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Form 99Q-PF

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

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

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

2010

Form **990-PF** (2010)

OMB No 1545-0052

, 2010, and ending , 20 For calendar year 2010, or tax year beginning Initial return Check all that apply Initial return of a former public charity Final return Amended return ☐ Address change □ Name change A Employer identification number Name of foundation THE STUKENHOLTZ FAMILY FOUNDATION 26-2938868 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see page 10 of the instructions) 3420 MOONLIGHT DRIVE 208-733-5802 City or town, state, and ZIP code C If exemption application is pending, check here KIMBERLY, IDAHO 83341 D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test Section 501(c)(3) exempt private foundation Check type of organization check here and attach computation If private foundation status was terminated under Fair market value of all assets at section 507(b)(1)(A), check here ▶□ Other (specify) end of year (from Part II, col. (c), If the foundation is in a 60-month termination line 16) ▶ \$ (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here ▶ 🔲 187,117 Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per income purposes books the amounts in column (a) (see page 11 of the instructions)) (cash basis only) Contributions, gifts, grants, etc , received (attach schedule) 187,117 1 2 Check ► ☐ if the foundation is **not** required to attach Sch B 3 Interest on savings and temporary cash investments 15 4 Dividends and interest from securities . 5a Gross rents Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Revenue 6a Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . . R Net short-term capital gain . . . 9 Income modifications 10a Gross sales less returns and allowances Less: Cost of goods sold . . Gross profit or (loss) (attach schedule) . . . 11 Other income (attach schedule) . . 12 187,132 Total. Add lines 1 through 11 . 13 Compensation of officers, directors, trustees, etc Expenses 14 Other employed salaries and wages 15 Pension plans, employée-benefits Legal fees (attach schedule) Accounting tees (attach schedule) 250 h Administrative Other professional fees (attach schedule) 17 Taxes (attach schedule) (see page 14 of the instructions) 18 (%) (%) Depreciation (attach schedule) and depletion . . 19 20 21 Travel, conferences, and meetings and 22 47 Printing and publications . Other expenses (attach schedule) Total operating and administrative expenses. Add lines 13 through 23 297 Contributions, gifts, grants paid Total expenses and disbursements. Add lines 24 and 25 26 297 Subtract line 26 from line 12: 27 Excess of revenue over expenses and disbursements 186,835 Net investment income (if negative, enter -0-) . Adjusted net income (if negative, enter -0-)

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

Cat No 11289X

D۵	rt II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year		of year
		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	142,428	329,264	329,264
	2	Savings and temporary cash investments			
	3	Accounts receivable ►			
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less. allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other	1		
		disqualified persons (attach schedule) (see page 15 of the			
		instructions)			
	7	Other notes and loans receivable (attach schedule) ▶		•	
S		Less. allowance for doubtful accounts ▶			
šet	8	Inventories for sale or use			<u> </u>
Assets	9	Prepaid expenses and deferred charges			
1	10a	Investments—U.S. and state government obligations (attach schedule)			
	b	Investments corporate stock (attach schedule) .			
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶	-	-	-
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments – mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ►			12 12 7
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe			<u> </u>
	16	iotal assets (to be completed by all lifers—see the			
		instructions. Also, see page 1, item l)	142,428	329,264	329,264
	17	Accounts payable and accrued expenses			1 .
S	18	Grants payable			<u> </u>
ij	19	Deferred revenue			
Ε	20	Loans from officers, directors, trustees, and other disqualified persons			4
Liabilities	21	Mortgages and other notes payable (attach schedule)			-
	22	Other liabilities (describe >)	0		J '4' . "
	23	Total liabilities (add lines 17 through 22)	0		4 20.5
	İ	Foundations that follow SFAS 117, check here > and complete lines 24 through 26 and lines 30 and 31.			
és		· · · · · · · · · · · · · · · · · · ·	142,428	329.264	
lances	24	Unrestricted	142,428	329,202	4
	25	Temporarily restricted			-
B	26	Permanently restricted			-{
Net Assets or Fund Ba	İ	Foundations that do not follow SFAS 117, check here ▶ □ and complete lines 27 through 31.	i		
Ē	27	Capital stock, trust principal, or current funds			, ,
ō	28	Paid-in or capital surplus, or land, bldg., and equipment fund			1
ets	29	Retained earnings, accumulated income, endowment, or other funds			1 1
SS	30	Total net assets or fund balances (see page 17 of the			1 :
¥		instructions)	142,428	329,264	1
Š	31	Total liabilities and net assets/fund balances (see page 17			1
_	•	of the instructions)	142,428	329,264	4
P	art III	Analysis of Changes in Net Assets or Fund Balances		,20	
		al net assets or fund balances at beginning of year-Part II, colu		t agree with	
		l-of-year figure reported on prior year's return)			142,428
		er amount from Part I, line 27a			186,835
		er increases not included in line 2 (itemize) ► ROUNDING			1
		d lines 1, 2, and 3			329,264
:	5 Dec	creases not included in line 2 (itemize) ▶		5	
ı	6 Tot	creases not included in line 2 (itemize) ► al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), lii	ne 30 . 6	329,264
_					- 000 DE

