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Form **990-PF**Department of the Treasury
Internal Revenue Service (77)**Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation**

OMB No 1545-0052

2009

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

For calendar year 2009, or tax year beginning 4/9/2009, and ending 12/31/2009

G Check all that apply: ☒ Initial return ☐ Initial return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name changeUse the IRS
label.
Otherwise,
print
or type.
See Specific
Instructions.

Name of foundation

Western Shoshone Scholarship Foundation

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

905 West Main Street

Room/suite

City or town, state, and ZIP code

Elko

NEVADA

89803

A Employer identification number

36-4663132

B Telephone number (see page 10 of the instructions)

(801) 990-3900

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 foundationFair market value of all assets at end
of year (from Part II, col. (c),
line 16) ☒ \$ 95,461J Accounting method ☒ Cash ☐ Accrual
☐ Other (specify) _____
(Part I, column (d) must be on cash basis)SCANNED
SEP 29 2010

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 page 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)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	236,532			
	2 Check ☐ if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	0	0		
	4 Dividends and interest from securities	0	0		
	5 a Gross rents		0		
	b Net rental income or (loss)	0			
	6 a Net gain or (loss) from sale of assets not on line 10	0			
	b Gross sales price for all assets on line 6a	0			
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10 a Gross sales less returns and allowances	0			
b Less Cost of goods sold	0				
c Gross profit or (loss) (attach schedule)	0				
11 Other income (attach schedule)	0	0	0		
12 Total. Add lines 1 through 11	236,532	0	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16 a Legal fees (attach schedule)	0	0	0	0
	b Accounting fees (attach schedule)	0	0	0	0
	c Other professional fees (attach schedule)	0	0	0	0
	17 Interest				
	18 Taxes (attach schedule) (see page 14 of the instructions)	0	0	0	0
	19 Depreciation (attach schedule) and depletion	0	0	0	
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	71	0	0	71
	24 Total operating and administrative expenses. Add lines 13 through 23	71	0	0	71
	25 Contributions, gifts, grants paid	141,000			141,000
26 Total expenses and disbursements. Add lines 24 and 25	141,071	0	0	141,071	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	95,461				
b Net investment income (if negative, enter -0-)		0			
c Adjusted net income (if negative, enter -0-)			0		

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

Form 990-PF (2009)

(HTA)

Glu 6

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		
Assets	1	Cash—non-interest-bearing			95,461	95,461
	2	Savings and temporary cash investments				
	3	Accounts receivable	0			
		Less allowance for doubtful accounts	0	0	0	0
	4	Pledges receivable	0			
		Less allowance for doubtful accounts	0	0	0	0
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 15 of the instructions)	0	0	0	0
	7	Other notes and loans receivable (attach schedule)	0			
		Less allowance for doubtful accounts	0	0	0	0
	8	Inventories for sale or use				
	9	Prepaid expenses and deferred charges				
	10 a	Investments—U S and state government obligations (attach schedule)	0	0	0	0
	b	Investments—corporate stock (attach schedule)	0	0	0	0
	c	Investments—corporate bonds (attach schedule)	0	0	0	0
	11	Investments—land, buildings, and equipment basis	0			
	Less accumulated depreciation (attach schedule)	0	0	0	0	
12	Investments—mortgage loans					
13	Investments—other (attach schedule)	0	0	0	0	
14	Land, buildings, and equipment basis	0				
	Less accumulated depreciation (attach schedule)	0	0	0	0	
15	Other assets (describe)	0	0	0	0	
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	0	95,461	95,461		
Liabilities	17	Accounts payable and accrued expenses				
	18	Grants payable				
	19	Deferred revenue				
	20	Loans from officers, directors, trustees, and other disqualified persons	0	0		
	21	Mortgages and other notes payable (attach schedule)	0	0		
	22	Other liabilities (describe)	0	0		
	23	Total liabilities (add lines 17 through 22)	0	0		
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ☐ and complete lines 24 through 26 and lines 30 and 31.					
	24	Unrestricted				
	25	Temporarily restricted				
	26	Permanently restricted				
	Foundations that do not follow SFAS 117, check here ☒ and complete lines 27 through 31.					
	27	Capital stock, trust principal, or current funds	0			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0			
	29	Retained earnings, accumulated income, endowment, or other funds	0	95,461		
30	Total net assets or fund balances (see page 17 of the instructions)	0	95,461			
31	Total liabilities and net assets/fund balances (see page 17 of the instructions)	0	95,461			

Part III Analysis of Changes in Net Assets or Fund Balances

1	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)	1	0
2	Enter amount from Part I, line 27a	2	95,461
3	Other increases not included in line 2 (itemize)	3	0
4	Add lines 1, 2, and 3	4	95,461
5	Decreases not included in line 2 (itemize)	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	95,461

