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Form **990-PF**

Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

2008

OMB No 1545-0052

_			- 1 0000		==== 24 222			
		ndar year 2008, or tax year beginning NOV		, and ending	DEC 31, 2008			
<u>G</u>	Check	all that apply: X Initial return	Final return	Amended return	T	Name change		
	e the		·MC		A Employer identification	number		
Otherwise, FKA JILL E SIMPLOT FOUNDATION 26-3702988 Print Number and street (or P O box number if mail is not delivered to street address) Room/suite R Telephone number								
,	print r type	.	elivered to street address)	Room/suite	B Telephone number	.=-		
	Spe	eific			707-291-29	75		
	truction	ons. I City or town, state, and ZIP code			C If exemption application is p			
		MCCALL, ID 83638			D 1. Foreign organization	s, check here		
H_	_	type of organization: X Section 501(c)(3) e			Foreign organizations me check here and attach co	omputation Last,		
		ction 4947(a)(1) nonexempt charitable trust	Other taxable private found		E If private foundation sta	tus was terminated		
		arket value of all assets at end of year J Account	•	Accrual	under section 507(b)(1)(A), check here $ ightharpoonup$		
		· · · · · · · · · · · · · · · · · · ·	ther (specify)	 	F If the foundation is in a			
_	-\$		ımn (d) must be on cash	basis)	under section 507(b)(1			
	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(0) Disbursements for charitable purposes (cash basis only)		
	1	Contributions, gifts, grants, etc., received	0.		N/A			
	2	Check if the foundation is not required to attach Sch. B						
	3	Interest on savings and temporary cash investments						
	4	Dividends and interest from securities						
	5a	Gross rents						
	Ь	Net rental income or (loss)						
•	6a	Net gain or (loss) from sale of assets not on line 10						
Ž	Ь	Gross sales price for all assets on line 6a						
Revenue	7	Capital gain net income (from Part IV, line 2)		0.				
Œ	8	Net short-term capital gain						
	9	Income modifications						
	10a	Gross sales less returns and allowances						
	b	Less Cost of goods sold						
	C	Gross profit or (loss)						
	11	Other income						
	12	Total. Add lines 1 through 11	0.	0.		,		
	13	Compensation of officers, directors, trustees, etc	0.	0.		0.		
	14	Other employee salaries and wages						
	15	Pension plans, employee benefits						
ses	16a	Legal fees						
penses	Ь	Accounting fees RECEIVED						
Ä	1	Other professional fees						
9	17	i i						
and Administrative	18	Interest E MAR 2 9 2010	S-S					
uist	19	Depreciation and depletion	京					
Ē	20	Occupancy OGDEN, U						
PA	21	Travel, conferences, and meetings						
פַ	22	Printing and publications						
9	1	Other expenses						
atir	24	Total operating and administrative						
Operating		expenses. Add lines 13 through 23	0.	0.				
ō	25	Contributions, gifts, grants paid		<u></u>				
	1	Total expenses and disbursements.						
		Add lines 24 and 25	0.	0.		0.		
	27	Subtract line 26 from line 12:				 		
)	Excess of revenue over expenses and disbursements	0.		Ì			
	l	Net investment income (if negative, enter -0-)	``	0.				
	ŀ	Adjusted net income (if negative, enter -0-)		<u>.</u>	N/A			
								