		kınd(s) of property sold (e.g., real estat e, 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)
a						
b						
<u>c</u>						-
<u>d</u>					· <u>-</u>	
e		40 Constant allowed	(-) ()			<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (g) Cost or or or or or or or or or or or or or		nse of sale		n or (loss) (f) minus (g)
<u>a</u>				-	· · · · · · · · · · · · · · · · · · ·	
b_			ļ			
<u>c</u>			· · · · · · · · · · · · · · · · · · ·			
<u>d</u>						
<u>e</u>	Complete only for assets show	ring gain in column (h) and owned	by the foundation	on 12/21/60		
	Complete only for assets snow		1			l (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(y) Adjusted basis (k) Excess of col (t) col (k), but not let as of 12/31/69 over col (j), if any Losses (from			rom col (h))
<u>a</u>		<u> </u>	_			
<u>b</u> _						
С						
d						
e			<u> </u>		<u></u>	
	Capital gain net income or (also enter in Pa , enter -0- in Pai			
	N	, ,			2	
		or (loss) as defined in sections ine 8, column (c) (see pages 1				
	If (loss), enter -0- in Part I, I			instructions).	_	
O	V Qualification Unde	r Section 4940(e) for Reduate foundations subject to the	uced Tax on N			
o ect	Qualification Under otional use by domestic privation 4940(d)(2) applies, leave the foundation liable for the sign	r Section 4940(e) for Reduate foundations subject to the	uced Tax on N section 4940(a) itable amount of	tax on net invest any year in the t	Income ment income)	☐ Yes ☐
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Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the	e inst	ructi	ons)
1a ्	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			
С	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	2010 estimated tax payments and 2009 overpayment credited to 2010 6a			
b	Exempt foreign organizations—tax withheld at source . 6b			
d	Tax paid with application for extension of time to file (Form 8868) Backup withholding erroneously withheld 6d			
7				
8	Total credits and payments Add lines 6a through 6d			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed > 9			
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 2011 estimated tax Refunded 11			
Part '	VII-A Statements Regarding Activities			<u> </u>
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1	Yes	No
	participate or intervene in any political campaign?	1a		√
Ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?	1b		<u> </u>
	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.	1		
C	Did the foundation file Form 1120-POL for this year?	1c		1
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$			-
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$,	11.5
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		<u>/</u>
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			- J-
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		<i>\(\sigma\)</i>
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		1
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?	5		√
	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:	i		-
	By language in the governing instrument, or By language in t			· .
	• 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		✓
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 Enter the states to which the foundation reports or with which it is registered (see page 19 of the	7 ~		
8a	instructions) ▶	٠,	٠,	
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	, , ,	
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 2010 or the taxable year beginning in 2010 (see instructions for Part XIV on page	-		1.
	27)? If "Yes," complete Part XIV	9		_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	1	

