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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

OMB No 1545-0052 2008

Department of the Treasury (77) Internal Revenue Service

	lendar year 2008, or tax year beginning		and ending	, ,	
G Ch	eck all that apply: Initial return Fina	l return X Amended	return Add	dress change Nar	ne change
Use	the DARR FINALLY FOUNDAMING T	NO		A Employer Identification nur	nber
IRS la Other		NC		36-3756870	
pri				B Telephone number (see the	instructions)
or ty	pe.			406-363-1222	
See Sp Instruc	ecific tions.			C If exemption application is	· •
		() (0)		D 1 Foreign organizations, chec	_
H ((c)(3) exempt private for		2 Foreign organizations meet here and attach computation	
	Section 4947(a)(1) nonexempt charitable to air market value of all assets at end of year J According to the section 4947(a)(1) nonexempt charitable to the section 4947(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(a)(ounting method: X Ca	rivate foundation	E If private foundation status	was terminated
' 7	, , , , , , , , , , , , , , , , , , ,	Other (specify)	ISII MCCIuai	under section 507(b)(1)(A)	
▶ ;	· · · · · · · · · · · · · · · · · · ·	column (d) must be on	cash hasis)	If the foundation is in a 60 under section 507(b)(1)(B)	
Part				1	
	Expenses (The total of amounts in	(a) Revenue and expenses per books	(b) Net investme income	int (c) Adjusted net income	(d) Disbursements for charitable
	columns (b), (c), and (d) may not neces-	expenses per seeks			purposes
	sarily equal the amounts in column (a) (see the instructions)				(cash basis only)
	Contributions, gifts, grants, etc, received (att sch)	199,350.			
	2 Ck If the foundn is not req to att Sch B				
	3 Interest on savings and temporary	125	1:3	N /A	
	cash investments . 4 Dividends and interest from securities	135. 58,173.	58,17	35. N/A	
	5a Gross rents	30,1/3.	30,1	73.	
⊇	b Net rental income or (loss)				
N107	6a Net gain/(loss) from sale of assets not on line 10	-41,679.	·		
≂≓R E	b Gross sales price for all assets on line 6a 285, 904.		··········		
എ √	7 Capital gain net income (from Part IV, line 2)			0.	* .
≅Ë	8 Net short-term capital gain				
≨ï	9 Income modifications			II RECEIVE	<u> </u>
E	10 a Gross sales less returns and				70
	allowances			MAR 3 0 201	OSC
SCANNED MAR	b Less: Cost of goods sold			3 MAR 3 0 201	0-8
E C	c Gross profit/(loss) (att sch)		······································		
Q	11 Other income (attach schedule) .			OGDEN, U	≥ √ ∨
G)				<u> </u>	
	12 Total. Add lines 1 through 11	215,979.	58,30)8.	
	13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages	U.			
	15 Pension plans, employee benefits				<u>. </u>
	140-1				
A D M	b Accounting fees (attach sch) See St 1	3,630.	3,63	30.	
I N		21,772.	21,77		
0 1	17 Interest				
O P E R A	18 Taxes (attach schedule) See Stmt 3	7,108.	7,10	08.	
ÂÃ	19 Depreciation (attach				
įį	sch) and depletion				
N V G E					
A E		1			
A E X D P	23 Other expenses (attach schedule)				
E N	See Statement 4	216.		16.	
Ē	24 Total operating and administrative expenses. Add lines 13 through 23.	32,726.	32,72	26.	
S	25 Contributions, gifts, grants paid Part XV	109,045.	52,12		109,045.
	26 Total expenses and disbursements.	· · - · - · · -			-
	Add lines 24 and 25	141,771.	32,72	26.	109,045.
	27 Subtract line 26 from line 12:				
	a Excess of revenue over expenses and disbursements	74,208.			
	b Net investment income (if negative, enter -0-)		25,58	32.	
	C Adjusted net income (if negative, enter -0-)				
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1,630,749. end-of-year figure reported on prior year's return) ... 74,208. 2 Enter amount from Part I, line 27a 2,658. 3 3 Other increases not included in line 2 (itemize) ► See Statement 5 1,707,615. 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize). 1,707,615. 6 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

		e the kind(s) of property sold (e.g., r se; or common stock, 200 shares ML		(b) How acquir P — Purchas D — Donatio	e (month, day, year)	(d) Date sold (month, day, year)
1a See Stat	ement 6			2 20110110		
b						
С						
d			_			
е						
(e) Gross	sales priçe	(f) Depreciation allowed (or allowable)	(g) Cost or other basi plus expense of sale		(h) Gaın or (e) plus (f) m	
a						
<u>b</u>						
c				<u> </u>		
d						
<u>e</u>			" 1 1 10/01/60			
(i) Fair Ma	ly for assets show rket Value 2/31/69	ing gain in column (h) and owned b (j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if an	(1)	(I) Gains (Colingain minus column (I) than -0-) or Losses (fi	k), but not less
a						
b	· .					
С						
d						
е						
. •	net income or (ne	t capital loss). If gain, also If (loss), entitions) as defined in sections 1222(5)	enter in Part I, line 7 ter -0- in Part I, line 7		2	-41,679.
	enter in Part I, line	e 8, column (c) (see the instructions	_		3	-1,739.
		r Section 4940(e) for Reduce	d Tax on Net Investme	nt Incom	e	
If 'Yes,' the founda	ation does not qua	ction 4942 tax on the distributable an lify under section 4940(e) Do not co in each column for each year; see th	mplete this part	•	Yes	X No
Base per Calendar yea	a) lod years ir (or tax year ling in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asse		(d) Distribution column (b) divided	
20	07	87,966.	1,815	.152.		0.048462
	06	78,153.	1,706			0.045803
20	05	73,748.	1,586			0.046486
20	04	46,944.	1,486	,474.		0.031581
20	03	62,852.		,879.		0.067447
2 Total of line	1, column (d)				2	0.239779
3 Average dist number of y	ribution ratio for the ears the foundation	ne 5-year base period – divide the to n has been in existence if less than	otal on line 2 by 5, or by the 5 years		3	0.047956
4 Enter the ne	t value of nonchar	itable-use assets for 2008 from Part	X, line 5		4	1,732,661.
5 Multiply line	4 by line 3			_	5	83,091.
6 Enter 1% of	net investment inc	come (1% of Part I, line 27b)			6	256.
7 Add lines 5	and 6				7	83,347.
, ,	•	om Part XII, line 4			8	109,045.
If line 8 is ei Part VI instr	qual to or greater t uctions.	han line 7, check the box in Part VI,	line 1b, and complete that p	art using a		he n 990-PF (2008)

