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Form **990-PF****Return of Private Foundation  
or Section 4947(a)(1) Nonexempt Charitable Trust  
Treated as a Private Foundation**

OMB No 1545-0052

**2008**Department of the Treasury  
Internal Revenue Service

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

For calendar year 2008, or tax year beginning **7/01/08**, and ending **6/30/09**G Check all that apply ☐ Initial return ☐ Final return ☐ Amended return ☐ Address change ☐ Name changeUse the IRS  
label.  
Otherwise,  
print  
or type.  
See Specific  
Instructions

Name of foundation

**CODY MEDICAL FOUNDATION**

Number and street (or P O box number if mail is not delivered to street address)

**721 SHERIDAN AVENUE**

Room/suite

City or town, state, and ZIP code

**CODY****WY 82414**

A Employer identification number

**83-6006491**

B Telephone number (see page 10 of the instructions)

**307-587-9030**C If exemption application is pending, check here ☐D 1. Foreign organizations, check here ☐

2. Foreign organizations meeting the

85% test, check here and attach computation ☐E If private foundation status was terminated  
under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination  
under section 507(b)(1)(B), check here ☐H Check type of organization ☒ Section 501(c)(3) exempt private foundation☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundationI Fair market value of all assets at end  
of year (from Part II, col (c),  
line 16) **\$ 1,399,421** J Accounting method ☐ Cash ☒ Accrual  
☐ Other (specify)

(Part I, column (d) must be on cash basis)

**Part 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) (see pg 11 of the instructions))(a) Revenue and  
expenses per  
books(b) Net investment  
income(c) Adjusted net  
income(d) Disbursements  
for charitable  
purposes  
(cash basis only)

1	Contributions, gifts, grants, etc., received (attach schedule)	7,500			
2	Check <input type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B				
3	Interest on savings and temporary cash investments	18,785	18,785	18,785	
4	Dividends and interest from securities	32,906	32,906	32,906	
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10 <b>Stmt 1</b>	-61,405			
b	Gross sales price for all assets on line 6a <b>124,131</b>				
7	Capital gain net income (from Part IV, line 2)		0		
8	Net short-term capital gain			0	
9	Income modifications				
10a	Gross sales less returns & allowances				
b	Less: Cost of goods sold				
c	Gross profit or (loss) (attach schedule)				
11	Other income (attach schedule) <b>Stmt 2</b>	40,432	6,312	40,432	
12	Total. Add lines 1 through 11	38,218	58,003	92,123	
13	Compensation of officers, directors, trustees, etc	18,000	2,000	18,000	
14	Other employee salaries and wages				
15	Pension plans, employee benefits	2,482	2,800	2,481	
16a	Legal fees (attach schedule)				
b	Accounting fees (attach schedule) <b>Stmt 3</b>	3,282	2,000	3,282	
c	Other professional fees (attach schedule) <b>Stmt 4</b>	12,892	12,892	12,892	
17	Interest				
18	Taxes (attach schedule) (see page 14 of the instructions) <b>Stmt 5</b>	25		25	
19	Depreciation (attach schedule) and depletion <b>Stmt 6</b>	760			
20	Occupancy				
21	Travel, conferences, and meetings				
22	Printing and publications				
23	Other expenses (att sch) <b>Stmt 7</b>	22,410		16,025	
24	Total operating and administrative expenses. Add lines 13 through 23	59,851	19,692	52,705	0
25	Contributions, gifts, grants paid	170,638			170,638
26	Total expenses and disbursements. Add lines 24 and 25	230,489	19,692	52,705	170,638
27	Subtract line 26 from line 12				
a	Excess of revenue over expenses & disbursements	-192,271			
b	Net investment income (if negative, enter -0-)		38,311		
c	Adjusted net income (if negative, enter -0-)			39,418	

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

Form **990-PF** (2008)