Page 2

Pa	rt	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End (of year
		Column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
-	1.	Cash - non-interest-bearing			
Ì	2	Savings and temporary cash investments			
	3	Accounts receivable ►]		
ł		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ►			
		Less: allowance for doubtful accounts ▶	1		
ŀ	5	Grants receivable			
1	6	Receivables due from officers, directors, trustees, and other			
	•	disqualified persons			
ı	7	Other notes and loans receivable			
- }	•	Less: allowance for doubtful accounts			}
6	٥	Inventories for sale or use	 		
<u> </u>	_	Prepaid expenses and deferred charges	 	•	
As:		Investments - U.S. and state government obligations	 		
- 1					
		Investments - corporate stock	 		
		Investments - corporate bonds	 		
1	1	Investments - land, buildings, and equipment basis	-		
1	_	Less accumulated depreciation	 		
1		Investments - mortgage loans			
1		Investments - other		 	
1	4	Land, buildings, and equipment basis			
		Less accumulated depreciation			
1	5	Other assets (describe			
	6	Total assets (to be completed by all filers)	0.	<u> </u>	0.
1		Accounts payable and accrued expenses			
-	8	Grants payable			}
အ 1	9	Deferred revenue			_
<u>∄</u> 2	0	Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	1	Mortgages and other notes payable			}
<u>ا</u> ا	2	Other liabilities (describe >)			
2	3	Total liabilities (add lines 17 through 22)	0.	<u> </u>	
ı		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31.			
Se 2	4	Unrestricted	1		
	5	Temporarily restricted			,
器 2		Permanently restricted			1
밑		Foundations that do not follow SFAS 117, check here			1
교		and complete lines 27 through 31.			
0 2	7	Capital stock, trust principal, or current funds	0.		
set 2		Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	į
ASS 2		Retained earnings, accumulated income, endowment, or other funds	0.	0.	1
# 1		Total net assets or fund balances	0.1	0.	7
zľ	U	Total liet assers of fully paramees			
١,	1	Total liabilities and net assets/fund balances	0.	0.	
					<u> </u>
Pa	rt	Analysis of Changes in Net Assets or Fund B	Balances		
1 To	ntal	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		net assets or fund balances at beginning of year - Part n, column (a), line t agree with end-of-year figure reported on prior year's return)	UU .		0
		amount from Part I, line 27a		1	0.
				2	
		increases not included in line 2 (itemize)			0.
		ines 1, 2, and 3		4	0.
_		eases not included in line 2 (itemize)			0.
<u>6 T</u> (tal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	0.
					Form 990-PF (2008

(a) List and descri	ibe the ki	nd(s) of property sold (e.g. or common stock, 200 shs	, real estate,	t Income	(b)	How ac - Purc) - Dona	iiase i	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
<u>1a</u>					-				
b NO	NE								-
<u>c</u>					+-				}
_d					╁				
<u>e</u>	16)	Depreciation allowed	(a) (a)	st or other basis				(h) Gain or (loss	<u> </u>
(e) Gross sales price		(or allowable)		expense of sale				(e) plus (f) minus	
<u>a</u>						<u> </u>			
<u>b</u>						 			
<u>c</u>			. –						
<u>d</u>									
Complete only for assets shown	0.0310.10	column (h) and owned by t	ha foundation	n on 12/21/60		 		Carra (Oa) (b)	
Complete only for assets showin						1		Gains (Col. (h) gair (k), but not less that	
(i) F.M.V. as of 12/31/69		(j) Adjusted basis as of 12/31/69		xcess of col. (i) r col. (j), if any				Losses (from col.	
_a									
_b						<u></u>			
_с						L			
<u>d</u>									
_ei						.			. <u> </u>
2 Capital gain net income or (net ca	oital loss	If gain, also enter If (loss), enter -0-	in Part I, line	. 7 . 7	}	2			
3 Net short-term capital gain or (los		•							
If gain, also enter in Part I, line 8,			u (U).		J				
If (loss), enter -0- in Part I, line 8		·			<u> </u>	3			
Part V Qualification U	nder S	Section 4940(e) for	Reduced	Tax on Ne	<u>t Inv</u>	est _m	ent Inc	ome	N/A
If section 4940(d)(2) applies, leave the Was the foundation liable for the section of the sectio	ion 4942 fy under	tax on the distributable amosection 4940(e). Do not cor	nplete this p	art.					Yes No
	1	(b)	0.00.00	I I I I I I I I I I I I I I I I I I I	(c)			1	(d) bution ratio
(a) Base period years Calendar year (or tax year beginnii	ng in)	Adjusted qualifying distr	ributions	Net value of n			use assets	Distril (col. (b) div	bùtión ratio vided by col. (c))
2007								<u> </u>	
2006								 	
2005								 	
2004								 	
2003				<u> </u>				 	
B. Tatal of line 4. selicon (d)									
2 Total of line 1, column (d) 2 Average distribution ratio for the f	-voor bar	on narrad - disuda tha total a	n line 2 by 5	or by the numbe	r of w	ara		2	
3 Average distribution ratio for the 5	-	•	n me z by 5,	, or by the numbe	t ut ye	ais		1 . 1	
the foundation has been in exister	106 11 1633	illali J ycais	•					3	
4 Enter the net value of noncharitab	le-use as:	sets for 2008 from Part X, I	ne 5					4	
5 Multiply line 4 by line 3							5		
									
6 Enter 1% of net investment incom	e (1% of	Part I, line 2/b)			•			6	
7 Add lines 5 and 6								7	
8 Enter qualifying distributions from	Part XII,	line 4						8	
If line 8 is equal to or greater than See the Part VI instructions.	line 7, ch	neck the box in Part VI, line	1b, and com	plete that part usi	ng a 1	% tax r	ate.		