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 0	0	0	0
b 0	0	0	0
c 0	0	0	0
d 0	0	0	0
e 0	0	0	0

(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 0	0	0	0
b 0	0	0	0
c 0	0	0	0
d 0	0	0	0
e 0	0	0	0

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	0
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	0

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

N/A for 1st year

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))
2008			0.000000
2007			0.000000
2006			0.000000
2005			0.000000
2004			0.000000

2 Total of line 1, column (d)	2	0.000000
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	0.000000
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5	4	0
5 Multiply line 4 by line 3	5	0
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	0
7 Add lines 5 and 6	7	0
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	0

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

1 a Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1
Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)

b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b

c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)

2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

3 Add lines 1 and 2

4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-

6 Credits/Payments

a 2009 estimated tax payments and 2008 overpayment credited to 2009

b Exempt foreign organizations—tax withheld at source

c Tax paid with application for extension of time to file (Form 8868)

d Backup withholding erroneously withheld

7 Total credits and payments. Add lines 6a through 6d

8 Enter any **penalty** for underpayment of estimated tax. Check here ☐ if Form 2220 is attached

9 Tax due. If the total of lines 5 and 8 is more than line 7, enter **amount owed**

10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid**

11 Enter the amount of line 10 to be **Credited to 2010 estimated tax** ☐ **Refunded** ☐

Part 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 participate or intervene in any political campaign?

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

c Did the foundation file **Form 1120-POL** for this year?

d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year

(1) On the foundation ☐ \$ 0 (2) On foundation managers ☐ \$ 0

e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ 0

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

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

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

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

N/A

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

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

• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?

7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV

8 a Enter the states to which the foundation reports or with which it is registered (see page 19 of the instructions) ☐ Delaware, Nevada

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

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 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)?

If "Yes," complete Part XIV

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

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?	13	X	
Website address ► N/A				
14	The books are in care of ► Barrick Gold of North America, Inc.	Telephone no ► (775)748-1072		
Located at ► 905 W. Main Street, Elko Nevada		ZIP+4 ► 89803		
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			

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? ☐ Yes ☒ No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☒ No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) ☐ Yes ☒ 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 ☐	1b	N/A
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 2009?	1c	X
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 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009? ☐ Yes ☒ 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	N/A
c If the provisions of section 4942(a)(2) are being applied to 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? ☐ Yes ☒ No		
b If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2009)	3b	N/A
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 2009?	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))? ☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes? ☒ Yes ☐ 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) ☐ Yes ☒ 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? ☐ Yes ☒ 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 ☐ **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? ☐ Yes ☐ No **N/A**
If "Yes," attach the statement required by Regulations section 53.4945–5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No **6b**
If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? ☐ Yes ☒ No **N/A**

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? ☐ Yes ☒ No **7b**

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1 List all officers, directors, trustees, foundation managers and their compensation (see page 22 of the instructions).**

(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 Attached Statement	.00	0	0	0
	.00	0	0	0
	.00	0	0	0
	.00	0	0	0
	.00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see page 23 of the instructions). 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 account, other allowances
None				

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

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		0
		0
		0
		0
		0
		0

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
1 Scholarships provided to members of the Western Shoshone Tribe	141,000
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see page 24 of the 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	
2	
All other program-related investments. See page 24 of the instructions	
3	0
Total. Add lines 1 through 3 ▶	0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	95,461
c	Fair market value of all other assets (see page 24 of the instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	95,461
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	95,461
4	Cash deemed held for charitable activities. Enter 1½ % of line 3 (for greater amount, see page 25 of the instructions)	4	1,432
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	94,029
6	Minimum investment return. Enter 5% of line 5	6	3,439

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.)

1	Minimum investment return from Part X, line 6		1	3,439
2a	Tax on investment income for 2009 from Part VI, line 5	2a	0	
b	Income tax for 2009 (This does not include the tax from Part VI.)	2b		
c	Add lines 2a and 2b	2c	0	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	3,439	
4	Recoveries of amounts treated as qualifying distributions	4		
5	Add lines 3 and 4	5	3,439	
6	Deduction from distributable amount (see page 25 of the instructions)	6		
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	3,439	

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

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	141,071
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	141,071
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 page 26 of the instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	141,071