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**Part II Balance Sheets**

Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

			Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
<b>Assets</b>	<b>1</b>	Cash—non-interest-bearing	5,555	7,660	7,660
	<b>2</b>	Savings and temporary cash investments	480,558	461,832	461,832
	<b>3</b>	Accounts receivable ▶ Less allowance for doubtful accounts ▶			
	<b>4</b>	Pledges receivable ▶ Less allowance for doubtful accounts ▶			
	<b>5</b>	Grants receivable			
	<b>6</b>	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions)			
	<b>7</b>	Other notes and loans receivable (att. schedule) ▶ Less allowance for doubtful accounts ▶			
	<b>8</b>	Inventories for sale or use			
	<b>9</b>	Prepaid expenses and deferred charges			
	<b>10a</b>	Investments—U.S. and state government obligations (attach schedule) <b>Stmt 8</b>	304,906	254,906	268,539
	<b>b</b>	Investments—corporate stock (attach schedule) <b>See Stmt 9</b>	810,380	687,856	608,984
	<b>c</b>	Investments—corporate bonds (attach schedule) <b>See Stmt 10</b>	51,300	51,300	52,406
	<b>11</b>	Investments—land, buildings, and equipment basis ▶ Less accumulated depreciation (attach sch.) ▶			
	<b>12</b>	Investments—mortgage loans			
	<b>13</b>	Investments—other (attach schedule)			
<b>Liabilities</b>	<b>14</b>	Land, buildings, and equipment basis ▶ <b>2,280</b> Less accumulated depreciation (attach sch.) ▶ <b>Stmt 11</b> <b>1,900</b>	1,140	380	
	<b>15</b>	Other assets (describe ▶ )			
	<b>16</b>	Total assets (to be completed by all filers—see the instructions. Also, see page 1, item I)	1,653,839	1,463,934	1,399,421
	<b>17</b>	Accounts payable and accrued expenses	1,117	2,222	
<b>Liabilities</b>	<b>18</b>	Grants payable			
	<b>19</b>	Deferred revenue			
	<b>20</b>	Loans from officers, directors, trustees, and other disqualified persons			
	<b>21</b>	Mortgages and other notes payable (attach schedule)			
	<b>22</b>	Other liabilities (describe ▶ <b>See Statement 12</b> )		1,261	
	<b>23</b>	Total liabilities (add lines 17 through 22)	1,117	3,483	
<b>Net Assets or Fund Balances</b>		Foundations that follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	<b>24</b>	Unrestricted	1,652,722	1,460,451	
	<b>25</b>	Temporarily restricted			
	<b>26</b>	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 27 through 31.			
	<b>27</b>	Capital stock, trust principal, or current funds			
	<b>28</b>	Paid-in or capital surplus, or land, bldg, and equipment fund			
	<b>29</b>	Retained earnings, accumulated income, endowment, or other funds			
<b>Net Assets or Fund Balances</b>	<b>30</b>	Total net assets or fund balances (see page 17 of the instructions)	1,652,722	1,460,451	
	<b>31</b>	Total liabilities and net assets/fund balances (see page 17 of the instructions)	1,653,839	1,463,934	

**Part III Analysis of Changes in Net Assets or Fund Balances**

<b>1</b>	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	<b>1</b>	1,652,722
<b>2</b>	Enter amount from Part I, line 27a	<b>2</b>	-192,271
<b>3</b>	Other increases not included in line 2 (itemize)▶	<b>3</b>	
<b>4</b>	Add lines 1, 2, and 3	<b>4</b>	1,460,451
<b>5</b>	Decreases not included in line 2 (itemize)▶ <b>See Statement 13</b>	<b>5</b>	
<b>6</b>	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	<b>6</b>	1,460,451

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a N/A				
b				
c				
d				
e				

  

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

  

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j) if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			
b			
c			
d			
e			

  

2 Capital gain net income or (net capital loss)	<div style="border: 1px solid black; padding: 2px;">           If gain, also enter in Part I, line 7            If (loss), enter -0- in Part I, line 7         </div>	2	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see pages 13 and 17 of the instructions) If (loss), enter -0- in Part I, line 8		3	

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☒ Yes ☐ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2007			
2006			
2005			
2004			
2003			

  

2 Total of line 1, column (d)	2	
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	
4 Enter the net value of noncharitable-use assets for 2008 from Part X, line 5	4	
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	
8 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions on page 18.	8	

**Part VI** Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> 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, check here <input type="checkbox"/> and enter 1% of Part I, line 27b	1	766
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2	3	766
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	766
6	Credits/Payments		
a	2008 estimated tax payments and 2007 overpayment credited to 2008	6a	496
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d	7	496
8	Enter any penalty for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached	8	4
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	274
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter amount overpaid	10	
11	Enter the amount of line 10 to be credited to 2009 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>	11	