Form	ANNIE'S FOUNDATION, INC. 1990-PF (2008) FKA JILL E SIMPLOT FOUNDATION	26-	 37029	188	Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see in	struc	
	Exempt operating foundations described in section 4940(d)(2), check here \(\bigcup \) and enter "N/A" on line 1.	T	T		-1101107
	Date of ruling letter: (attach copy of ruling letter if necessary-see instructions)	j	}		
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1	ļ		0.
	of Part I, line 27b	<u> </u>	 		
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)	1	1		
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	ļ		0.
	Add lines 1 and 2	3			0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			0.
	Credits/Payments:				
	2008 estimated tax payments and 2007 overpayment credited to 2008	1	}		
	Exempt foreign organizations - tax withheld at source	7			
	Tax paid with application for extension of time to file (Form 8868)	7]		
	Backup withholding erroneously withheld 6d	7	1		
	Total credits and payments. Add lines 6a through 6d	7	ļ		0.
	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			0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
11_	Enter the amount of line 10 to be: Credited to 2009 estimated tax	▶ 11			
Pa	rt VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interventional.	ene in			Yes No
	any political campaign?			1a	X_
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)	?	1	1b	X_
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publis	hed or	į.	ļ	
	distributed by the foundation in connection with the activities.				
C	Did the foundation file Form 1120-POL for this year?		L	1c	X_
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			Į.	
		<u>) .</u>		ļ	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			1	j
	managers. ► \$ 0 .			1	
	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	X
	If "Yes," attach a detailed description of the activities.		1		ì
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	n, or	ļ	- [
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		<u> </u>	3	<u> X</u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		.,_	4a	X
	If "Yes," has it filed a tax return on Form 990-T for this year?	N	/A	4b	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		ļ-	5	X_
	If "Yes," attach the statement required by General Instruction T.		ì	- 1	
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		[1	
	By language in the governing instrument, or Provided logislation that effectively emend at the reversing partitional as that no manufacture dissertions that conflict with the conflict wi	esta lacci	ľ		
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the second in the governing instrument? 	ale law	Ì		v
7	remain in the governing instrument? Did the foundation have at least \$5,000 in assets at any time during the year?		+	7	X
	If "Yes," complete Part II, col. (c), and Part XV.		 	' 	
	Enter the states to which the foundation reports or with which it is registered (see instructions)]	1	
50	ID				
.	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	N	/A	8b	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for c		'A -		
	vear 2008 or the tayable year herinning in 2008 (see instructions for Part XIV/2 If "Ves " complete Part XIV	uiciidai			Y

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

	ANNIE'S FOUNDATION, INC.	·			
orm	990-PF (2008) FKA JILL E SIMPLOT FOUNDATION	26-3702	988		Page 5
Pa	rt 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)		11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before				
	August 17, 2008?		12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
	Website address ► N/A			44	
14		one no. ► 707-29	1-2	975	
•	Located at P.O. BOX 1323, MCCALL, ID	ZIP+4 ►83		<u> </u>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	Zii ++ P <u>O</u>	050		
10	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15	N	/A	
Pa	irt VII-B Statements Regarding Activities for Which Form 4720 May Be Required		14	<u> </u>	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1.	During the year did the foundation (either directly or indirectly):		 	163	140
Id	• • • • • • • • • • • • • • • • • • • •	Yes X No	1		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	L Yes LA_ NO			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	Yes X No			
	a disqualified person?		1		
	(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?	Yes X No]	!]	
	(5) Transfer any income or assets to a disqualified person (or make any of either available			.	
	for the benefit or use of a disqualified person)?	Yes X No		1	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		i '		
	if the foundation agreed to make a grant to or to employ the official for a period after	.		.	
	termination of government service, if terminating within 90 days.)	Yes X No			
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/A	_1b_		
	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 corre	cted			
	before the first day of the tax year beginning in 2008?		1c		<u>X</u> _
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating fou	ndation)	
	defined in section 4942(j)(3) or 4942(j)(5)):			1	
а	At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s)				
	before 2008?	Yes X No))]	
	If "Yes," list the years	_		ļ	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section $4942(a)(2)$ (relating to				
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" are	id attach	1 1		
	statement - see instructions.)	N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	>			1	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			- (
	during the year?	Yes X No		j	
þ	If "Yes," did it have excess business holdings in 2008 as a result of (1) any purchase by the foundation or disqualified per	sons 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 Scho	edule C,]	
	Form 4720, to determine if the foundation had excess business holdings in 2008.)	N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X