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 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7				3,439
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2009				
a From 2004	0			
b From 2005	0			
c From 2006	0			
d From 2007	0			
e From 2008	0			
f Total of lines 3a through e	0			
4 Qualifying distributions for 2009 from Part XII, line 4 ▶ \$ 141,071				
a Applied to 2008, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see page 26 of the instructions)		0		
c Treated as distributions out of corpus (Election required—see page 26 of the instructions)	0			
d Applied to 2009 distributable amount				3,439
e Remaining amount distributed out of corpus	137,632			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	137,632			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount—see page 27 of the instructions		0		
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount—see page 27 of the instructions			0	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2010				0
7 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)				
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)	0			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	137,632			
10 Analysis of line 9				
a Excess from 2005	0			
b Excess from 2006	0			
c Excess from 2007	0			
d Excess from 2008	0			
e Excess from 2009	137,632			

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

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, 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)

2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

b 85% of line 2a

c Qualifying distributions from Part XII, line 4 for each year listed

d Amounts included in line 2c not used directly for active conduct of 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

(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

Tax year	Prior 3 years			(e) Total
(a) 2009	(b) 2008	(c) 2007	(d) 2006	
0				0
0	0	0	0	0
0				0
				0
0	0	0	0	0
				0
0				0
				0
0				0
				0
				0
				0
				0

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 28 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))

None

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

None

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

Louis Schack 905 West Main Street Elko NV 89803 (775)748-1072

b The form in which applications should be submitted and information and materials they should include

See Western Shoshone Legacy Fund Application and Guidelines

c Any submission deadlines

Friday July 9, 2010

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

See attached application for restrictions. (See attached Statement 2)

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 attached spreadsheet - Statement 1				141,000
Total			▶ 3a	141,000
b Approved for future payment				
Total			▶ 3b	0

Part XVI-A	Analysis of Income-Producing Activities	N/A
-------------------	--	-----

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See page 28 of the instructions)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1	Program service revenue					
a			0		0	0
b			0		0	0
c			0		0	0
d			0		0	0
e			0		0	0
f			0		0	0
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments					
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate					
a	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue a		0		0	0
b			0		0	0
c			0		0	0
d			0		0	0
e			0		0	0
12	Subtotal. Add columns (b), (d), and (e)		0		0	0
13	Total. Add line 12, columns (b), (d), and (e)					

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of.			
(1) Cash			X
(2) Other assets			X
b Other transactions.			
(1) Sales of assets to a noncharitable exempt organization			X
(2) Purchases of assets from a noncharitable exempt organization			X
(3) Rental of facilities, equipment, or other assets			X
(4) Reimbursement arrangements			X
(5) Loans or loan guarantees			X
(6) Performance of services or membership or fundraising solicitations			X
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees			X
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received			

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge.

Sign Here


Signature of officer or trustee

9-16-10
Date

General Counsel & Secretary
Title

**Paid
Preparer's
Use Only**Preparer's
signature 

Date _____

Check if self-employed ☐

Preparer's identifying
number (see **Signature** on
page 30 of the instructions)

Firm's name (or yours if self-employed), address, and ZIP code

EIN ▶

Phone no

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, or 990-PF.

OMB No 1545-0047

2009

Name of the organization

Western Shoshone Scholarship Foundation

Employer identification number

36-4663132

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 an organization 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 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 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 (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II

- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions 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 990-EZ that received from any one contributor, during the year, 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. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Western Shoshone Scholarship Foundation

Employer identification number

36-4663132

Part I Contributors (see instructions)

(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Barrick Cortez Inc 136 East South Temple, Suite 1800 Salt Lake City UT 84111-1135 Foreign State or Province Foreign Country	\$ 141,919	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
2	Barrick Gold Finance Inc 136 East South Temple, Suite 1800 Salt Lake City UT 84111-1135 Foreign State or Province Foreign Country	\$ 94,613	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
3	 Foreign State or Province Foreign Country	\$ 0	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
4	 Foreign State or Province Foreign Country	\$ 0	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
5	 Foreign State or Province Foreign Country	\$ 0	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)
6	 Foreign State or Province Foreign Country	\$ 0	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution)

Line 23 (990-PF) - Other Expenses

	Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	Amortization See attached statement	71	0	0	71
2	Bank Charges	71	0	0	71
3					
4					
5					
6					
7					
8					
9					
10					

Part VII-A, Line 10 (990-PF) - Substantial Contributors

	Name	Check "X" if Business	Street	City	State	Zip Code	Foreign Country
1	Barrick Cortez Inc.	X	136 East South Temple, Ste 1800	Salt Lake City	UTAH	84111-1135	
2	Barrick Gold Finance Inc	X	136 East South Temple, Ste 1800	Salt Lake City	UTAH	84111-1135	
3							
4							
5							
6							
7							
8							
9							
10							

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

[illegible]

Part

	0	0	0	0
	Compensation	Benefits	Expense Account	Explanation
1	0		0	
2	0		0	
3	0		0	
4	0		0	
5	0		0	
6				
7				
8				
9				
10				