**Part 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 intervene in any political campaign?	Yes	No
1a			X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)? 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		X
1b			
c	Did the foundation file Form 1120-POL for this year?		X
1c			
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities	2	X
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	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5	X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) <input type="checkbox"/> WY		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X
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 on page 27)? 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 and addresses	10	X

**Part VII-A Statements Regarding Activities (continued)**

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the 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? Website address ► N/A	13	X	
14	The books are in care of ► <b>MARTY COE</b> <b>721 SHERIDAN AVENUE</b> Located at ► <b>CODY, WY</b>	Telephone no ► <b>307-587-9030</b> ZIP+4 ► <b>82414</b>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year	15		► <input type="checkbox"/>

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required**

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

		Yes	No
1a	During the year did the foundation (either directly or indirectly)		
(1)	Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(2)	Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(3)	Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(4)	Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
(6)	Agree to pay money or property to a government official? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? Organizations relying on a current notice regarding disaster assistance check here N/A <input type="checkbox"/>	1b	
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2008? N/A	1c	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a	At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2008? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years ► 20 , 20 , 20 , 20		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see page 20 of the instructions )	2b	X
c	If the provisions of section 4942(a)(2) are being applied any of the years listed in 2a, list the years here ► 20 , 20 , 20 , 20		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2008 as a result (1) of any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, 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?	4b	X

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**

5a	During the year did the foundation pay or incur any amount to			
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the instructions)	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see page 22 of the instructions)? Organizations relying on a current notice regarding disaster assistance check here		<input type="checkbox"/>	5b X
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d)	N/A	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If you answered "Yes" to 6b, also file Form 8870			6b X
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		N/A	7b

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**

<b>1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).</b>				
(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 account, other allowances
See Statement 14				
<b>2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). If none, enter "NONE."</b>				
(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 account, other allowances
NONE				
<b>Total number of other employees paid over \$50,000</b>				

**Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)****3** Five highest-paid independent contractors for professional services (see page 23 of the 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

**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
<b>1</b> SPIRIT MOUNTAIN HOSPICE	
	128,000
<b>2</b> CHILDREN'S RESOURCE CENTER	
	15,138
<b>3</b> WEST PARK HOSPITAL	
	8,500
<b>4</b> LIBRARY PROJECT	
	7,500

**Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
<b>1</b> N/A	
<b>2</b>	
All other program-related investments. See page 24 of the instructions	
<b>3</b>	

Total. Add lines 1 through 3





**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see page 24 of the instructions.)

<b>1</b>	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
<b>a</b>	Average monthly fair market value of securities	<b>1a</b>	1,038,772
<b>b</b>	Average of monthly cash balances	<b>1b</b>	463,283
<b>c</b>	Fair market value of all other assets (see page 24 of the instructions)	<b>1c</b>	0
<b>d</b>	Total (add lines 1a, b, and c)	<b>1d</b>	1,502,055
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	<b>1e</b>	0
<b>2</b>	Acquisition indebtedness applicable to line 1 assets	<b>2</b>	0
<b>3</b>	Subtract line 2 from line 1d	<b>3</b>	1,502,055
<b>4</b>	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see page 25 of the instructions)	<b>4</b>	22,531
<b>5</b>	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	<b>5</b>	1,479,524
<b>6</b>	Minimum investment return. Enter 5% of line 5	<b>6</b>	73,976

**Part XI Distributable Amount** (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6	<b>1</b>	73,976
<b>2a</b>	Tax on investment income for 2008 from Part VI, line 5	<b>2a</b>	766
<b>b</b>	Income tax for 2008 (This does not include the tax from Part VI.)	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b	<b>2c</b>	766
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1	<b>3</b>	73,210
<b>4</b>	Recoveries of amounts treated as qualifying distributions	<b>4</b>	
<b>5</b>	Add lines 3 and 4	<b>5</b>	73,210
<b>6</b>	Deduction from distributable amount (see page 25 of the instructions)	<b>6</b>	
<b>7</b>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<b>7</b>	73,210

**Part XII Qualifying Distributions** (see page 25 of the instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	<b>1a</b>	170,638
<b>b</b>	Program-related investments—total from Part IX-B	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required)	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule)	<b>3b</b>	
<b>4</b>	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	<b>4</b>	170,638
<b>5</b>	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 page 26 of the instructions)	<b>5</b>	0
<b>6</b>	Adjusted qualifying distributions. Subtract line 5 from line 4	<b>6</b>	170,638