	990-PF (2008) RAPP FAMILY FOUNDATION, INC 36-3/568/U		_	age 4
<u>Part</u>	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the instruc	tions)		 ;
1 a	Exempt operating foundations described in section 4940(d)(2), check here . and enter 'N/A' on line 1.			
	Date of ruling letter: (attach copy of ruling letter if necessary - see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,		2	<u> 256.</u>
	check here ► X and enter 1% of Part I, line 27b			1
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
2	foundations only. Others enter -0-)			0.
3	Add lines 1 and 2		- 2	256.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-).			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		- 2	256.
6	Credits/Payments:			
	2008 estimated tax pmts and 2007 overpayment credited to 2008			
	Exempt foreign organizations — tax withheld at source 6b			
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld 6d			
				512.
_				<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
8				0.
9				<u></u> 256.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid See Statement 8			256. 256.
11	Enter the amount of line 10 to be: Credited to 2009 estimated tax			230.
Pan	VII-A Statements Regarding Activities	["""]		
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes			
	(see the instructions for definition)?	1 b		X
	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.			
	Did the foundation file Form 1120-POL for this year?	1 c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
_	(1) On the foundation . \(\brace \\$ \) 0. (2) On foundation managers \(\brace \\$ \) Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on			
е	foundation managers •\$ 0.			
2	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			
				}
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	3		Х
4-	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
		4b	N	/A
	If 'Yes,' has it filed a tax return on Form 990-T for this year?	5		X
Э	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	┝┷┤		<u> </u>
_	If 'Yes,' attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			i .
	• 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?		37	ļ
		6	X	
	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV.	7	X	
8 a	Enter the states to which the foundation reports or with which it is registered (see the 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	- OL	v	ļi
	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation	8b	Х	
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	 -		
	for calendar year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names	,,	v	
	and addresses . See Statement 9	10	<u>X</u> .	Щ_

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	ements Regarding Activities Continued			
11 At any time di within the mea	uring the year, did the foundation, directly or indirectly, own a controlled entity aning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)		11	x
12 Did the founda August 17, 20	ation acquire a direct or indirect interest in any applicable insurance contract before 108?.		12	x
13 Did the foundate Website address	ation comply with the public inspection requirements for its annual returns and exemptions.	on application?	13	Х
	ess	ne no ► 208-8	16-26	91
Located at ►	187 ROCK ROAD KAMIAH ID ZIP + 4	83536	- -	
15 Section 4947((a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		N/A	
	amount of tax-exempt interest received or accrued during the year	► 15		N/A
	ements Regarding Activities for Which Form 4720 May Be Required		1 1.	<u> </u>
	20 if any item is checked in the 'Yes' column, unless an exception applies.		-	Yes No
,	ar did the foundation (either directly or indirectly):	□., ⊡.,	1	
(1) Engage in	n the sale or exchange, or leasing of property with a disqualified person?	Yes X No	1	
(2) Borrow m	noney from, lend money to, or otherwise extend credit to (or accept it from) a	Yes X No		
	oods, services, or facilities to (or accept them from) a disqualified person?	Yes X No		
	pensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X No		
(5) Transfer a for the be	any income or assets to a disqualified person (or make any of either available enefit or use of a disqualified person)?	Yes X No		
foundation	pay money or property to a government official? (Exception. Check 'No' if the n agreed to make a grant to or to employ the official for a period after termination ment service, if terminating within 90 days.)	Yes X No		
b If any answer Regulations s	ris 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in section 53.4941(d)-3 or in a current notice regarding disaster assistance (see the instruc	n tions)?	1 b	N/A
Organizations	s relying on a current notice regarding disaster assistance check here	. ▶∐		
c Did the found that were not	lation engage in a prior year in any of the acts described in 1a, other than excepted acts corrected before the first day of the tax year beginning in 2008?	5,	1 c	X
2 Taxes on failu private operat	ure to distribute income (section 4942) (does not apply for years the foundation was a ting foundation defined in section 4942(j)(3) or 4942(j)(5))			
a At the end of and 6e, Part	tax year 2008, did the foundation have any undistributed income (lines 6d XIII) for tax year(s) beginning before 2008?	Yes X No		
If 'Yes,' list th	ne years > 20, 20, 20			
b Are there any (relating to in	y years listed in 2a for which the foundation is not applying the provisions of section 494 acorrect valuation of assets) to the year's undistributed income? (If applying section 494)	2(a)(2) 2(a)(2) to		
•	d, answer 'No' and attach statement – see the instructions.)		2b	N/A
	ons of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years 20, 20, 20	s nere.		
3a Did the found enterprise at	lation hold more than a 2% direct or indirect interest in any business any time during the year?	Yes X No		
b If 'Yes,' did it or disqualified by the Comm (3) the lance	have excess business holdings in 2008 as a result of (1) any purchase by the foundation of persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approximation under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to the foundation had excess business holdings in 2008)	n ved		
determine if t	the foundation had excess business holdings in 2008)		3 b	N/A_
4a Did the found charitable pur	lation invest during the year any amount in a manner that would jeopardize its rposes?		4a	<u>x</u>
h Did the found	dation make any investment in a prior year (but after December 31, 1969) that could			
ieopardize its	charitable purpose that had not been removed from jeopardy before the first day of		4b	Х
BAA	beginning in 2008?	 F		-PF (2008)
			_	, -/