Part XV, Lines 1a-1b (990-PF) - Information Regarding Foundation Managers

List Managers who contributed more than 2%
of the total contributions received by the foundation

1 None _____
2 _____
3 _____
4 _____
5 _____
6 _____
7 _____
8 _____
9 _____
10 _____

List Managers who own 10% or more of the stock
of a corporation of which the foundation has a 10%
or greater interest

None _____

Western Shoshone Educational Legacy Fund

Applicant Last Name	Applicant First Name	Address	City, State	Zip	Spr 09 Amt Pd	Fall 09 Amt Pd	Total Paid 2009
Beaudoin	Tanya D	611 Walnut St Apt A	Elko, NV	89801	\$ 1,000		\$ 1,000
Blossom	Deborah	PO Box 245	Owyhee, NV	89832	\$ 1,000		\$ 1,000
Charles	Alann J	735 Walnut St	Elko, NV	89801	\$ 1,000		\$ 1,000
Cota	Selene	PO Box 492	Owyhee, NV	89832	\$ 1,000		\$ 1,000
Decker	Rachael	6340 E Crow Ct	Sun Valley, NV	89433		\$ 1,000	\$ 1,000
Duncan	Troy	PO Box 140065	Duckwater, NV	89314		\$ 1,000	\$ 1,000
Fielding	Taryn Nicole	5336 Flowing Spring St	Las Vegas, NV	89122		\$ 1,000	\$ 1,000
Garcia	Teresa	PO Box 294	Owyhee, NV	89832		\$ 1,000	\$ 1,000
Gibson	Matthew	10731 W Florence Dr	Boise, ID	83713		\$ 1,000	\$ 1,000
Hanchor	Leilani	PO Box 308	Owyhee, NV	89832		\$ 1,000	\$ 1,000
Harris	Jace Brett	P O Box 151352	Ely, NV	89315	\$ 1,000		\$ 1,000
Jim	Daxton	PO Box 22	Owyhee, NV	89832		\$ 1,000	\$ 1,000
Jim	Steven Lee	PO Box 219	Owyhee, NV	89832	\$ 1,000		\$ 1,000
Jones	Sasha	PO Box 59	Owyhee, NV	89832		\$ 1,000	\$ 1,000
Jones	Zane	PO Box 447	Owyhee, NV	89832	\$ 1,000		\$ 1,000
Lyons	Martin	1471 N Shirley St	Tacoma, WA	98406	\$ 1,000		\$ 1,000
Marques	Alyssa Clance	415 Ely Ave	Ely, NV	99301	\$ 1,000		\$ 1,000
Mountainsheep	Marcus L	9805 S 248th, Apt A-22	Kent, WA	98030	\$ 1,000		\$ 1,000
Premo	Ryan	142 Maurice St #111	Twin Falls, ID	83301		\$ 1,000	\$ 1,000
Premo	Shurene	PO Box 484	Owyhee, NV	89832		\$ 1,000	\$ 1,000
Sam	Elizabeth	3315 University Dr Box 56	Bismarck, ND	58504		\$ 1,000	\$ 1,000
Souliere	Monica L	453 Ash St #3	Elko, NV	89801	\$ 1,000		\$ 1,000
Taylor	Ann M	1188 Court St #104	Elko, NV	89801	\$ -	\$ 1,000	\$ 1,000
Thompson	Woodrow	1691 College Pkwy A-102	Elko, NV	89801		\$ 1,000	\$ 1,000
Walker	Rusty	312 Mason Street	San Francisco, CA	94102		\$ 1,000	\$ 1,000
Yellow Hawk	Letisha	HC 61 Box 6280	Austin, NV	89310		\$ 1,000	\$ 1,000
Briones	Jacqueline	PO Box 140066	Duckwater, NV	89314		\$ 2,000	\$ 2,000
Burton	Cheyne G	401 Juniper St	Elko, NV	89801	\$ 1,000	\$ 1,000	\$ 2,000
Calvin	Chelsey Sky	PO Box 112	Nixon, NV	89424	\$ 1,000	\$ 1,000	\$ 2,000
Camas	Taryn Nicole	PO Box 372	McDermitt, NV	89421		\$ 2,000	\$ 2,000
Crazy Bull	Willie S	1636 Caroline St	Billings, MT	59105	\$ 1,000	\$ 1,000	\$ 2,000
Davis	Ashley	1212 N 16th Street, Unit 1	Grand Junction, CO	81501	\$ -	\$ 2,000	\$ 2,000
Davis	Hazen	1140 Texas Ave, Rm 102	Grand Junction, CO	81501		\$ 2,000	\$ 2,000
Grant	Tyler	11554 Trevi Fountain Ave	Las Vegas, NV	89138		\$ 2,000	\$ 2,000
Greene	Michele	FLC 7260 1000 Rim Dr	Durango, CO	81301	\$ 2,000		\$ 2,000