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		1
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶	13	✓	
14		3-733-	5802	
•	Located at ► 3420 MOONLIGHT DRIVE, KIMBERLY, IDAHO ZIP+4 ►	8334		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here.			N
	and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority		Yes	T No.
16	over a bank, securities, or other financial account in a foreign country?.		162	No
	See page 20 of the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter	16		<u> </u>
	the name of the foreign country ►			1
				<u> </u>
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 (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			_
	(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)?			
	(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.)			
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 22 of the instructions)?	1b	!	
	Organizations relying on a current notice regarding disaster assistance check here ▶□			
С	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 2010?	1c		1
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)):			
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010?	,		~
L	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	ŀ		
Б	(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 22 of the instructions.)	0.	-	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	2b		1
3а	▶ 20 , 20 , 20 , 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
	, , , , , , , , , , , , , , , , , , , ,		İ	1
b	If "Yes," did it have excess business holdings in 2010 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			-3
	foundation had excess business holdings in 2010.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		1
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 2010?	4b		1

Form 99	00-PF (2010)									P	age (
Part	VII-B Statements Regarding Activities	s for W	/hich Form	4720	May Be R	equire	d (continue	ed)			
5a ੑ	During the year did the foundation pay or incur a (1) Carry on propaganda, or otherwise attempt to (2) Influence the outcome of any specific public directly or indirectly, any voter registration dr	to influe c election	nce legislati					No No			
	 (3) Provide a grant to an individual for travel, stu (4) Provide a grant to an organization other than section 509(a)(1), (2), or (3), or section 4940(c (5) Provide for any purpose other than religious 	n a cha d)(2)? (s	rıtable, etc., ee page 22 c	organiz	ation desci structions)		☐ Yes ☑	No No			•
b	purposes, or for the prevention of cruelty to of any answer is "Yes" to 5a(1)–(5), did any of the	children	or animals?				☐Yes ☑	No ed in			
	Regulations section 53 4945 or in a current notice					22 of t	he instruction		5b		
С	Organizations relying on a current notice regarding the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility	the four	ndation clain			the tax		No			
6a	If "Yes," attach the statement required by Regula Did the foundation, during the year, receive any on a personal benefit contract?					emiums] No			
b	Did the foundation, during the year, pay premium If "Yes" to 6b, file Form 8870	ns, dıre	ctly or indire	ctly, on	a personal	benefit	contract?	ē	6b		✓
	At any time during the tax year, was the foundation if "Yes," did the foundation receive any proceed						☐ Yes	-	7b		
Par	Information About Officers, Direct and Contractors	tors, T	rustees, F	ounda	tion Mana	agers,	Highly Pai	d En	nploye	es,	
1	List all officers, directors, trustees, foundation					(see p	age 22 of th	ne ins	structi	ons).	
	(a) Name and address	hou	e, and average rs per week ed to position		mpensation paid, enter -0-)	emplo	Contributions to lyee benefit plar erred compensa	ns I'	e) Exper other a	nse acc Illowan	
JOYC	E STUKENHOLTZ	.1			0		<u> </u>	0			
3420	MOONLIGHT DR, KIMBERLY, ID 83341		 						.		
		ļ				<u> </u>					
		ļ	-								
2	Compensation of five highest-paid employee If none, enter "NONE."	es (othe	er than thos	e inclu	ided on lir	ie 1—s	ee page 23	of th	ne inst	tructi	ons)
	(a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to p	week -	(c) Comper	nsation	(d) Contribution employee ben plans and defe compensation	nefit erred	(e) Exper	nse acc	
NON						_					
								-		_	

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

Par	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	ployees,
3	Five highest-paid independent contractors for professional services (see page 23 of the instructions). If no	e, enter "NONE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON	E	
		_
Tota	I number of others receiving over \$50,000 for professional services	
Par	t IX-A Summary of Direct Charitable Activities	
	at the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	NONE	
	<u></u>	
2		-
3		
4		
	t IX-B Summary of Program-Related Investments (see page 24 of the instructions)	
De	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	NONE	
2		
	Lather and the state of the sta	
	I other program-related investments See page 24 of the instructions	
3		
Tate	Add lines 1 through 2	
1 OTE	il. Add lines 1 through 3	