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Part VII-B Statements Regarding Activiti	es for Which Form	1 4720 May Be Req	uired (continued)		
5a During the year did the foundation pay or incu	r any amount to:	<u> </u>			
(1) Carry on propaganda, or otherwise attempt	ot to influence legislation	n (section 4945(e))?	. Yes X	No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ition drive?		·	No	
(3) Provide a grant to an individual for travel,			∐ Yes ∑	No	
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	4940(d)(2)? (see instru	uctions)	Yes X] No	
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	. Yes X] No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53.4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the exception disaster assistance	tions	5b	N/A
Organizations relying on a current notice rega	rding disaster assistand	ce check here			
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure responsible 'Yes,' attach the statement required by Region 19 (1997).	sibility for the grant?		N/A Yes] No	
6a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or ind	irectly, to pay premium	s ∐Yes ∑	No No	
b Did the foundation, during the year, pay premi	-	tly, on a personal bene	fit contract?	6 b	<u> </u>
If you answered 'Yes' to 6b, also file Form 88.				a	
7a At any time during the tax year, was the found				No	
b If yes, did the foundation receive any proceed	s or have any net incor	ne attributable to the tra	ansaction? .	<u> 7b </u>	N/A_
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Paid	Employees	,
and Contractors					
1 List all officers, directors, trustees, foundation				1	
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	
See Statement 10					
<u> </u>		0.	0	•	0.
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1— see ir	l nstructions). If none, (enter 'NONE.'	
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense other allo	
None					
					- 10
Total number of other employees paid over \$50,000	<u>. </u>	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	<u> </u>	
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Form 990-PF (2008) RAPP FAMILY FOUNDATION, INC [Part VIII] Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	
3 Five highest-paid independent contractors for professional services — (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type 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 as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 SCHOOL COUNCILOR PROGRAM: ASSISTANCE FOR UNDERPRIVILEGED STUDENTS IN 15 DIFFERENT SCHOOLS IN RAVALLI COUNTY.	
2 <u>N/A</u>	22,918.
3 <u>N/A</u>	
. 2/2	
4 <u>N/A</u>	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	ranount
2	
All other program-related investments. See instructions.	
Total. Add lines 1 through 3	0.
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Pai	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes: Average monthly fair market value of securities		1 540 004
		1 a	1,540,021.
	Average of monthly cash balances	1 b	50,026.
•	Fair market value of all other assets (see instructions)	1 c	169,000.
	d Total (add lines 1a, b, and c)	1 d	1,759,047.
•	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,759,047.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	26,386.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,732,661.
6	Minimum investment return. Enter 5% of line 5	6	86,633.
Pai	t XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here ► and do not complete this pa	ating rt.)	foundations
1	Minimum investment return from Part X, line 6	1	86,633.
	a Tax on investment income for 2008 from Part VI, line 5 . 2a 256.		
	Income tax for 2008 (This does not include the tax from Part VI.)	- 1	
	Add lines 2a and 2b	2c	256.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	86,377.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	86,377.
6	Deduction from distributable amount (see instructions) .	6	
7		7	86,377.
Pai	TXII Qualifying Distributions (see instructions)	,	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	109,045.
	Program-related investments — total from Part IX-B	1 b	
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: a Suitability test (prior IRS approval required)	3a	
ı	Cash distribution test (attach the required schedule)	3ь	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	109,045.
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 (see instructions)	5	256.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	108,789.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whet qualifies for the section 4940(e) reduction of tax in those years.	her the	e foundation
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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2007	(c) 2007	(d) 2008
Distributable amount for 2008 from Part XI, line 7				86,377.
2 Undistributed income, if any, as of the end of 2007:				
a Enter amount for 2007 only			78,038.	
b Total for prior years: 20, 20, 20	· ···· · · · · · · · · · · · · · · · ·	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: ► \$ 109,045.		ŀ	70 020	
a Applied to 2007, but not more than line 2a			78,0 <u>38</u> .	
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 .				31,007.
e Remaining amount distributed out of corpus	0.		}	3
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	*	**	*	ī
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		0.		
c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency				
ed 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 instructions			0.	
f Undistributed income for 2008 Subtract lines 4d and 5 from line 1. This amount must be				55 270
distributed in 2009				55,370.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3)	0			
(see instructions)	0.			
8 Excess distributions carryover from 2003 not applied on line 5 or line 7 (see instructions).	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 .				
b Excess from 2005 .				
c Excess from 2006				
d Excess from 2007				
e Excess from 2008	<u>.</u>			

BAA

Form 990-PF (2008) RAPP FAMILY FOUN				36-375687	<u>~</u>
Part XIV Private Operating Foundation					N/A
1 a If the foundation has received a ruling or on its effective for 2008, enter the date of the	determination letter ruling		operating foundation	n, and the ruling	
b Check box to indicate whether the foundate	ion is a private ope	rating foundation de	escribed in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed	(a) 2008	(b) 2007	(c) 2006	(d) 2005	(e) Total
b 85% of line 2a					
 Qualifying distributions from Part XII, line 4 for each year listed 					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly 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:		i			
(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 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 an exempt organization .					
(4) Gross investment income			,		
Part XV Supplementary Information assets at any time during the	(Complete this e year – see in	part only if the structions.)	organization ha	id \$5,000 or mo	re in
Information Regarding Foundation Manage a List any managers of the foundation who close of any tax year (but only if they have None	have contributed me	ore than 2% of the than \$5,000). (See	total contributions r section 507(d)(2))	eceived by the foun	dation before the
b List any managers of the foundation who	own 10% or more o	f the stock of a corp	poration (or an equi	ally large portion of	the ownership of
a partnership or other entity) of which the None	foundation has a 1	0% or greater intere	est.		
2 Information Regarding Contribution, Gra	nt Gift Loan Saha	larchin etc Proces	me.		
Check here \(\sum \) if the foundation only requests for funds. If the foundation make complete items 2a, b, c, and d.	nakes contributions	to preselected char	ritable organization		
a The name, address, and telephone number	er of the person to	whom applications s	should be addressed	d:	
	•				
See Statement 11		·			
b The form in which applications should be	submitted and infor	mation and materia	ls they should inclu	de:	
See Statement for Line 2a.					
c Any submission deadlines:					
See Statement for Line 2a					
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charital	ble fields, kinds of i	nstitutions, or other	factors:
See Statement for Line 2a					
				_	(0000)