Jones	Auston C	1157 S Dale St, #104	Boise, ID	83706	\$ 2,000		\$ 2,000
Jones	Jessie	1190 El Rancho Dr	Sparks, NV	89431	\$ 1,000	\$ 1,000	\$ 2,000
Jones	Sandra L	PO Box 422	Owyhee, NV	89832	\$ 1,000	\$ 1,000	\$ 2,000
Julianto	Kit	PO Box 72	Owyhee, NV	89832		\$ 2,000	\$ 2,000
Mouse	Theresa J	449 Park Terrace Drive	Twin Falls, ID	83301	\$ 1,000	\$ 1,000	\$ 2,000
Moyle	Shanlee	PO Box 1074	Eureka, NV	89316	\$ 1,000	\$ 1,000	\$ 2,000
Okimow	Blake	6324 29th Ave SW #12	Seattle, WA	98126	\$ 1,000	\$ 1,000	\$ 2,000
Pete, Jr	Kenneth W	PO Box 57	Owyhee, NV	89832		\$ 2,000	\$ 2,000
Powers	Bryan S	7305 Austin Creek Ct	Reno, NV	89523	\$ 1,000	\$ 1,000	\$ 2,000
Roa-Shaffer	Rachel	PO Box 477	Owyhee, NV	89832		\$ 2,000	\$ 2,000
Roberts	Tanda	PO Box 321	Nixon, NV	89424	\$ 2,000	\$ -	\$ 2,000
Shaw	Darnellene T	1928 Eagle Dr	Elko, NV	89801	\$ 1,000	\$ 1,000	\$ 2,000
Smith	Dion M	PO Box 464	Owyhee, NV	89832		\$ 2,000	\$ 2,000
Souza	Timothy	4025 Topaz Ranch Rd	Wellington, NV	89444		\$ 2,000	\$ 2,000
Stones	Colton T	2440 Opal Dr	Ely, NV	89301		\$ 2,000	\$ 2,000
Tabibian	Stephanie M	PO Box 401	Owyhee, NV	89832		\$ 2,000	\$ 2,000
Burton	Trudie	582 Sunset St	Elko, NV	89801	\$ 1,000	\$ 2,000	\$ 3,000
Hicks	Shawna M	1112 S Leadville Ave, Apt 300	Boise, ID	83706	\$ 2,000	\$ 1,000	\$ 3,000
Hooper	Davanna D	HC 61 Box 6196	Austin, NV	89310	\$ 1,000	\$ 2,000	\$ 3,000
Atkins	Latoya	618 S 4th St #1	Pocatello, ID	83201	\$ 2,000	\$ 2,000	\$ 4,000
Dick	Kielea	PO Box 337	Owyhee, NV	89832	\$ 2,000	\$ 2,000	\$ 4,000
Garvey	John	5 Candlewood Dr	Medway, MA	02053	\$ 2,000	\$ 2,000	\$ 4,000
Johnson	Janae LaDawn	PO Box 150952	Ely, NV	89315	\$ 2,000	\$ 2,000	\$ 4,000
Jones	Ashley	PO Box 3735	Rapid City, SD	57709	\$ 2,000	\$ 2,000	\$ 4,000
Jones	Timothy W	3191 Hawthorne	Boise, ID	83703	\$ 2,000	\$ 2,000	\$ 4,000
Jones	Topaz	PO Box 445	Owyhee, NV	89832	\$ 2,000	\$ 2,000	\$ 4,000
Manning	Tyson	2417 N Robinson Ave #4	Oklahoma City, OK	73103	\$ 2,000	\$ 2,000	\$ 4,000
Marques	Matthew	2103 E 3300 S Apt A	Salt Lake City, UT	84109	\$ 2,000	\$ 2,000	\$ 4,000
Pete	Bethany Ann	PO Box 57	Owyhee, NV	89832	\$ 2,000	\$ 2,000	\$ 4,000
Putra	Jillian	PO Box 367	Owyhee, NV	89832	\$ 2,000	\$ 2,000	\$ 4,000
Sechler	Kylee Nicole	708 Wyndemere Dr	Boise, ID	83702	\$ 2,000	\$ 2,000	\$ 4,000
Thomas	Joey Blue	PO Box 9653	Reno, NV	89507	\$ 2,000	\$ 2,000	\$ 4,000
Winder	Tanaya	PO Box 42	Ignacio, CO	81137	\$ 2,000	\$ 2,000	\$ 4,000

Total \$ 141,000

stmt 1



Barrick Gold of North America, Inc.
Nevada Shared Business Center
905 W. Main St.
Elko, NV 89801
775.748.1001
www.barrick.com

April 2010

Dear Student,

Please find enclosed the Western Shoshone Educational Legacy Fund application form with attached guidelines and information regarding this program. All students must complete and submit this application, along with the required documents, to be considered for a scholarship for the Fall 2010 semester. Please review the entire application packet carefully.