**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 4940(e) reduction of tax in those years.

**Part XIII Undistributed Income** (see page 26 of the instructions)

	(a) Corpus	(b) Years prior to 2007	(c) 2007	(d) 2008
<b>1</b> Distributable amount for 2008 from Part XI, line 7				<b>73,210</b>
<b>2</b> Undistributed income, if any, as of the end of 2007				
<b>a</b> Enter amount for 2007 only			<b>85,830</b>	
<b>b</b> Total for prior years 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2008				
<b>a</b> From 2003				
<b>b</b> From 2004				
<b>c</b> From 2005				
<b>d</b> From 2006				
<b>e</b> From 2007				
<b>f</b> Total of lines 3a through e				
<b>4</b> Qualifying distributions for 2008 from Part XII, line 4 ▶ \$ <b>170,638</b>				
<b>a</b> Applied to 2007, but not more than line 2a			<b>85,830</b>	
<b>b</b> Applied to undistributed income of prior years (Election required—see page 26 of the instructions)				
<b>c</b> Treated as distributions out of corpus (Election required—see page 26 of the instructions)				
<b>d</b> Applied to 2008 distributable amount				<b>73,210</b>
<b>e</b> Remaining amount distributed out of corpus	<b>11,598</b>			
<b>5</b> Excess distributions carryover applied to 2008 (If an amount appears in column (d), the same amount must be shown in column (a) )				
<b>6</b> Enter the net total of each column as indicated below:				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	<b>11,598</b>			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b				
<b>c</b> 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				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions				
<b>e</b> Undistributed income for 2007 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions				
<b>f</b> Undistributed income for 2008 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2009				<b>0</b>
<b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the instructions)				
<b>8</b> Excess distributions carryover from 2003 not applied on line 5 or line 7 (see page 27 of the instructions)				
<b>9</b> Excess distributions carryover to 2009. Subtract lines 7 and 8 from line 6a	<b>11,598</b>			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2004				
<b>b</b> Excess from 2005				
<b>c</b> Excess from 2006				
<b>d</b> Excess from 2007				
<b>e</b> Excess from 2008	<b>11,598</b>			

**Part XIV Private Operating Foundations** (see page 27 of the instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2008, enter the date of the ruling ▶

**b** Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2008	(b) 2007	(c) 2006	(d) 2005	
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
<b>b</b> 85% of line 2a					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see page 27 of the instructions.)

**1 Information Regarding Foundation Managers:**

**a** List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )  
N/A

**b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest  
N/A

**2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:**  
Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see page 28 of the instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

**a** The name, address, and telephone number of the person to whom applications should be addressed  
MARTY COE-EXECUTIVE DIRECTOR 307-587-9030  
721 SHERIDAN AVENUE CODY WY 82414

**b** The form in which applications should be submitted and information and materials they should include  
See Statement 15

**c** Any submission deadlines  
N/A

**d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors  
PARK COUNTY WYOMING-RELATED TO THE MEDICAL FIELD

**Part XV** Supplementary Information (continued)**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)				
a Paid during the year See Statement 16				170,638
Total			▶ 3a	170,638
b Approved for future payment N/A				
Total			▶ 3b	





**Schedule of Contributors**

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

OMB No. 1545-0047

**2008**

Name of the organization

**CODY MEDICAL FOUNDATION**

Employer identification number

**83-6006491**

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 a private foundation
- ☐ 527 political organization

Form 990-PF

- ☒ 501(c)(3) exempt private foundation
- ☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
- ☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**. (Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.)

**General Rule**

- ☒ For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

**Special Rules**

- ☐ For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. (If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.) ▶ \$

**Caution.** Organizations that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

COPY MEDICAL FOUNDATION

Employer identification number

83-6006491

**Part I Contributors** (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	COMMUNITY FOUNDATION OF JACKSON HOLE 255 E SIMPSON AVE  JACKSON WY 83001	\$ 5,000	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution )



Form **4562**Department of the Treasury  
Internal Revenue Service

(99)

**Depreciation and Amortization**  
(Including Information on Listed Property)

OMB No 1545-0172

**2008**Attachment  
Sequence No **67**

▶ See separate instructions ▶ Attach to your tax return.