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

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

ANNIE'S FOUNDATION, INC.		1	•	
orm 990-PF (2008) FKA JILL E SIMPLOT FOUND			<u> 26-37029</u>	88 Page 6
Part VII-B Statements Regarding Activities for Which I	orm 4720 May Be F	Required (contin	ued)	
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); or	r to carry on, directly or indire			
any voter registration drive?			s 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., organization	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	or _		
the prevention of cruelty to children or animals?		☐ Ye	s 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	l	i i
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		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 f	rom the tax because it maintai	ned	1	
expenditure responsibility for the grant?	N	/A 🔲 Ye	s No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d).		ì	1 1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		☐ Ye	s X No	
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	helter transaction?	Ye	s X No	
b If yes, did the foundation receive any proceeds or have any net income attribut	able to the transaction?		N/A	7b
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	/	
Faid Employees, and Contractors				
List all officers, directors, trustees, foundation managers and their				
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	to position	enter -0-)	and deterred compensation	allowances
JILL E. SIMPLOT	PRESIDENT AND	DIRECTOR		
947 S. MCCELLAN				
SALT LAKE CITY, UTAH 84105	1.00	0.	0.	0.
KRISTEN THOMAS	VICE PRESIDEN	T AND DIR	ECTOR	
947 S. MCCELLAN				
SALT LAKE CITY, UTAH 84105	1.00	0.	0.	0.
PAMELA LEMLEY	SECRETARY AND	DIRECTOR		
947 S. MCCELLAN				
SALT LAKE CITY, UTAH 84105	1.00	0.	0.	0.
				,
Compensation of five highest-paid employees (other than those inc		enter "NONE."	(-0 00 - 11	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	devoted to position	(C) compensation	compensation	allowances
NONE		j		

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

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "l	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		
	l	
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 statistica number of organizations and other beneficiaries served, conferences convened, research papers produc	ıl ınformation such as the ed, etc.	Expenses
1 N/A		
2		
*		
4		
Port IV B C		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year on line	ac 1 and 2	Amount
N/A	55 1 4110 2.	Alliount
11/21		
2		
All other program-related investments. See instructions.		
·		
Total. Add lines 1 through 3		0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations,	see 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	
C	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	10	0.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.]]	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	0.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6_	Minimum investment return Enter 5% of line 5	6	0.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	0.
2a	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.)	1	
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	0.
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	0.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0.
þ	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
	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	0.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	1 1	
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for	the section

Form **990-PF** (2008)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2007	(c) 2007	(d) 2008
1 Distributable amount for 2008 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2007				
a Enter amount for 2007 only			0.	
b Total for prior years:				
g rotarior prior yours.		0.		
3 Excess distributions carryover, if any, to 2008:				
a From 2003				
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: ► \$0 .				
a Applied to 2007, but not more than line 2a			0.	
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				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2008 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:				
8 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		,
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.		,
d Subtract line 6c from line 6b. Taxable		·	_ 	
amount - see instructions		0.		
e Undistributed income for 2007. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2008. Subtract			•	
lines 4d and 5 from line 1. This amount must	1		,	
be distributed in 2009	•	- ' '		
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.	ĺ		
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.			
O Analysis of line 9:				
a Excess from 2004	1	İ		
b Excess from 2005	j			
c Excess from 2006				
d Excess from 2007				
e Excess from 2008	İ			
E LAGESS HUIH ZUUD				5 000 DE (2000)

ANNIE'S FOUNDATION, INC.