All completed applications and supporting documents must be received and/or postmarked no later than Friday, July 9, 2010.

If you are unable to provide all required documents by this deadline, submit the completed application and any documents that are available along with a statement explaining what is missing and when it will be submitted. Your application can only be considered after all required documents are received.

If you have any questions regarding the enclosed information, please contact me directly at 775.748.1112.

Thank you,

A handwritten signature in black ink, appearing to read "Louis A. Schack".

Louis A. Schack
Director of Communications and Community Affairs

ATTENTION STUDENTS

Before your application will be considered complete, you **MUST** submit the following documents **BEFORE** the deadline noted on the application.

FIRST TIME APPLICANTS:

- Application for/Request for Payment of Scholarship Funds – completed form (2 pages)
- Personal statement/education plan written by the applicant (not more than two typed, double-spaced pages) which should include the applicant's goals, objectives and reasons for pursuing a higher education, his/her hopes and aspirations for his/her Western Shoshone Tribe and how further education will enable him/her to contribute to the progress of his/her people, and how he/she personally hopes to contribute to the welfare of his/her community
- Copy of grades/transcript from most recent term completed reflecting a minimum 2.0 GPA
- Copy of registration for upcoming term reflecting enrollment in a minimum of 11 credits (not exceeding 50% of credits on-line)
- Evidence of eligible Tribal affiliation

CONTINUING APPLICANTS:

- Application for/Request for Payment of Scholarship Funds – completed form (2 pages)
- Updated education plan (not more than two typed, double-spaced pages), outlining how the applicant intends to achieve his/her educational objective. *This is only required once per year, not each term.*
- Copy of grades/transcript from most recent term completed reflecting a minimum 2.0 GPA and completion of a minimum of 11 credits
- Copy of registration for upcoming term reflecting enrollment in a minimum of 11 credits (not exceeding 50% of credits on-line)

WESTERN SHOSHONE EDUCATIONAL LEGACY FUND

Application Guidelines

Applications must be submitted *prior* to the beginning of the semester in which the student wishes to receive funds and *prior* to the stated deadline.

**Applications and required documents must be received
or postmarked by Friday, July 9, 2010.**

ELIGIBILITY

To be eligible an applicant must:

- Be a high school graduate (or GED equivalent) and
- Be EITHER an enrolled member of one of the Western Shoshone Signatory Tribes (or in the case of the Duck Valley Shoshone Paiute Tribe, as a Shoshone Member of the Tribe) OR a resident of a Signatory Tribe's reservation or tribal service area and be Western Shoshone and
- Be enrolled to attend an approved educational institution

There are no age limits on eligibility.

TYPES OF INSTITUTIONS & EDUCATIONAL PROGRAMS

There are certain educational institutions that are approved for funding under this program. Approved institutions and educational programs are:

- Licensed and accredited schools, junior colleges, private and public colleges or universities
- Vocational, trade and technical schools
- On-line curriculums (at approved institutions) **not constituting more than 50%** of total enrolled credit hours

Types of programs that **are not** considered eligible for scholarship funds are:

- Apprenticeship programs (especially those offered through employment)
- Home study or self-taught curriculums
- High school enrichment studies or accelerated high school study programs
- On-line Curriculums (more than 50% of total credits)
- Internships (paid or unpaid)

The foregoing is not presented as an inclusive or exclusive listing implying automatic approval or disapproval. Each program or institution will be judged on its merits in an effort to fulfill the spirit and the purpose of the program. Final decision making authority lies with the Fund Trustees.

APPLICATION REQUIREMENTS

The following documents must be submitted by first-time applicants seeking an **initial** scholarship award:

1. Application for Scholarship Funds – completed form
2. Personal statement/education plan written by the applicant (not more than two typed, double-spaced pages) which should include the applicant's goals, objectives and reasons for pursuing a higher education, his/her hopes and aspirations for his/her Western Shoshone Tribe and how further education will enable him/her to contribute to the progress of his/her people, and how he/she personally hopes to contribute to the welfare of his/her community
3. Copy of grades/transcript from most recent term completed reflecting a minimum 2.0 grade point average (GPA)
4. Copy of registration for upcoming term reflecting enrollment in a minimum of 11 credits (not exceeding 50% of credits on-line)
5. Evidence of eligible Tribal affiliation