Name(s) shown on return

**CODY MEDICAL FOUNDATION**

Identifying number

**83-6006491**

Business or activity to which this form relates

**Indirect Depreciation****Part I Election To Expense Certain Property Under Section 179****Note:** If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount See the instructions for a higher limit for certain businesses	1	<b>250,000</b>
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	<b>800,000</b>
4	Reduction in limitation Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

(a) Description of property	(b) Cost (business use only)	(c) Elected cost
6		
7	Listed property Enter the amount from line 29	7
8	Total elected cost of section 179 property Add amounts in column (c), lines 6 and 7	8
9	Tentative deduction Enter the smaller of line 5 or line 8	9
10	Carryover of disallowed deduction from line 13 of your 2007 Form 4562	10
11	Business income limitation Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11
12	Section 179 expense deduction Add lines 9 and 10, but do not enter more than line 11	12
13	Carryover of disallowed deduction to 2009 Add lines 9 and 10, less line 12	13

**Note:** Do not use Part II or Part III below for listed property. Instead, use Part V.**Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)**

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

**Part III MACRS Depreciation (Do not include listed property.) (See instructions.)****Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2008	17	<b>760</b>
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

**Section B—Assets Placed in Service During 2008 Tax Year Using the General Depreciation System**

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs		S/L	
h Residential rental property			27 5 yrs	MM	S/L	
			27 5 yrs	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

**Section C—Assets Placed in Service During 2008 Tax Year Using the Alternative Depreciation System**

20a Class life					S/L	
b 12-year			12 yrs		S/L	
c 40-year			40 yrs	MM	S/L	

**Part IV Summary (See instructions.)**

21	Listed property Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instr	22	<b>760</b>
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2008)

DAA

There are no amounts for Page 2

## Federal Statements

## Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets

Description	How Received		Whom Sold		Net Gain / Loss
	Date Acquired	Date Sold	Sale Price	Cost	Expense
FIFTH THIRD BANCORP	Various	7/31/08	\$ 1,957	Purchase	\$ 8,239
EBAY	Various	9/30/08	\$ 4,800	Purchase	\$
ILLINOIS TOOL WRKS INC	Various	1/31/09	\$ 13,772	Purchase	7,003
GE	Various	2/28/09	\$ 8,009	Purchase	19,392
COLGATE PALMOLIVE	Various	3/31/09	\$ 20,358	Purchase	16,216
POWERSHARES FIN PFD	Various	6/30/09	\$ 6,616	Purchase	19,004
FIFTH THIRD BANCORP	Various	7/31/08	\$ 2,446	Purchase	12,627
EBAY	Various	9/30/08	\$ 5,029	Purchase	10,298
ILLINOIS TOOL WORKS INC	Various	1/31/09	\$ 17,215	Purchase	7,336
GE	Various	2/28/09	\$ 9,153	Purchase	24,240
COLGATE PALMOLIVE	Various	3/31/09	\$ 26,175	Purchase	20,332
POWERSHARES FIN PFD	Various	6/30/09	\$ 8,601	Purchase	24,434
Total			\$ 124,131	\$ 185,536	\$ 0
					\$ 0
					\$ -61,405
					\$ -7,814
					\$ -11,179
					\$ -2,307
					\$ -7,025
					\$ -6,011
					\$ -8,207
					\$ -5,620
					\$ -2,203
					\$ -6,282

## Federal Statements

Statement 2 - Form 990-PF, Part I, Line 11 - Other Income

Description	Revenue per Books	Net Investment Income	Adjusted Net Income
BANK OF THE WEST TRUST DEPT	\$ 6,312	\$ 6,312	\$ 6,312
VITAL SIGNS FUNDRAISER	30,762		30,762
MISCELLANEOUS INCOME	3,358		3,358
Total	\$ 40,432	\$ 6,312	\$ 40,432

Statement 3 - Form 990-PF, Part I, Line 16b - Accounting Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Indirect Accounting Fees	\$ 3,282	\$ 2,000	\$ 3,282	\$
Total	\$ 3,282	\$ 2,000	\$ 3,282	\$ 0