Part	X Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	gn foundati	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	n
b	Average of monthly cash balances	1b	
c	Fair market value of all other assets (see page 25 of the instructions)	1c	-
ď	Total (add lines 1a, b, and c)	1d	
e	Reduction claimed for blockage or other factors reported on lines 1a and	-	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see page 25 of		
	the instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	
6	Minimum investment return. Enter 5% of line 5	6	
Part			
1	Minimum investment return from Part X, line 6	1	
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010 (This does not include the tax from Part VI.) . 2b	1	
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	
Part	Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	[
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	
ь	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether th	e foundation

Part	XIII Undistributed Income (see page 26	of the instruction	ıs)		
1 `	Distributable amount for 2010 from Part XI, line 7	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
_					0
2	Undistributed income, if any, as of the end of 2010.			•	
a	Enter amount for 2009 only		 	0	
b	Total for prior years: 20 ,20 ,20		 		
3	Excess distributions carryover, if any, to 2010				
a	From 2005 From 2006				
b					
c	From 2007				
d	From 2008				
e	From 2009				
f 4	Total of lines 3a through e				
4	Qualifying distributions for 2010 from Part XII,				
	line 4 ▶ \$				
a	Applied to 2009, but not more than line 2a.		<u> </u>		
þ	Applied to undistributed income of prior years				
	(Election required—see page 26 of the instructions)				
C	Treated as distributions out of corpus (Election				
	required—see page 26 of the instructions)				
đ	Applied to 2010 distributable amount		·		
e	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2010				
	(If an amount appears in column (d), the same				· 1
_	amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b	· ·		۸.	· · · · · · · · · · · · · · · · · · ·
С	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					
	amount - see page 27 of the instructions .		_		
е	Undistributed income for 2009. Subtract line				-
	4a from line 2a Taxable amount—see page	•			
	27 of the instructions	·			
f	Undistributed income for 2010 Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2011		<u> </u>		
7	Amounts treated as distributions out of corpus				_ 1
	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 2005 not		P	•	
	applied on line 5 or line 7 (see page 27 of the		4		,
_	instructions)		,~ % t,		
9	Excess distributions carryover to 2011.		1, 11, 2, 2, 1	, , , , ,	
	Subtract lines 7 and 8 from line 6a		1.5	, , , , ,	1
10	Analysis of line 9:		' ' ' -	• •	,
а	Excess from 2006	•		, ,	
b	Excess from 2007]; -	-	
С	Excess from 2008		'		
d	Excess from 2009	, ·			
е	Excess from 2010				_

List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation

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.

- The name, address, and telephone number of the person to whom applications should be addressed
- b The form in which applications should be submitted and information and materials they should include:
- c Any submission deadlines.
- Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV Supplementary Information	ı (conti	inued)	-		
3 Grants and Contributions Paid Du	uring t	he Year or Approv	ed for Fu	ture Payment	
Recipient		If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or busine	ess)	or substantial contributor	recipient		
a Paid during the year					
NONE					
					-
			İ		
					-
					İ
		1			
		· · · · · · · · · · · · · · · · · · ·			3a
b Approved for future payment					
NONE					
					- [
Total	· .				3b