	L E SIMPLOT			26-3	702988 Page 10
Part XIV Private Operating F	oundations (see in	structions and Part VII	A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating			
foundation, and the ruling is effective fo	or 2008, enter the date of t	the ruling	▶		<u>-</u>
b Check box to indicate whether the found	dation is a private operatii	ng foundation described i	n section	4942(j)(3) or	1942(၂)(5)
2 a Enter the lesser of the adjusted net	Tax year	· · · · · · · · · · · · · · · · · · ·	Prior 3 years	· ,	_
income from Part I or the minimum	(a) 2008	(b) 2007	(c) 2006	(d) 2005	(e) Total
investment return from Part X for]				
each year listed					<u> </u>
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not	_				
used directly for active conduct of	Ì				
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets		l i			
(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 investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from			1		
an exempt organization					
(4) Gross investment income	<u></u>		<u></u>	<u> </u>	<u></u>
Part XV Supplementary Info			f the foundation	n had \$5,000 or m	ore in assets
at any time during t	the year-see the i	nstructions.)	N/A		
Information Regarding Foundation List any managers of the foundation whyear (but only if they have contributed reconstructions)	no have contributed more nore than \$5,000). (See s	ection 507(d)(2).)			·
b List any managers of the foundation who other entity) of which the foundation ha			or an equally large porti	on of the ownership of a	partnership or
2 Information Regarding Contribut Check here ▶ if the foundation of the foundation makes gifts, grants, etc.	only makes contributions t	o preselected charitable o	organizations and does i		
a The name, address, and telephone num	ber of the person to whor	n applications should be	addressed:		-
b The form in which applications should t	pe submitted and informat	ion and materials they sh	ould include:		·
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographica	l areas, charitable fields,	kinds of institutions, or	other factors;	

ANNIE'S FOUNDATION, INC.

Form 990-PF (2008) FKA JILL E SIMPLOT FOUNDATION

Part XV | Supplementary Information (continued)

26-3702988 Page 11

3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	<u> </u>
a Paid during the year				
NONE				Į
				1
				I
				Í
Total	_	<u> </u>	▶ 3a	0.
b Approved for future payment				
				I
NONE				
110112				•
		1		
				ı
				i
				l
				1
				ı
Total			▶ 3b	0.

Form 990-PF (2008)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelat	ed business income		ided by section 512, 513, or 514	(e)
-	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	Cone		COGO		
a	ļ				
b	<u> </u>		├		
<u> </u>			+ -	 	
d			├	 	
e			 -	 	
† 	 	 	├		
g Fees and contracts from government agencies	ļ	 	├		
2 Membership dues and assessments	<u> </u>		-		
3 Interest on savings and temporary cash	1		ł		
investments		 -	-		
4 Dividends and interest from securities				 	
5 Net rental income or (loss) from real estate:	<u> </u>		- -		
a Debt-financed property			-		
b Not debt-financed property			 		
6 Net rental income or (loss) from personal	Ì				
property		ļ	 -	ļ <u>-</u>	
7 Other investment income			<u> </u>	ļ	
8 Gain or (loss) from sales of assets other			ļ		
than inventory	<u> </u>		<u> </u>		
9 Net income or (loss) from special events			├		
10 Gross profit or (loss) from sales of inventory	ļ		 		
11 Other revenue:			1		
a			├—	<u> </u>	
b	<u></u>		╁	<u> </u>	
<u> </u>	<u> </u>		├		
d			├		
6 Add columns (b) (d) and (c)		0.	-		0.
12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>				
(See worksheet in line 13 instructions to verify calculations.)				13	0.
Part XVI-B Relationship of Activities to	tne Acc	omplishment of Ex	cemp	ot Purposes	
Line No. Explain below how each activity for which incom			contri	buted importantly to the accor	nplishment of
the foundation's exempt purposes (other than b	y providing to	inds for such purposes).			
N/A					
					
					
					
					
					
					
	·				
					
					
					

