XII,		<del></del>		<del> </del>	
line 4 for each year listed	i				
d Amounts included in line 2c not					<del></del>
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly	<del></del>	<del></del>			
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:  a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter:					
(1) Total support other than gross	<i>'</i>				
investment income (interest, dividends, rents, payments on			Ì		
securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt					
organizations as provided in					
sečtion 4942(j)(3)(B)(iii)	_				
(3) Largest amount of support from					
an exempt organization			<del> </del>		
(4) Gross investment income  Part XV   Supplementary Info	rmation (Cample	to this part only	v if the foundation	on had \$5,000	or more in assets
at any time during t			y ii tile loullatii	511 11au <del>40,000</del>	or more in assets
1 Information Regarding Foundation	<del> </del>				
a List any managers of the foundation wh	•	than 2% of the total co	ntributions received by	the foundation before	e the close of any tax
year (but only if they have contributed r			,		
MIKE WALL					
b List any managers of the foundation wh	o own 10% or more of th	ne stock of a corporatio	n (or an equally large po	ortion of the ownersh	ip of a partnership or
other entity) of which the foundation ha	is a 10% or greater intere	st.			
ONE					
2 Information Regarding Contribut	ion, Grant, Gift, Loan	, Scholarship, etc.,	Programs:		
Check here 🕨 🗶 if the foundation of					
the foundation makes gifts, grants, etc.	(see instructions) to indi	viduals or organizations	under other conditions	, complete items 2a,	b, c, and d.
a The name, address, and telephone num	ber of the person to who	m applications should	be addressed:		
<b>b</b> The form in which applications should l	be submitted and informa	ation and materials they	should include:		
<del></del>					<del></del>
c Any submission deadlines:					
4 Appropriate or limitations of second	le queb as by assess	nal arage, abantable field	de kinde of institutions	or other factors:	
d Any restrictions or limitations on award	is, such as by geographic	ai ai cas, chantadie fiel	.อ, หมานอ 01 มารมเบม0กร,	OF OTHER INCIOIS.	v

THE WALL FAMILY - POWER TOWNSEND

20-1980581

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FOUNDATION, INC.

Form 990-PF (2008)

Total

823611 01-02-09

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or **Amount** contribution status of Name and address (home or business) recipient or substantial contributor a Paid during the year ANGEL FUND, 816 S. HELP SUPPORT NEEDS OF SCHOOL CALIFORNIA STREET, HELENA, 501(C)(3) 1,000. MT 59601 NONE AGE CHILDREN SUPPORT EFFORTS CATHOLIC SOCIAL SERVICES, IN SOCIAL 515 N EWING, HELENA, MT 59601 501(C)(3) 100. NONE SERVICE MONTANA MILITARY MUSEUM, PO BOX 1585, HELENA, MT 1,000. 501(C)(3) SUPPORT MUSEUM 59624 NONE MONTANA HISTORY CENTER, SUPPORT P.O. BOX 1585, HELENA, MT ORGANIZATION 501(C)(3) 5,000. NONE 59624 7,100. ▶ 3a Total b Approved for future payment NONE

**▶** 3b

Form 990-PF (2008)

FOUNDATION, INC.