Page 12

Pa	Analysis of Income-Producing Ac	,	<u> </u>			
Ente	r gross amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by secti	on 512, 513, or 514	1 10/
		(a)	(b)	(c)	(d)	Related or exempt function income
		Business code	Amount	Exclusion code	Amount	(See page 28 of the instructions.)
1	Program service revenue					the instructions.)
	a NONE				_	
	b					
	C					
	d					
	e				 	
	f					
	g Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments				<u> </u>	ļ <u> </u>
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					<u> </u>
11	Other revenue a					
	b					
	c				-	
	d					
	e					
	Subtotal. Add columns (b), (d), and (e)					<u> </u>
13	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) .				13	
13 (See	Subtotal. Add columns (b), (d), and (e)	calculations)			13	
13 (See Pa	Subtotal. Add columns (b), (d), and (e) . Total. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions on page 29 to verify t XVI-B Relationship of Activities to the A	calculations)	ent of Exemp	t Purposes		
13 (See Pa	Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 29 to verify TXVI-B Relationship of Activities to the A Explain below how each activity for which accomplishment of the foundation's exempt p	calculations)	ent of Exemp	t Purposes		mportantly to the page 29 of the
13 (See Pa	Subtotal. Add columns (b), (d), and (e) . Total. Add line 12, columns (b), (d), and (e) . worksheet in line 13 instructions on page 29 to verify t XVI-B Relationship of Activities to the A	calculations)	ent of Exemp	t Purposes		mportantly to the page 29 of the
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Part	XVII	!	n Regarding Trar	nsfers To an	d Transacti	ions and	Relationsh	ips Wi	th Nonch	aritab	le	<u></u>
			ganizations									
1			directly or indirectly								Yes	No
			e Code (other than	section 501(c)	(3) organızatı	ons) or in s	section 527,	relating	to political			Ì
	_	nizations?								ŀ		
а			porting foundation to	o a noncharital	ble exempt o	rganızatıor	of					
	(1) C			•	•	•	•	•		1a(1)	_	✓
		ther assets .		•			•			1a(2)		<u> </u>
b		transactions									1	
			a noncharitable exe	_						1b(1)		/
			ets from a noncharit		rganization	•				1b(2)		✓_
			, equipment, or othe	er assets		•				1b(3)		1
		eımbursement a	=	•		•				1b(4)		/
	(5) Lo	oans or loan gua	rantees	•	•					1b(5)		✓
			ervices or membersh	•	-					1b(6)		✓
С			quipment, mailing li					•		_1c	<u> </u>	/
d			of the above is "Ye									
			ther assets, or servi									
			on or sharing arrang									
(a) Line	e no (b) Amount involved	(c) Name of nonc	haritable exempt o	rganization	(d) Desc	ription of transfe	ers, trans	actions, and sh	aring arr	angem	ents
						_						
			_									
						_						
		<u> </u>		-				_				
			-									_
				·								
			<u> </u>									
2a			ectly or indirectly af									
			501(c) of the Code (tion 501(c)(3)	or in secti	on 52/? .		• •	Yes	: 🗸	No
b	If "Y∈	_ 	e following schedule	г								
		(a) Name of organ	nization	(b) Ty	rpe of organization	on		(c) Desc	ription of relati	onship		<u>_</u>
			····									
												
	7 ~			<u> </u>								
C:~~	Unde		y, I declare that I have ex									
Sigr		i, it is true, correct, a	nd complete Declaration	or preparer (other)	ınan taxpayer ör ما	nuuciary) is b	/1			ı nas an	y Know	leage
Her	_ B _	X Joyce	Collegenholis		<u> </u>	4-/4-		RUSTE	E			
	/ S	ignature of difficer or		Town 7	Dat	te '		tle		DTU		
Paid	I	Print/Type prepare		Preparer's sign		Ma. —	Date		Check 📝 if	PTIN		
	arer	DENNIS R BRO		1 (Coin	MRCDI	m			self-employed		12017	50
	Only	Firm's name	DENNIS R BROWN,					Firm's		82-041		
	•	Firm's address ▶	828 BLUE LAKES E	SLVD N, TWIN F	ALLS, IDAHO	83301		Phone	no 2	:08-733	-1161	

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

2010

Name of	ame of the organization						Employer Identification number		
THE STUKENHOLTZ FAMILY FOUNDATION							26-2938868		
Organiz	zation type (check	one)		***************************************					
Filers o	f:	Sec	tion:						
Form 990 or 990-EZ) (enter numbe	r) organization					
			4947(a)(1)	nonexempt charita	able trust not treated	as a private f	oundation		
			527 politic	al organization					
Form 99	90-PF	V	501(c)(3) e	xempt private four	ndation				
			4947(a)(1)	nonexempt charita	able trust treated as a	private foun	dation		
			501(c)(3) t	axable private four	ndation				
	only a section 501(-	eneral Rule or a Sinization can check		General Rule	and a Special Rule. See		
Genera	ıl Rule								
Ø				990-EZ, or 990-PF Complete Parts I ar		the year, \$5,0	000 or more (in money or		
Specia	l Rules								
	sections 509(a)(1) and 17	0(b)(1)(A)(vi)	, and received from	n any one contributor	, during the y	rt test of the regulations under rear, a contribution of the 990-EZ, line 1. Complete Parts		
	the year, aggreg	ate contr	ibutions of	nore than \$1,000 f		religious, cha	m any one contributor, during iritable, scientific, literary, or I, II, and III		
	the year, contrib aggregate to mo year for an exclu applies to this o	utions fo ore than \$ isively rel rganization	or use <i>exclus</i> \$1,000. If the ligious, chaig on because	sively for religious, s box is checked, itable, etc., purpos it received nonexc	charitable, etc., purpo enter here the total co se Do not complete a slusively religious, cha	oses, but the ontributions t iny of the par ritable, etc.,	om any one contributor, during se contributions did not hat were received during the ts unless the General Rule contributions of \$5,000 or more		
990-E2	n. An organization Z, or 990-PF), but i	that is n t must a	ot covered	by the General Rul on Part IV, line 2 o	e and/or the Special I f its Form 990, or che	Rules does ne	ot file Schedule B (Form 990, n line H of its Form 990-EZ, or or rm 990, 990-EZ, or 990-PF)		