Statement 4 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
UNION BANK OF CALIFORNIA- INVESTMENT MANAGEMENT FEES	\$ 12,892	\$ 12,892	\$ 12,892	\$
Total	\$ 12,892	\$ 12,892	\$ 12,892	\$ 0

Statement 5 - Form 990-PF, Part I, Line 18 - Taxes

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
TAXES AND LICENSES	\$ 25	\$	\$ 25	\$
Total	\$ 25	\$ 0	\$ 25	\$ 0

## Federal Statements

## Statement 6 - Form 990-PF, Part I, Line 19 - Depreciation

Description		Date		Cost	Depreciation		Method	Life	Current Year	Net Investment	Adjusted Net
Acquired				Basis					Depreciation	Income	Income
COMPUTER		1/09/07	\$	2,280	\$	1,140	S/L	3	\$ 760	\$	\$
Total	\$		\$	2,280	\$	1,140			\$ 760	\$ 0	\$ 0

## Statement 7 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	Total	Net Investment	Adjusted Net	Charitable Purpose
VITAL SIGNS FUNDRAISER				
Cost of Goods Sold	\$ 16,025	\$	16,025	\$
Expenses				
BOARD EXPENSE	47			
INSURANCE	2,213			
OFFICE	1,174			
BANK CHARGES	46			
TELEPHONE	1,157			
ADVERTISING	1,748			
Total	\$ 22,410	\$ 0	\$ 16,025	\$ 0

**Federal Statements****Statement 8 - Form 990-PF, Part II, Line 10a - US and State Government Investments**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>	<u>Basis of Valuation</u>	<u>Fair Market Value</u>
US TREAS NOTES-250,000 UNITS	\$ 304,906	\$ 254,906		\$ 268,539
Total	\$ 304,906	\$ 254,906		\$ 268,539

**Statement 9 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>	<u>Basis of Valuation</u>	<u>Fair Market Value</u>
AUTODESK, INC	\$ 39,017	\$ 39,017		\$ 20,878
BECTON DICKINSON	17,796	17,796		16,401
BERKSHIRE HATHAWAY INC DEL	17,339	17,339		14,479
CHEVRON TEXACO CORP	13,188	13,188		23,188
COLGATE PALMOLIVE CO COM	43,438			
CONSOLIDATED EDISON INC	29,740	29,739		25,446
COSTCO WHOLESALE	16,603	16,603		25,179
DEVON ENERGY CORPORATION	40,632	40,632		35,425
DU PONT E I NEMOURS & CO	12,376	12,376		6,661
EBAY, INC	14,339			
EXXON MOBIL CORP	19,310	19,310		34,955
FIFTH THIRD BANKCORP COM	18,537			
GENERAL ELECTRIC	36,548			
ILLINOIS TOOLS WKS INC	43,632			
JOHNSON & JOHNSON	40,865	40,865		45,440
KINETIC CONCEPTS	42,969	42,969		29,975
LOWES COS INC	43,897	43,897		27,174
PEPSICO	42,172	42,172		38,472
QUALCOMM, INC	20,752	20,752		49,720
TIFFANY & CO NEW	24,572	24,572		13,948
UNITED TECHNOLOGIES CORP	19,381	19,382		12,470

## Federal Statements

**Statement 9 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments (continued)**

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
WALMART STORES INC				
ACCENTURE LTD BERMUDA CL A	\$	\$ 15,782		\$ 14,048
POWERSHARES DYN SOFTWARE		19,883		16,395
ISHARES DJ US BASIC MATERIAL	31,163	31,163		29,970
ISHARES S&P MIDCAP 400	12,791	12,791		8,686
POWERSHARES DWA TECHINICAL	119,070	119,070		80,906
POWERSHARES FIN PFD	21,210	21,210		11,318
POWERSHARES QQQ TRUST UNIT SER 1	29,043			
SPDR SERIES TRUST S&P BIOTECH		9,551		11,642
		17,797		16,208
Total	\$ 810,380	\$ 687,856		\$ 608,984

**Statement 10 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments**

Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
GENERAL ELECTRIC CAP CORP MTN	\$ 51,300	\$ 51,300		\$ 52,406
Total	\$ 51,300	\$ 51,300		\$ 52,406