ter gross amounts unless otherwise indicated.	Unrelated b	usiness income	Excluded	by section 512, 513, or 514	(6)
or gross amounts unless otherwise indicated.		(b)	(c) Exclu-	(d)	(e) Related or exemp
Dragues	(a) Business	Amount	sion code	Amount	function income
Program service revenue:	code			<del></del>	
	-		<del>-   -</del>	<del>-</del>	<del></del>
<del></del>	i i				
	1				
·					
e	i -				<del></del>
	-		<del>-   -   -</del>		<del></del>
g Fees and contracts from government agencies	<u> </u>		<del></del>		
Membership dues and assessments	<u> </u>	<del> </del>	<del>-    </del>		<del></del>
nterest on savings and temporary cash				5 040	
nvestments			14	5,848.	
Dividends and interest from securities					
Net rental income or (loss) from real estate:					
a Debt-financed property		. <u> </u>			<del></del>
Not debt-financed property					
Net rental income or (loss) from personal			]		
property		·			<del> </del>
Other investment income					
Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					<u> </u>
Other revenue:					
a					
b		···			
	1				
C			<del>                                      </del>		
d	1				
d	1				<del></del>
de	1			5.848.	
de e Subtotal. Add columns (b), (d), and (e)	1	(	).	5,848.	
de eSubtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)			).	5,848.	
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.  Art XVI-B Relationship of Activities	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.  ART XVI-B Relationship of Activities ne No.  Explain below how each activity for which in	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.  art XVI-B Relationship of Activities	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.  ART XVI-B Relationship of Activities ne No.  Explain below how each activity for which in	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.  ART XVI-B Relationship of Activities  The No. Explain below how each activity for which in	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
Subtotal. Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations.  ART XVI-B Relationship of Activities  The No. Explain below how each activity for which in	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations.  ART XVI-B  Relationship of Activities  ne No.  Explain below how each activity for which in	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  E worksheet in line 13 instructions to verify calculations.  ART XVI-B  Relationship of Activities  Revo.  Explain below how each activity for which in	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations.  ART XVI-B  Relationship of Activities  the No.  Explain below how each activity for which in	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations.  ART XVI-B  Relationship of Activities  the No.  Explain below how each activity for which in	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations.  ART XVI-B  Relationship of Activities  the No.  Explain below how each activity for which in	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations.  Art XVI-B Relationship of Activities  e No. Explain below how each activity for which in	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations.  Art XVI-B Relationship of Activities  e No. Explain below how each activity for which in	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations.  Art XVI-B Relationship of Activities  e No. Explain below how each activity for which in	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  worksheet in line 13 instructions to verify calculations.  Art XVI-B Relationship of Activities  the No. Explain below how each activity for which in	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations.  ART XVI-B  Relationship of Activities  the No.  Explain below how each activity for which in	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations.  ART XVI-B  Relationship of Activities  the No.  Explain below how each activity for which in	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations.  ART XVI-B  Relationship of Activities  the No.  Explain below how each activity for which in	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations.  ART XVI-B  Relationship of Activities  the No.  Explain below how each activity for which in	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations.  ART XVI-B  Relationship of Activities  the No.  Explain below how each activity for which in	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8
Subtotal. Add columns (b), (d), and (e)  Fotal. Add line 12, columns (b), (d), and (e)  e worksheet in line 13 instructions to verify calculations.  ART XVI-B  Relationship of Activities  ne No.  Explain below how each activity for which in	s to the Accon	nplishment of	Exempt F	13 Purposes	5,8

THE WALL FAMILY - POWER TOWNSEND

Forr		<u> 20-198058.</u>		'age 13
Pa	art XVII Information Regarding Transfers To and Transactions and Relationships Wit	h Noncharitab	le	
	Exempt Organizations			
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) o	of	Yes	No

1	Did the organization directly or indirectly	y engage in any of the followin	g with any other organi	zation described in secti	on 501(c) of		Yes	No
	the Code (other than section 501(c)(3)	· ·		ganizations?				-
а	•	to a noncharitable exempt or	ganization of:					i
	(1) Cash					1a(1)		<u> </u>
	(2) Other assets					1a(2)		X
b	Other transactions:							
	(1) Sales of assets to a noncharitable e	xempt organization				16(1)		<u>X</u>
	(2) Purchases of assets from a noncharitable exempt organization							<u>X</u>
	(3) Rental of facilities, equipment, or other assets							_X_
	(4) Reimbursement arrangements							<u>X</u>
	(5) Loans or loan guarantees							_X_
	(6) Performance of services or member	rship or fundraising solicitatio	ns			1b(6)		_X_
C	Sharing of facilities, equipment, mailing	lists, other assets, or paid em	ployees			10		<u>X</u>
d	If the answer to any of the above is "Yes	," complete the following sche	dule. Column (b) shoul	d always show the fair m	arket value of the goods, ot	her ass	ets,	
	or services given by the reporting found	lation. If the foundation receive	ed less than fair market	value in any transaction	or sharing arrangement, she	ow in		
	column (d) the value of the goods, othe	r assets, or services received.					_	
(a) L	Line no (b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description	of transfers, transactions, and sh	arıng an	rangeme	nts
		N/A						
-								
						•		
					·			
22	Is the foundation directly or indirectly a	ffiliated with or related to one	or more tax-exempt or	nanizations described				
2 a	in section 501(c) of the Code (other tha			gamzations described		] Yes	Γx	No
h	If "Yes," complete the following schedul		1011 021		_	_ 103	_==	_ 1.0
	(a) Name of organiz		(b) Type of organizati	on	c) Description of relationshi	p		
	N/A	•	· /,		······································	<u> </u>		
	·			<del></del>				
	· · · · · ·			<del></del>				
$\Box$	Under penalties of perjury, I declare that I have	examined this return, including acco	mpanying schedules and s	tatements, and to the best of	my knowledge and belief, it is th	ue, corre	ect,	
	and complete Declaration of preparer (other tha	n rexpayer of first clary) is based on	all information of which pre	parer has any knowledge				
l	X IMM HI	Vall V	1	1/25				
<u>e</u>	Signature of officer or trustee		Date	Title				
윈	Preparer's		2410	Date Ch	eck if Preparer	s identif	ying nui	nber
Sign Here	signature GARY B.	CARLSON		Date Ch Se se	of- iployed ► □		,	
Ñ	E FO	•	& CO., P.		EIN D			
	ANDERS if self-employed),	BOX 1040	α CU., P.	<b>.</b>	LIN P		<del></del>	
	address, and ZIP code HELENA		40		Phone no. 406-4	12.	104	Λ
_	address, and ZIP code HELENA, MT 59624-1040 Phone no. 406-442-1040  Form 990-PF (2008)							