3	Grants and Contributions Paid During the Ye	ear or Approved for Fut	ure Paymen	it	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	substantial contributor	recipient	Contribution	
	Name and address (home or business) Paid during the year Statement 12	substantial contributor	recipient	Contribution	
	Total			<u> </u> ► 3a	109,045.
— <u>i</u>	Approved for future payment				205,045.
	Total .			► 3b	·

Page 12

Part XVI-A Analysis of Income-Producing	Activities
Enter gross amounts unless otherwise indicated	Unrelat

er gross amounts unless otherwise indicated	Unrelated I	ousiness income	Excluded by	section 512, 513, or 514	
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions
a			1		Coo the mandeners
b		-			
C	-				
d	+		+ +-		
e	 		+ +		
g Fees and contracts from government agencies			1 -	_	
Membership dues and assessments				-	
Interest on savings and temporary cash investments			14	135.	
Dividends and interest from securities			14	58,173.	
Net rental income or (loss) from real estate:					
a Debt-financed property	ļ		++		
Not debt-financed property			+		
Net rental income or (loss) from personal property	-		+ + -		
Other investment income			18	-41,679.	
Gain or (loss) from sales of assets other than inventory	 		10	-41,079.	
Net income or (loss) from special events Gross profit or (loss) from sales of inventory			+		
Other revenue	1		1 1 -		
			+		
a b			1 1 -		
C					
d					
e			 -		
Subtotal. Add columns (b), (d), and (e)				16,629.	16 600
Total. Add line 12, columns (b), (d), and (e)	1 k \			13	_ 16,629
e worksheet in the instructions for line 13 to verify o					
t XVI-B Relationship of Activities to the	e Accomplish	nment of Exem	pt Purpose	es	
Explain below how each activity for which accomplishment of the foundation's exemp	ncome is reporte t purposes (othe	ed in column (e) of r than by providing	Part XVI-A c	ontributed important ch purposes) (See t	ly to the he instructions)
3 INTEREST EARNED ON INVESTME					
4 DIVIDENDS EARNED ON INVESTM					
18 LOSS FROM THE SALES OF SECU	RITIES HEL	D TO PRODUCE	INCOME	FOR CHARITAB	LE GIVING

Line No. ▼	accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See the instructions)					
3	INTEREST EARNED ON INVESTMENTS HELD TO PRODUCE INCOME FOR CHAIRTABLE GIVING					
4	DIVIDENDS EARNED ON INVESTMENTS HELD TO PRODUCE INCOME FOR CHARITABLE GIVING					
18	LOSS FROM THE SALES OF SECURITIES HELD TO PRODUCE INCOME FOR CHARITABLE GIVING					

Pa	ert XVII	Information Re Exempt Organ	egarding Tr	ansfers To a	nd Transaction	ons	and Relationsh	nips With No	ncharitable	•	
		`	_							Yes	No
	1 Did the description	ie organization directly ibed in section 501(c) on ig to political organizat	or indirectly e of the Code (of ions?	ngage in any of ther than sectior	the following with 501 (c)(3) organ	th any nizatio	y other organizations ons) or in section	on 527,			
		fers from the reporting		a noncharitable	exempt organiz	ation	of:				
	(1) C	· -							1a(1)		Х
	• •	ther assets							. 1a (2)		Х
	b Other	transactions:									
	(1) S	ales of assets to a non-	charitable exe	mpt organization	n				. 1b(1)		_X
	(2) P	urchases of assets from	n a noncharita	ible exempt orga	anization		•		. 1 b (2)		X
	(3) R	ental of facilities, equip	ment, or othe	rassets					. 1 b (3)		Х
		eimbursement arrangei							1 b (4)		Х
		oans or loan guarantee							. 1b (5)		Х
	(6) P	erformance of services	or membersh	ip or fundraising	solicitations.				1 b (6)		Х
	c Sharıı	ng of facilities, equipme	ent, mailing lis	its, other assets,	, or paid employ	ees.	•	•	. <u>1c</u>	<u> </u>	Х
	d If the the go any tr a) Line no.	answer to any of the a cods, other assets, or s ansaction or sharing at (b) Amount involved		complete the follow the reporting how in column (of noncharitable exert			umn (b) should alv undation received l ods, other assets, (d) Description of tran				<u></u>
	/A	(b) Amount involved	(C) Name (i ilonenaritable exen	npt organization	 	(d) pescripaon or dar	isicis, transactions,	and sharing arrai	ilgerrieri	-
	,										
_											
		-									
						<u> </u>				_	
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		_									
_				_ 		 	 .	-		_	
	descr	foundation directly or ibed in section 501(c) of s,' complete the following	of the Code (o	ated with, or relation	ated to, one or n n 501(c)(3)) or in	nore i	tax-exempt organi ion 527?	zations	. Yes		No
		(a) Name of organizati	on	(b) Type	e of organization)	(0) Description o	f relationship		
N	/A										
_											
_					<u>. </u>						
		<u></u> .			 						
	Under pena complete	alties of perjury, I declare that Declaration of preparer (other I	have examined the taxpayer or fice	nis return, including ad luciary) is based on a	ccompanying schedule ill information of which	es and prepa	statements, and to the birer has any knowledge	est of my knowledge	e and belief, it is tri	ue, corre	ct, and
c	> /			//RO		J	2-24 11	► Presid	ent		
S	Signi	ature of officer or trustee	THE C				Date	Title			
Ğ				10/2/11		Т	Date , /		Preparer's Identify	ving num	ber
H	Paid	Preparer's signature	mit of	17/18			3/19/10	Check if self-	(See Signature in	tne inst	rs) 74 =
E R E	Pre-	NOTH						employed > X	RHA 1-000	21	
_	parer's Use	Firm's name (or yours if self-employed).	<u>A L. PFAF</u> ROCK ROAD					EIN P R	4/1039	991	
	Only	employed), address, and ZIP code KAMI		536-9604				Phone no	208-935-0	819	
B	<u>└</u>	I ru cone + range					_	1. 1010 10	Form 9 9		(2008