Schedule B ((Form 990,	990-EZ, c	or 990-PF)	(2010

Page 1 of 1 of Part I

Name of organization Employer identification number THE STUKENHOLTZ FAMILY FOUNDATION 26-2938868 Part I Contributors (see instructions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution __1 JOYCE STUKENHOLTZ Person \square Payroli 3420 MOONLIGHT DRIVE 187,117 Noncash (Complete Part II if there is KIMBERLY, IDAHO 83341 a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person П Payroli Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Name, address, and ZIP + 4 No. Aggregate contributions Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) Aggregate contributions No. Name, address, and ZIP + 4 Type of contribution Person **Payroll** Noncash (Complete Part II if there is a noncash contribution) (a) (b) (c) (d) No. Name, address, and ZIP + 4 Aggregate contributions Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution.) (a) (b) (c) (d) Aggregate contributions No. Name, address, and ZIP + 4 Type of contribution Person Payroll Noncash (Complete Part II if there is a noncash contribution.)

Page 1 of 1 of Part II
Employer identification number Schedule B (Form 990, 990-EZ, or 990-PF) (2010) Name of organization 26-2938868 THE STUKENHOLTZ FAMILY FOUNDATION

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
_1	NONE	\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
			l

Schedule	В	(Form	990.	990-EZ.	or 990-	·PF)	(2010)

Page 1 of 1 of Part III

Name	e or	organ	iizatio	n			
THE	CTI	HZENI	IOLT:	Z EANAH	v	FOLIND	A T10

Employer identification number

THE ŞTUKENHOLTZ FAMILY FOUNDATION 26-2938868

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)

	contributions of \$1,000 or less for th	e year. (Enter this in	formation once. S	ee instructions.) ► \$			
(a) No. from Part I	(b) Purpose of gift	(b) Purpose of gift (c) Use of gift		(d) Description of how gift is held			
	NONE						
1							
		(e) Transf	er of aift				
		(5)	J. C. J. C.				
	Transferee's name, address, ar	nd ZIP + 4	Relation	nship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held			
	<u>.</u>	(e) Transf	er of aift				
		,,,					
	Transferee's name, address, ar	nd ZIP + 4	Relation	ship of transferor to transferee			
(a) No. from	(b) Purpose of gift	(c) Use	of aift	(d) Description of how gift is held			
Part I	(.,, ,			(1, 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
(e) Transfer of gift							
	Transferee's name, address, a	nd 7IP + 4	Relationship of transferor to transferee				
	Transferee S flame, address, at	III ZIF T T	Nelation	isinp of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift (c)		of gift	(d) Description of how gift is held			

		•••••					
	(e) Transfer of gift						
	Transferee's name, address, a	nd ZIP + 4	Relation	nship of transferor to transferee			
				·····			
							

The Stukenholtz Family Foundation

26-2938868

Schedule of Accounting Fees \$\frac{250}{Dennis R Brown CPA}\$
PO Box 2367
Twin Falls, Idaho 83303

Substantial Contributor.

Joyce Stukenholtz \$\frac{187118}{3420 Moonlight Drive}

Kımberly, Idaho 83341