Pi	art XVII	Information Re Exempt Organ		and Transactions a	nd Relationships With Nonc	haritable	B	
1	Did the ora		rectly engage in any of the follow	WING with any other organization	described in section 501(c) of		Yes	No
•)(3) organizations) or in section					
a			ation to a noncharitable exempt					(
_	(1) Cash	om and roper any reality				1 <u>a(1)</u>		х
	(2) Other :	assets				1a(2)	 	X
h	Other trans		•			14(2)		
٠			ble exempt organization			16(1)		x
			ncharitable exempt organization	1		1b(2)	-	X
		of facilities, equipment,	, -	•		1b(3)		X
		ursement arrangements				1b(4)		X
	• -	or loan guarantees				1b(5)		X
	` '	-	embership or fundraising solicita	ations		15(6)		X
C	. ,		uling lists, other assets, or paid			10		X
	_		=	•	ays show the fair market value of the good		sets.	
Ī					in any transaction or sharing arrangemen		,	
			other assets, or services receive		, J	.,		
(a)	Line no (b) Amount involved	(c) Name of noncharita	ble exempt organization	(d) Description of transfers, transactions,	and sharing ar	rangeme	ents
_			N/A					
2a	Is the found	dation directly or indirec	tly affiliated with, or related to, o	ne or more tax-exempt organiza	ations described			
		-	r than section 501(c)(3)) or in s			Yes	X	No
b		nplete the following sch						-
		(a) Name of org		(b) Type of organization	(c) Description of relation	onship		
		N/A			· ·			
Т			_		nts, and to the best of my knewledge and belief,	it is true, corre	ct,	
1	and complete	Declaration of preparer (other	r than taxpayer or fiduciary) is based	on all information of which preparer h	1			
	1	Jell Dem	sold!		X Mesident			
gn Here	Signatur	e of officer or trustee	V	Date	fitle			
	Prep	arer's		Da	te Check if Pre	parer's identify	Aiud unu	ber
<u> </u>	signi		S W BURGESS	11	1/13/09 self- employed ►			
	Pirm's	Firm's name (or yours EIDE BAILLY LLP						
	L 22 21	ti self-employed). 877 W. MAIN ST., STE. 800						
- 1	addres	address, and ZIP code BOISE, ID 83702 Phone no. 208						

FOOTNOTES

STATEMENT 1

APPLICATION FOR EXTENSION OF TIME TO FILE AN EXEMPT ORGANIZATION RETURN

UPON COMPLETION OF THE RETURN, IT WAS NOTICED THAT THE INCORRECT BOX FOR RETURN TYPE WAS MARKED. INSTEAD OF FORM 990-PF, THE FORM 990 BOX WAS MARKED INADVERTENTLY. PLEASE ACCEPT THE ATTACHED EXTENSIONS AS TIMELY FILED EXTENSIONS FOR THE TAXPAYERS FORM 990-PF.

Form **8868** (Rev. April 2009)

Department of the Treasury Internal Revenue, Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

• If y	you are filing for an Automatic 3-Month Extension, complete only Part I and check this box		▶ X					
-	If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form).							
Do n	not complete Part II unless you have already been granted an automatic 3-month extension on a previou	sly filed Fo	orm 8868.					
Pa	Automatic 3-Month Extension of Time. Only submit original (no copies needed).							
A cor	prporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and	complete						
Part f	l only		. ▶□					
	ther corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to reque e income tax returns.	st an exter	nsion of time					
noted (not a you r	etronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extend below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 election automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite of must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electron v.irs.gov/efile and click on e-file for Chanties & Nonprofits	tronically i or consolid	f (1) you want the additional ated Form 990-T. Instead,					
Туре	e or Name of Exempt Organization	Emp	Employer identification number					
print	ANNIE'S FOUNDATION, INC.	2	26-3702988					
file by due da filing y	y the Number, street, and room or suite no. If a P.O. box, see instructions.							
return		City, town or post office, state, and ZIP code. For a foreign address, see instructions.						
Chec	ck type of return to be filed(file a separate application for each return):							
X	Form 990 Form 990-T (corporation)	m 4720						
		m 5227						
		m 6069						
		m 8870						
• Th	he hooks are in the care of							
	he books are in the care of ▶ elephone No. ▶ FAX No. ▶							
Te	elephone No. ▶ FAX No. ▶							
Te • If t	elephone No. FAX No. the organization does not have an office or place of business in the United States, check this box	If this is fo	or the whole group, check this					
Te	elephone No. FAX No. the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)							
Te If t	the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN). If it is for part of the group, check this box and attach a list with the names and EINs of the group and automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time AUGUST 15, 2009, to file the exempt organization return for the organization name.	of all memb	pers the extension will cover.					
Te If the lift box	the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box and attach a list with the names and EINs of the group and attach a list with the names and EINs of the Group State of the Form 990-T) extension of time AUGUST 15, 2009, to file the exempt organization return for the organization names for the organization's return for	of all memb	pers the extension will cover.					
Te If the lift box	the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN). If it is for part of the group, check this box and attach a list with the names and EINs of the group and automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time AUGUST 15, 2009, to file the exempt organization return for the organization name.	of all members and all members and all members and all members and all members are all members and all members are all members and all members are all members	pers the extension will cover.					
Te If the lift box	the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time AUGUST 15, 2009 , to file the exempt organization return for the organization name is for the organization's return for Calendar year or	of all members of all	pers the extension will cover.					
Te If the lift to	the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time AUGUST 15, 2009 , to file the exempt organization return for the organization name is for the organization's return for Calendar year or X tax year beginning NOV 1, 2008 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any	of all members of all	The extension Change in accounting period					
Te If the lift box	the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) I fit is for part of the group, check this box I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time AUGUST 15, 2009 I to file the exempt organization return for the organization name is for the organization's return for I calendar year Or X tax year beginning NOV 1, 2008 If this tax year is for less than 12 months, check reason: Initial return Final return If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	of all members of all	The extension .					
Te If the lift box	the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time AUGUST 15, 2009 I to file the exempt organization return for the organization name is for the organization's return for Calendar year or X tax year beginning NOV 1, 2008 If this tax year is for less than 12 months, check reason: Initial return Final return If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated	of all members of all	The extension Change in accounting period					
Te • Iff box 1	the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time AUGUST 15, 2009 , to file the exempt organization return for the organization name is for the organization's return for Calendar year or Calendar year or Calendar year Or	of all members of all	The extension Change in accounting period					
Te If f box 1 2 3a	the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time AUGUST 15, 2009, to file the exempt organization return for the organization name is for the organization's return for Calendar year or Calendar year or	auntil ed above.	The extension Change in accounting period					
Te • Iff box 1	the organization does not have an office or place of business in the United States, check this box this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If it is for part of the group, check this box I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time AUGUST 15, 2009 , to file the exempt organization return for the organization name is for the organization's return for Calendar year or Calendar year or Calendar year Or	of all members of all	The extension Change in accounting period					