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ and 990-PF ► See separate instructions. OMB No 1545-0047

2008

Name of the organization		Employer identification number
RAPP FAMILY FOUNDATION, INC		36-3756870
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as 527 political organization	a private foundation
Form 990-PF	X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a pr 501(c)(3) taxable private foundation	vate foundation
Check if your organization is covered by the General boxes for both the General Rule and a Speci	al Rule or a Special Rule. (Note: Only a section 501(c)(7), (8), or (10) at Rule. See instructions.)) organization can check
General Rule — X For organizations filing Form 990, 990-E2 contributor. (Complete Parts I and II.)	Z, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one
Special Rules —		
509(a)(1)/170(b)(1)(A)(vi) and received from a	Form 990, or Form 990-EZ, that met the 33-1/3% support to my one contributor, during the year, a contribution of the greater of 2% of the amount on Form 990-EZ, line 1. Complete Parts	(1) \$5,000 or (2) 2% of the
aggregate contributions or beguests of m	nization filing Form 990, or Form 990-EZ, that received from ore than \$1,000 for use <i>exclusively</i> for religious, charitable, children or animals Complete Parts I, II, and III	any one contributor, during the year, scientific, literary, or educational
some contributions for use exclusively to \$1,000 (If this box is checked, enter here	nization filing Form 990, or Form 990-EZ, that received from religious, charitable, etc, purposes, but these contributions that were received during the year for Parts unless the General Rule applies to this organization by \$5,000 or more during the year.)	did not aggregate to more than or an exclusively religious, charitable,
990-PF) but they must answer 'No' on Part I'	by the General Rule and/or the Special Rules do not file Sch V, line 2 of their Form 990, or check the box in the heading of meet the filing requirements of Schedule B (Form 990, 990)	of their Form 990-EZ, or on line 2 of
BAA For Privacy Act and Paperwork Reductor Form 990. These instructions will be issued to the control of the co	ction Act Notice, see the Instructions Scheduled separately.	ule B (Form 990, 990-EZ, or 990-PF) (2008)

	B (Form 990, 990-EZ, or 990-PF) (2008)	Page 1	of 1 of Part I
Name of org		' '	Identification number
	FAMILY FOUNDATION, INC	36-3	756870
Part I	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	HOWARD RAPP, JR		Person Payroll
	PO_BOX_537	\$169,000.	Noncash X
	HAMILTON, MT 59840		(Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	HOWARD RAPP, JR	-	Person X Payroll
	PO_BOX_537	\$30,000.	Noncash
	HAMILTON, MT 59840	-	(Complete Part II if there is a noncash contribution)
(a) Number	(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)
(a) Number	(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)
(a) Number	(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)
(a) Number	(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)
RΔΔ	TEFA07021 08/05/08	Schedule B (Form 990	l), 990-FZ, or 990-PF) (2008)

Part II	Noncash Property (see instructions.)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	700 S 2ND, HAMILTON, MT		
		\$ 169,000.	6/10/08
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		1 L D /F 000 000 F7	000 DEX (2009)

Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2008)		P	age 1	of 1	of Part III
Name of organ	nization				Employer Identifica	
	AMILY FOUNDATION, INC				36-3756870)
Part III	Exclusively religious, charitable, e organizations aggregating more the	tc, individual contributio an \$1,000 for the year.(C	ns to sectio omplete cols (a	n 501(c)() through (7), (8), or (10) e) and the follow	ng line entry.)
	For organizations completing Part III, enter contributions of \$1,000 or less for the year.	total of <i>exclusively</i> religious, cl (Enter this information once –	naritable, etc, see instruction	ns.) .	► \$	N/A
(a)	(b)	(c)			(d)	
No. from Part I	Purpose of gift	Use of gift	1	Desc	ription of how git	it is held
	N/A					
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relati	onship of t	transferor to tran	sferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		Desci	(d) ription of how git	t is held
		(e)				
	Transferee's name, addres	Relationship of transferor to transferee			sferee	
(a) No. from Part I	(b) Purpose of gift			Desci	(d) ription of how gif	t is held
						
		(e) Transfer of gift				
	Transferee's name, addres	Relati	onship of t	ransferor to tran	sferee	
(a) No. from Part I	(b) (c) Purpose of gift Use of gift			Desci	(d) ription of how gif	t is held
	Transferee's name, addres	Relationship of transferor to transferee			sferee	
RΔΔ			Sabadu	le R (Form	990 990-F7 or	990-PE) (2008)

2008	Federal Statements	Page 1
	RAPP FAMILY FOUNDATION, INC	36-3756870
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees	(a) (b) Net (c) Expenses Investment Adjusted	(d) Charitable
BOOKKEEPING & TAX PREP	per Books Income Net Income	Purposes 0.
Statement 2 Form 990-PF, Part I, Line 16c Other Professional Fees		
MANAGEMENT FEES .	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 21,772. \$ 21,772. Total \$ 21,772. \$ 21,772.	(d) Charitable Purposes \$ 0.
Statement 3 Form 990-PF, Part I, Line 18 Taxes		
ANNUAL REPORT EXCISE TAX FOREIGN TAX	(a)	(d) Charitable Purposes \$ 0.
Statement 4 Form 990-PF, Part I, Line 23 Other Expenses		
BANK SERVICE CHARGES OFFICE POSTAGE SAFETY DEPOSIT	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 46. \$ 46. 42. 42. 41. 41. 87. 87. Total \$ 216.	(d) Charitable Purposes