The following documents must be submitted by applicants seeking a **continuing** scholarship award:

1. Application for Scholarship Funds – completed form
2. Updated education plan (not more than two typed, double-spaced pages), outlining how the applicant intends to achieve his/her educational objective
3. Copy of grades/transcript from most recent term completed reflecting a minimum 2.0 grade point average (GPA) and the completion of a minimum of 11 credits
4. Copy of registration for upcoming term reflecting enrollment in a minimum of 11 credits (not exceeding 50% of credits on-line)

WESTERN SHOSHONE EDUCATIONAL LEGACY FUND

Additional Program Information for Parents and Students

ESTABLISHMENT

Effective August 1, 2008, Barrick Gold of North America, Inc., and the Duckwater Shoshone Tribe, the Duck Valley Western Shoshone Committee, the Ely Shoshone Tribe and the Yomba Shoshone Tribe established the Western Shoshone Educational Legacy Fund.

PURPOSE AND AWARD AMOUNTS

The purpose of the educational aid/scholarship program is to provide financial assistance to eligible Western Shoshone students for university education, college education and/or vocational/technical training up to \$2,000/semester for university or college 4-year and graduate degree programs and \$1,000/semester for community college, vocational or technical school 2-year degree and vocational/technical certificate programs.

OBJECTIVE

The objective of this program is to provide assistance to an eligible student by partially covering the cost of attending an educational institution to learn a skill or obtain a degree.

FUNDING

The Endowment Committee shall authorize funds for the program on a semi-annual basis. The amount to be authorized each year shall be determined by the Endowment Committee.

ALLOWABLE EXPENDITURES

Funds awarded shall be used for tuition, books, school fees and/or other expenditures directly related to legitimate educational pursuits at the educational institution identified on this application.

Housing costs for students living away from home constitute appropriate direct expenses. Under no circumstances may the award be used for any purpose other than for tuition, books, school fees, or other directly related school requirements.

TAX STATUS

The Internal Revenue Service may consider scholarships and other educational aid programs as taxable income. Please consult with your tax advisor.

SELECTION CRITERIA

Selection of students and the amount of money awarded to each student shall be based upon a number of factors including, but not necessarily limited to, the following:

- Cost to attend an institution, including tuition, fees, books and approved living expenses;
- The nature of the institution, i.e. college/university versus community college, technical or vocational school;
- Total number of students applying for assistance; and
- Amount of annual available funding.

Applications will be required each year from students, including those preparing to enter post secondary education curriculums. Final decisions regarding assistance under the program will be under the sole authority of the Fund Trustees.

CONFIDENTIALITY OF AWARDS

Awards of scholarships under this program will be confidential. Reports from the program to individual Participating Western Shoshone Tribes or Committees will report the number of students from that Tribe and total dollars awarded but will not identify individual students.

WESTERN SHOSHONE EDUCATIONAL LEGACY FUND

Additional Program Information for Parents and Students

ACADEMIC YEAR

The academic year is defined as September through August for purposes of this plan. Payment to students will be made for any semester or quarter to full-time students up to, but not exceeding, the amount of the scholarship awarded. For purpose of this program, "full-time" shall be designated as 11 credit hours, unless the school in which the student is enrolled requires a higher number of credits in order for the student to avoid academic probation. Enrollment in graduate programs that may not allow a student to enroll in at least 11 credit hours will be considered on a case-by-case basis. Final decisions regarding assistance under the program will be under the sole authority of the Fund Trustees.

PAYMENT OF SCHOLARSHIP FUNDS

Scholarship funds will be paid twice per academic year. The first term payment will be made at the beginning of the term upon receipt of a class registration schedule and receipt of grades from the previous term (or senior year of high school if a new student). The second payment for the academic year will be granted upon receipt of a class registration schedule for the next term and receipt of grades from the previous term. Total payments for the academic year will not exceed \$4,000.00.

Payments will be made directly to the students.

CONTINUING ELIGIBILITY

If a scholarship participant has interrupted studies for a period in excess of one academic year, eligibility in the scholarship program will not be reestablished unless the student can demonstrate to the satisfaction of the Endowment Committee, acting in their sole discretion, that the student's interruption was due to hardship or other good cause and the student is committed to return to studies and complete them on an uninterrupted basis.

Students who are suspended by an educational institution for disciplinary or academic reasons shall forfeit further award payments. Those students may receive consideration for reinstatement based upon eligibility requirements of the scholarship plan in force at the time and the circumstances surrounding reentry granted to a student by the educational institution or entry into another institution.

CANCELLATION AND CHANGES IN THE PROGRAM

The Fund Trustees reserve, at their sole discretion, the absolute right to cancel, supplement, or amend the educational aid/scholarship program at any time, and to resolve any dispute in the management or execution of the program.