# Schedule of Contributors

## Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

➤ Attach to Form 990, 990-EZ, and 990-PF.

OMB No 1545-0047

Employer identification number

•	HE WALL FAMILY - POWER TOWNSEND OUNDATION, INC.	20-1980581				
Organization type (check o						
Filers of:	Section:					
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	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	s covered by the <b>General Rule</b> or a <b>Special Rule</b> . ( <b>Note</b> . Only a section 501(c)(7), (8), ond a Special Rule. See instructions)	r (10) organization can check boxes				
General Rule						
X For organizations contributor Comp	filing Form 990, 990·EZ, or 990·PF that received, during the year, \$5,000 or more (in mo elete Parts I and II	ney or property) from any one				
Special Rules						
509(a)(1)/170(b)(1)	c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of (A)(vi), and received from any one contributor, during the year, a contribution of the green 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and	ater of (1) \$5,000 or (2) 2% of the				
For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.						
For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to 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 Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year)						
they must answer "No" on	at are not covered by the General Rule and/or the Special Rules do not file Schedule B Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, on the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).					
LHA For Privacy Act and	Panerwork Reduction Act Notice see the Instructions Schedule	8 (Form 990, 990-EZ, or 990-PF) (2008)				

for Form 990. These instructions will be issued separately.

THE WALL FAMILY - POWER TOWNSEND FOUNDATION, INC.

Employer identification number

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	JAW, LLC  1387 CUSTER  HELENA, MT 59604	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	MICHAEL A WALL  816 SO CALIFORNIA  HELENA, MT 59601	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	POWER TOWNSEND CO.  1387 CUSTER  HELENA, MT 59604	\$ 10,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		-   -   \$	Person Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		<b>\$</b>	Person Payroli Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- - - - -	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

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FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT 1
SOURCE .				AMOUNT
INVESTMENT INCOME	5,848. 5,848.			
TOTAL TO FORM 990-PF, PART I				
FORM 990-PF ACCOUNTING FEES				STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) ADJUSTED NET INCOM	
ACCOUNTING FEES	606.	0	•	606.
TO FORM 990-PF, PG 1, LN 16B	606.	0	•	606.
FORM 990-PF	M 990-PF OTHER EXPENSES			STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		
FILING FEE EXCISE TAX	15. 366.			0.
TO FORM 990-PF, PG 1, LN 23	381.	0	•	0.
	FOOTN	OTES		STATEMENT 4

THE RETURN IS AMENDED TO REFLECT A CONTRIBUTION MADE TO A CHARITABLE ORGANIZATION IN DECEMBER, 2008 NOT REFLECTED ON ORIGINAL RETURN.

THE WALL FAMILY - POWER TOWNSEND FOUNDAT

20-1980581

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	5
NAME OF CONTRIBUTOR	ADDRESS		
JAW, LLC	1387 CUSTER, HELENA, MT	59604	
POWER TOWNSEND CO.	1387 CUSTER, HELENA, MT	59604	