2008	Federal Statem	ents		Page 2
	RAPP FAMILY FOUNDAT	TION, INC	 	36-3756870
Statement 5 Form 990-PF, Part III, Line 3 Other Increases				
ADJUSTMENT TO ASSET BASIS			Total \$	2,658. 2,658.
Statement 6 Form 990-PF, Part IV, Line 1 Capital Gains and Losses for Tax o	n Investment Income			
Capital Gallis and Losses for Tax o				
		(b) How	(c) Date	(d) Date Sold
	ription	<u>Acquired</u> Purchased	<u>Acquired</u> 10/16/2007	7/25/2008
1 130 NOVARTIS 2 100 NOVARTIS		Purchased	10/16/2007	9/30/2008
3 .70 ROYAL BANK		Purchased	10/11/2007	9/25/2008
4 2130 ACOM		Purchased	Various	Various
5 1.03 AEGON		Purchased	9/15/2004	Various
5 1.03 AEGON 6 75 AKZO 7 290 ASTRAZENECA		Purchased	2/02/2004	4/21/2008
7 290 ASTRAZENECA		Purchased	5/15/2007	Various
8 630 DEUTSCHE		Purchased	2/02/2004	11/19/2008
9 160 FRANCE TELECOM		Purchased	6/30/2004	2/15/2008
10 225 LUNDBECK		Purchased	4/25/2007	12/04/2008
11 .92 HSBC HLDGS		Purchased	1/10/2007	Various
12 245 HITACHI LIMITED	T.178	Purchased	2/02/2004	Various
13 175 MILLEA/TOKIO MACH	INE	Purchased	2/02/2004	5/02/2008
14 2760 NEC		Purchased Purchased	Various Various	Various Various
15 180 NESTLE		rurchaseu	Valious	10/10/2000

<u> 1 C C II</u>	1 Tay Description	<u> </u>		
1	130 NOVARTIS	Purchased	10/16/2007	7/25/2008
2	100 NOVARTIS	Purchased	10/16/2007	9/30/2008
3	.70 ROYAL BANK	Purchased	10/11/2007	9/25/2008
2 3 4 5 6 7	2130 ACOM	Purchased	Various	Various
5	1.03 AEGON	Purchased	9/15/2004	Various
6	75 AKZO	Purchased	2/02/2004	4/21/2008
7	290 ASTRAZENECA	Purchased	5/15/2007	Various
8 9	630 DEUTSCHE	Purchased	2/02/2004	11/19/2008
9	160 FRANCE TELECOM	Purchased	6/30/2004	2/15/2008
10	225 LUNDBECK	Purchased	4/25/2007	12/04/2008
īĭ	.92 HSBC HLDGS	Purchased	1/10/2007	Various
12	245 HITACHI LIMITED	Purchased	2/02/2004	Various
13	175 MILLEA/TOKIO MACHINE	Purchased	2/02/2004	5/02/2008
14	2760 NEC	Purchased	Various	Various
15	180 NESTLE	Purchased	Various	Various
16	280 NIPPON	Purchased	2/02/2004	12/10/2008
17	80 NOVARTIS	Purchased	10/16/2007	10/21/2008
18	.25 ROYAL BANK OF SCOTLAND	Purchased	10/11/2007	11/21/2008
19	240 SWISSOM AG	Purchased	2/02/2004	11/04/2008
20	380 TOPPAN	Purchased	Various	Various
21	320 UNILEVER	Purchased	Various	4/01/2008
22	222 COVIDIEN	Purchased	Various	1/29/2008
23	300 ALLSTATE	Purchased	1/23/2004	
24	1500 AMERICAN STRATEGIC	Purchased	7/30/2002	12/09/2008
25	1700 BLACKROCK	Purchased	10/20/2004	9/26/2008
26	51 EMBARQ CORP	Purchased	8/01/1992	6/20/2008
27 27	400 FURNITURE BRANDS	Purchased	1/23/2004	12/09/2008
28	1000 ING GROUP	Purchased	7/11/2002	12/09/2008
29 29	300 SEACOAST	Purchased	1/23/2004	12/09/2008
30	600 TUPPERWARE	Purchased	1/29/2004	3/24/2008
31	282.98 HOTCHKIS	Purchased	Various	11/17/2008
32	36.59 LEGG MASON	Purchased	Various	10/06/2008
33	46.40 ALLIANCE BERNSTIEN	Purchased	1/11/2007	9/29/2008
33 34	14.08 COLUMBIA	Purchased	1/11/2007	1/14/2008
	118.40 EUROPACIFIC	Purchased	1/11/2007	9/29/2008
35	118.40 EUROPACIFIC 142.17 HARBOR INTERNATIONAL	Purchased	1/11/2007	9/29/2008
36	8.05 HARTFORD MIDCAP	Purchased	1/11/2007	1/14/2008
37			5/14/2007	11/17/2008
38	923.94 HOTCHKIS & WILEY	Purchased	1/11/2007	1/14/2008
39	.95 JANUS ADVISER	Purchased	Various	10/06/2008
40	111.25 LEGG MASON	Purchased	1/11/2007	1/14/2008
41	30.34 NEUBERGER BERMAN	Purchased	1/11/2007	1/14/2008
42	127.66 PIMCO COMMODITY	Purchased	1/11/2007	1/14/2000

Federal Statements

Page 3

RAPP FAMILY FOUNDATION, INC

36-3756870

Statement 6 (continued)
Form 990-PF, Part IV, Line 1
Capital Gains and Losses for Tax on Investment Income