WESTERN SHOSHONE EDUCATIONAL LEGACY FUND

Application for & Request for Payment of Scholarship Funds

Name: _____ Date: _____

Social Security #: _____ Date of Birth: _____

Mailing Address: _____

Physical Address: _____

City, State, Zip: _____ Email Address: _____

Home Phone: _____ Cell Phone: _____

High School Attended: _____ Graduation Date: _____

This application is being submitted for the (*circle*) Spring / Fall term of the year 20____.

Class Status (*circle*): Freshman Sophomore Junior Senior Graduate School

GPA (Most recent, not cumulative. High school seniors enter your cumulative GPA): _____

College/School applicant plans to attend: _____

This is a (*please circle*): 2-year Community College 4-year College/University Vocational/Trade School

I am seeking a (*please circle*): Vocational Certificate Associates Degree Bachelor's Degree Master's/PhD

Major: _____ Number of credit hours this semester: _____

School Mailing Address: _____

School contact name and phone: _____

Expected Graduation Date: _____ Degree: _____

Required Attachments (*Applications submitted without these documents will be considered incomplete and not considered until all documents are received.*)

The following documents must be submitted **upon first applying** to the program:

1. Application for/Request for Payment of Scholarship Funds – completed form (2 pages)
2. Personal statement/education plan written by the applicant (not more than two typed, double-spaced pages) which should include the applicant's goals, objectives and reasons for pursuing a higher education, his/her hopes and aspirations for his/her Western Shoshone Tribe and how further education will enable him/her to contribute to the progress of his/her people, and how he/she personally hopes to contribute to the welfare of his/her community
3. Copy of grades/transcript from most recent term completed reflecting a minimum 2.0 GPA
4. Copy of registration for upcoming term reflecting enrollment in a minimum of 11 credits (not exceeding 50% of credits on-line)
5. Evidence of Tribal affiliation

The following documents must be submitted upon applying **for continued scholarship funds**:

1. Application for/Request for Payment of Scholarship Funds--completed form (2 pages)
2. Updated education plan (not more than two typed, double-spaced pages), outlining how the applicant intends to achieve his/her educational objective. *This is only required once per year, not each term.*
3. Copy of grades/transcript from most recent term completed reflecting a minimum 2.0 GPA and completion of a minimum of 11 credits
4. Copy of registration for upcoming term reflecting enrollment in a minimum of 11 credits (not exceeding 50% of credits on-line)

COMMITMENT ON THE PART OF THE STUDENT

I understand that I am expected to maintain full-time enrollment (11 credit hours or more) and to maintain at least a 2.0 grade point average (GPA), thereby making progress toward earning a degree, learning a trade or developing an employable skill. Funds awarded shall be used for tuition, books, school fees and/or other expenditures directly related to my educational pursuits at the educational institution identified on this application.

I understand that if I do not complete the minimum number of required credit hours in a semester, I will not be eligible for scholarship funds in the next semester, regardless of GPA.

I understand that if my enrollment drops below 11 credit hours or I do not complete the required credit hours, no repayment is required; however, I will not be eligible for additional awards under this program until I successfully complete a semester with a full time class load with the required minimum GPA.

If my grades drop below a 2.0 GPA for a semester, I will be placed on probation and will have one semester to get my GPA at or above a 2.0. If I am unable to do this I will become ineligible for the program until completing a semester satisfying all criteria for the scholarship.

I agree that if I do not attend the institution/classes as indicated on this application I am responsible for returning all scholarship money disbursed for the most current term to the Western Shoshone Educational Legacy Fund, in order to remain eligible for future awards. It is my responsibility to keep the Endowment Committee informed of any changes to my address, degree/program, enrollment status and/or school transfers.

I understand that each semester I am required to provide proof of registration, a copy of my grades for the previous semester and a completed application form with my signature. I also understand that failure to provide all of these documents within the allotted timeframe may disqualify me for awards under this program.

I understand that I am responsible for following the guidelines set forth by the scholarship program. I further understand that failure to comply with the guidelines may cause me to forfeit any funds awarded to me and make me ineligible for participation in this program in the future.

I understand that if my application is submitted **after** the deadline, it will be held for consideration for the following semester.

I authorize the educational institution that I am attending or have attended to release information to the Western Shoshone Educational Legacy Fund Trustees regarding my enrollment status and grades.

I have read and agree to the guidelines set forth by the scholarship program.

Student Signature

Date

Submit completed application and supporting documents to:

Western Shoshone Educational Legacy Fund

Att'n: Louis A. Schack

PO Box 29

Elko, NV 89803

Fax: (775) 748-1248

Phone: (775) 748-1112