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 4-2009)

Form	3969 (Pay A-2009)		•			Dage 2		
	3868 (Rev. 4-2009)	-11-411				Page 2		
-	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and				▶□	K.		
	Only complete Part II if you have already been granted an automatic 3-month extension on a pr	eviously filed	rom	8868.				
	ou are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).							
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).								
Туре	Name of Exempt Organization	Employer identification num			mber			
print	A Little Control of the Control of t			26 2702000				
File by	ANNIE'S FOUNDATION, INC.	26-3702988 For IRS use only						
extend	Number, street, and room or suite no. If a P.O. box, see instructions.				У			
due da filing th	547 B MCCBBBBBB B1	** *	Cau william	VC \ 4.44-4-7-				
return	,				j			
institut	SALT LAKE CITY, UT 84105	是严重证明人	少进	Allega a Ju	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	ř		
Chec	k type of return to be filed (File a separate application for each return):	_						
LX.	Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust)	1041-A	Fo	rm 5227	Form	8870		
	Form 990-BL Form 990-PF Form 990-T (trust other than above) Form	1 4720	Fo	rm 6069				
STOR	P. Do not complete Part II if you were not already granted an automatic 3-month extension	on a previous	lv file	d Form 88	268.			
			,, ,,,,					
• Th	e books are in the care of							
Telephone No. ► FAX No. ►								
• If t	If the organization does not have an office or place of business in the United States, check this box							
• If t	his <u>is fo</u> r a Group Return, enter the organization's four d <u>igit G</u> roup Exemption Number (GEN)	If this	s is fo	the whole	group, chec	k this		
box]	If it is for part of the group, check this box and attach a list with the names are	nd EINs of all r	nemb	ers the ext	ension is for			
4	I request an additional 3-month extension of time until NOVEMBER 15, 2009.							
5	For calendar year , or other tax year beginning NOV 1, 2008 , and ending DEC 31, 2008							
6								
7	- ·· · · · · · · · · · · · · · · · · ·							
	INFORMATION NECESSARY TO FILE A COMPLETE AND ACC	CURATE 1	RET	URN I	TON			
YET AVAILABLE.								
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less	any						
	nonrefundable credits. See instructions.	1	8a	\$				
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and es	imated						
	tax payments made. Include any prior year overpayment allowed as a credit and any amount pa	i:						
	previously with Form 8868.	i j	8b	\$				
С	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required,	deposit		<u> </u>				
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See		8c	\$	N/A	1		
	Signature and Verification							
Under	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statemi	ents, and to the	hest of	my knowler	dae and helief			
it is tru	e, correct, and complete, and that I am authorized to prepare this form.				-30 4.1.5 001101,	,		

Title 🕨

Date ►

Form 8868 (Rev. 4-2009)

Signature >