	(e) Gross	(f) Deprec.	(g) Cost	(h) Gain	(i) FMV	(j) Adj. Bas.	(k) Excess	(1) Gain
<u>Item </u>	<u>Sales</u> 7,702.	Allowed .	Basis 6,855.	<u>(Loss)</u> 847.	12/31/69		<u>(i)-(j)</u>	(Loss) \$ 847.
2	5,232.		5,273.	-41.				-41.
2 3 4 5 6 7 8	3. 18,500.		8. 25,682.	-5. -7,182.				-5. -7,182.
5 6	11. 6,792.		12. 2,995.	-1. 3,797.				-1. 3,797.
7	14,199.		15,627.	-1,428.				-1,428.
8 9	8,505. 5,488.		12,506. 4,194.	-4,001. 1,294.				-4,001. 1,294.
10	4,376. 77.		5,578. 82.	-1,202.				-1,202. -5.
11 12	17,914.		15,656.	-5. 2,258.				2,258.
13 14	7,655. 14,781.		4,650. 13,989.	3,005. 792.				3,005. 792.
15	16,377.		10,923.	5,454.				5,454.
16 17	7,053. 4,065.		6,434. 4,219.	619. -154.				619. -154.
18 19	5. 7,418.		55. 8,064.	-50. -646.				-50. -646.
20	21,875.		19,325.	2,550.				2,550.
21 22	10,907. 9,504.		6,612. 7,156.	4,295. 2,348.				4,295. 2,348.
23 24	7,991. 10,643.		13,693. 16,875.	-5,702. -6,232.				-5,702. -6,232.
25	17,675.		25,073.	-7,398.				-7,398.
26 27	2,193. 1,257.		847. 13,121.	1,346. -11,864.				1,346. -11,864.
28	10,285.		25,004.	-14,719.				-14,719. -3,839.
29 30	1,825. 22,142.		5,664. 10,861.	-3,839. 11,281.				11,281.
31 32	1,647. 1,339.		3,264. 2,262.	-1,617. -923.				-1,617. -923.
33	703.		1,031.	-328.				-328.
34 35	330. 4,680.		317. 5,413.	13. -733.				13. -733.
36 37	1,809. 162.		1,894. 182.	-85. -20.				-85. -20.
38	5,377.		14,460.	-9,083.				-9,083.
39 40	17. 4,186.		17. 9,058.	0. -4,872.				0. -4,872.
41 42	1,007. 2,197.		1,000. 1,652.	7. 545.				7. 545.
34	2,131.		1,002.	010.			Total	

Statement 7 Form 990-PF, Part VI, Line 7 Total Credits and Payments

Tax Credits and Payments
Original Return Overpayment . . .

	\$ 5,228.
	-4,716.
otal	\$ 512.

2008 Federal Statements Page						Page 4
	R.	APP FAMILY FOUNDATION	ON, INC			36-3756870
	Statement 8 Form 990-PF, Part VI, Line 10 Overpayment					
	Overpayment				Total \$	256. 256.
	Statement 9 Form 990-PF, Part VII-A, Line 10 Substantial Contributors During the Ta	ax Year				
	Name of Substantial Contributo	r Address	of Sub	stantial C	Contributo	<u>r</u>
	HOWARD B RAPP, JR	PO BOX 5 HAMILTON		9840		
	Form 990-PF, Part VIII, Line 1 List of Officers, Directors, Trustees, an Name and Address	nd Key Employees Title and Average Hours Per Week Devoted	Co L <u>sa</u>	mpen-b	Contri- ution to BP & DC	Expense Account/ Other
	Name and Address THOMAS G BRADER	Average Hours	Cor L sa	mpen-b	ution to	Account/ Other
	106 CANYON CREEK RD HAMILTON, MT 59840	0	•			•
	JOHN J ORMINSTON NW 380 BLODGETT CAMP RD HAMILTON, MT 59840	Vice President O		0.	0.	0.
	ILEEN R PARSONS 556 PARADISE TRAIL HAMILTON, MT 59840	Secretary 0		0.	0.	0.
	JOHN J ORMINSTON NW 380 BLODGETT CK CAMP RD HAMILTON, MT 59840	Treasurer 0		0.	0.	0.
	DIANE THOMAS RUPPERT 172 GOLF COURSE ROAD HAMILTON, MT 59840	Director 0		0.	0.	0.
	LARRY JOHNSON PO BOX 500	Director 0		0.	0.	0.
	HAMILTON, MT 59840	•				

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RAPP FAMILY FOUNDATION, INC

36-3756870

Statement 11 Form 990-PF, Part XV, Line 2a-d **Application Submission Information**

Name of Grant Program:

Name:

THOMAS G BRADER

Care Of:

C/O RAVALLI COUNTY BANK

Street Address:

PO BOX 150

City, State, Zip Code:

HAMILTON, MT 59840 406-363-1222

Telephone:

Form and Content: PURPOSE AND PERCENTAGE OF VOLUNTEER LABOR Submission Deadlines: OCTOBER 1ST LIMITED TO RAVALLI COUNTY

Statement 12 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

News and Address	Donee	Found- ation	Purpose of Grant	Amount
Name and Address SCHOOL COUNCELOR PROGRAM PO BOX 1222 HAMILTON, MT 59840, MT 59840	Relationship NONE	<u>Status</u> N/A	TO ASSIST UNDERPRIVIDGED SCHOOL CHILDREN	\$ 22,918.
BEAR HAMILTON, MT 59840	NONE		SCHOLARSHIPS	1,500.
BALLET BITTERROOT HAMILTON, MT 59840	NONE		UNDERWRITE PERFORMANCE	1,000.
BITTERROOT LAND TRUST HAMILTON, MT 59840	NONE		ENDOWMENT AND GARDEN PROJECT	3,000.
BITTERROOT CASA IND HAMILTON, MT 59840	NONE		LEGAL ASSISTANCE FOR NEEDY	2,500.
BITTERROOT DRAGON HAMILTON, MT 59840			TRAVEL EXPENSE	1,000.
BITTERROOT HUMANE HAMILTON, MT 59840	NONE		OPERATING EXPENSE	5,000.
BITTERROOT AUDUBON HAMILTON, MT 59840	NONE		WEBSITE CONSTRUCTION	450.
BITTERROOT BACK COUNTRY HORSEMAN HAMILTON, MT 59840	NONE		BEAR AWARENESS PROGRAM	539.
BITTERROOT CHAPTER OF WOMEN VOTERS HAMILTON, MT 59840	NONE		EDUCATIONAL EVENT	400.