## Federal Statements

## Statement 11 - Form 990-PF, Part II, Line 14 - Land, Building, and Equipment

Description	Beginning Net Book	End Cost / Basis	End Accumulated Depreciation	Net FMV
	\$ 1,140	\$ 2,280	\$ 1,900	\$
Total	\$ 1,140	\$ 2,280	\$ 1,900	\$ 0

**Federal Statements****Statement 12 - Form 990-PF, Part II, Line 22 - Other Liabilities**

<u>Description</u>	<u>Beginning of Year</u>	<u>End of Year</u>
DUE TO OTHERS	\$	\$ 1,261
Total	\$ 0	\$ 1,261

**Statement 13 - Form 990-PF, Part III, Line 5 - Other Decreases**

<u>Description</u>	<u>Amount</u>
UNREALIZED GAIN/LOSS ADJUSTMENT FRACTIONS	\$
Total	\$ 0



## Federal Statements

## Statement 14 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc.

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
HENRY H.R. COE PO BOX 1088 CODY WY 82414	PRESIDENT	0	0	0	0
EDWARD WEBSTER 1226 11TH STREET CODY WY 82414	VICE PRES	0	0	0	0
ANNE HAYES 620 17TH STREET CODY WY 82414	TRUSTEE	0	0	0	0
DOUG MCMILLAN 25 VISTA VIEW LANE CODY WY 82414	TRUSTEE	0	0	0	0
BO JOHNSON 17 EQUINE DRIVE CODY WY 82414	TRUSTEE	0	0	0	0
MELLISA FRASER 29 JODY LANE CODY WY 82414	TRUSTEE	0	0	0	0
CAROL ROBERTS 820 PARK AVENUE CODY WY 82414	TRUSTEE	0	0	0	0
STEVE SIMONTON 1222 11TH CODY WY 82414	TRUSTEE	0	0	0	0
RICH PETERSON 2337 LARKSPUR COURT CODY WY 82414	TRUSTEE	0	0	0	0
JOE TILDEN PO BOX 1658	TRUSTEE	0	0	0	0

## Federal Statements

Statement 14 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees,  
Etc. (continued)

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
CODY WY 82414					
KURT BOLLINGER 1776 EAGLE NEST TRAIL POWELL WY 82435	TRUSTEE	0	0	0	0
MARTY COE 155 BELFRY HWY CODY WY 82414	EX DIRECTOR	0	18,000	0	0

**Statement 15 - Form 990-PF, Part XV, Line 2b - Application Format and Required Contents**Description

NO FORMAL APPLICATION- LETTER ADDRESSED TO FOUNDATION  
BOARD

**Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations**Description

PARK COUNTY WYOMING-RELATED TO THE MEDICAL FIELD

## Federal Statements

**Statement 16 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the**  
Year

Name		Address		Relationship	Status	Purpose	Amount
DARRICK MCMILLAN	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
CODY WY 82414	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
MEGHAN KIRCHNER	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
CODY WY 82414	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
DUSTY RICHRDSON	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
CODY WY 82414	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
DEREK BARSNESS	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
CODY WY 82414	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
CELESTE A. DANNEMILLER	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
CODY WY 82414	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
JEFF BANK	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
CODY WY 82414	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
SUSAN HARTWIG	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
CODY WY 82414	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
TRENT MORTON	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
CODY WY 82414	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
LAURA ALBRECHT	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
CODY WY 82414	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
MEREDITH MICHELLE ILER	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,500
CODY WY 82414	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
LORI J PORTER	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
CODY WY 82414	CODY			NO RELATIONSHIP		SCHOLARSHIP	1,000
SPIRIT MOUNTAIN HOSPICE	CODY			NO RELATIONSHIP		BUILDING CAMPAIGN	128,000
CODY WY 82414	CODY			NO RELATIONSHIP		SCREENIN GEQIPMENT AND THERAPY TOOLS	15,138
CHILDRENS RESOURCE CENTER	CODY			NO RELATIONSHIP		FIVE ADDITIONAL AEDs	8,500
CODY WY 82414	CODY			NO RELATIONSHIP		LIBRARY PROJECT CD/DVD'S & REFERENCE	7,500
WEST PARK HOSPITAL	CODY			NO RELATIONSHIP			
CODY WY 82414	CODY			NO RELATIONSHIP			
WEST PARK HOSPITAL	CODY			NO RELATIONSHIP			
CODY WY 82414	CODY			NO RELATIONSHIP			
Total							170,638