2008 `	Federal Statements RAPP FAMILY FOUNDATION, INC			Page 6 36-3756870	
•					
Statement 12 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year					
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount	
BITTERROOT COMMUNTIY BANDS HAMILTON, MT 59840	NONE		PERCUSSION EQUIPMENT	\$ 8	00
CORVALLIS HIGH SCHOOL HAMILTON, MT 59840	NONE		PERFORMANCE CLOTHING	5	00
CUB SCOUTS PACK 4915 HAMILTON, MT 59840	NONE		EQUIPMENT AND TRAINING	5	00
ACT OF KINDNESS CORVALLIS, MT 59828	NONE		CHRISTMAS SHARING TREE	1,0	00
BR CROSS COUNTRY SKI CORVALLIS, MT 59828	NONE		SNOW MOBILE	1,0	00
BR SPECIAL OLYMPICS HAMILTON, MT 59840	NONE		EVENT EXPENSE	1,5	00
BR THERAPEUTIC RIDING HAMILTON, MT 59840	NONE		SCHOLARSHIPS	1,5	00
DALY SCHOOL HAMILTON, MT 59840	NONE		LIBRARY AND SCIENCE PROJECT	7	00
DARBY HIGH SCHOOLS DARBY, MT 59829	NONE		TENNIS COURT REPAIR	2,0	00
EVERGREEN SCHOOLS HAMILTON, MT 59840	NONE		SCHOLARSHIPS	2,0	00
EDDY MEUCHEL GROUP HOME HAMILTON, MT 59840	NONE		ITEMS FOR HOUSE	2,0	88

NONE

NONE

NONE

NONE

NONE

NONE

DARBY MIDDLE SCHOOL HAMILTON, MT 59840

BR VALLEY CHORUS

HAMILTON, MT 59840

HAMILTON, MT 59840

HAMILTON, MT 59840

HAMILTON PLAYERS

HAVEN HOUSE

HAMILTON, MT 59840

HAMILTON, MT 59840

FIRST PRESBYTERIAN CHURCH

HAMILTON MIDDLE SCHOOL

500.

1,500.

1,500.

500.

700.

5,500.

SKI PROGRAM

LIBRARY

PROGRAM

POOR

AWARENESS

CONCERT EXPENSE

HANDBELL CONCERT

PROGRAM EXPENSES

FOOD FOR THE

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	RAPP FAMILY FOUNDATION, INC			
Statement 12 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount
HAMILTON POLICE DEPARTMENT HAMILTON, MT 59840	NONE		OPERATIONAL NEEDS	\$ 500
LONE ROCK SCHOOL HAMILTON, MT 59840	NONE		RESOURCE BOOKS	500
HAMILTON VFD HAMILTON, MT 59840	NONE		OPERATIONAL EXPENSES	500
HHS CHOIR HAMILTON, MT 59840	NONE		PROGRAM EXPENSE	800
HHS PUBLICATIONS CLASS HAMILTON, MT 59840	NONE		PROGRAM EXPENSE	500
LVA BITTERROOT INC HAMILTON, MT 59840	NONE		OPERATING FUNDS	3,000
MARCUS DALY HOME CARE HAMILTON, MT 59840	NONE		NEIGHBORS HELPING NEIGHBORS PROGRAM	1,000
MDM HOSPICE HAMILTON, MT 59840	NONE		LIFELINE SERVICES	1,000
MONTANA ACAPPELLA HAMILTON, MT 59840	NONE		PROGRAM EXPENSES	500
NORTH VALLEY PUBLIC LIBRARY HAMILTON, MT 59480	NONE		COMPUTER NETWORK	2,00
PANTRY PARTNERS HAMILTON, MT 59840	NONE		FOOD FOR THE NEEDY	9,50
RSVP HAMILTON, MT 59840	NONE		FAMILY ALERT SYSTEM	2,60
RAVALLI COUNTY EVIRONMENT HEALTH HAMILTON, MT 59840	NONE		EVENT EXPENSE	3,00

NONE

NONE

NONE

RAVALLI SERVICES HAMILTON, MT 59840

VICTOR, MT 59875

SAFE

RIVERFRONT COUNSELING HAMILTON, MT 59840

1,450.

2,000.

2,000.

HANDICAPPED DISHWASHER

ADULT COUNCELING

SAFE HOME FOR BATTERED WOMEN AND CHILDREN

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	RAPP FAMILY FOUNDATION, INC			36-3756870	
Statement 12 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year					
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	Amount	
SOUTH VALLEY CHILD & FAMILY VICTOR, MT 59875	NONE		AUTISIM CENTER	3,000.	
SUMMIT INDEPENDENT LIVING CENTER VICTOR, MT 59875	NONE		OPERATION EXPENSES	600.	
VALLEY VETERANS SERVICE CENTER VICTOR, MT 59875	NONE		SERVICE CENTER	1,500	
VICTOR YOUTH ATHLETICS VICTOR, MT 59875	NONE		WALKING PATH	3,000	
VICTOR RURAL VOLUNTEER FIRE DEPT HAMILTON, MT 59840	NONE		DIFIBULLATOR	3,000	
WASHINGTON SCHOOL DISTRICT HAMILTON, MT 59840	NONE		TEACHER'S SUPPLIES	500	
WEST FORK FIRE DISTRICT DARBY, MT 59829	NONE		PROTECTIVE CLOTHING	3,000	
YOUTH HOMES OF THE BITTERROOT HAMILTON, MT 59840	NONE		OPERATIONAL EXPENSES	1,500	
			Total 3	109,045.	