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Form **990-PF**

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

OMB No 1545-0052

2010

Department of the Treasury Internal Revenue Service

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements For calendar year 2010, or tax year beginning , 2010, and ending

G	Che	ck al	I that apply:		Initial return		ıal Return	_	oublic charity	_			al return
				L,	Amended retu	rn		Address	change	Na	_	change	·
GEORGE E. WHITE FOUNDATION							A	Employer identification nu	mber				
	<pre>% SHELLY KENDRIX, REGISTERED AGEN PO BOX 3932</pre>						'NT		В	46-0429077 Telephone number (see the	instructions)		
PO												406-756-6248	1133 2030137
RA	PO BOX 3932 RAPID CITY, SD 57709										c	If exemption application is	pending, check here
											D	1 Foreign organizations, che	
Н	읻		type of organiz					mpt private t				2 Foreign organizations mee here and attach computati	ting the 85% test, check
_			ction 4947(a)(1)								E	If private foundation statu	
ı	ra (fr	ir mari <i>om Pa</i>	ket value of all asse rt II, column (c), lin	ets le 1	at end of year . 6)	J ACC	Other (specif	ethod: XC	asnAc	crual	1	under section 507(b)(1)(A), check here
i	> \$		182	. 1	10.	∪ Part I,			n cash basıs.	<u> </u>	F	If the foundation is in a 60 under section 507(b)(1)(B	
Pa	rt I		nalysis of Re	ev	enue and			enue and	(b) Net inv		nt	(c) Adjusted net	(d) Disbursements
		E	(penses (The	e to	tal of amounts	in	expenses	s per books	incor			income	for charitable
		sa	lumns (b), (c), rily equal the a	mo	ounts in column	i (a)							purposes (cash basis only)
		(se	Contributions with		ants, etc, received (att aab\		20,050.				<u> </u>	<u> </u>
	ĺ	2			ans, etc, received (idn is not reg to att			20,030.					
			Interest on sav	vin	gs and tempora			0.674		2 65		0.674	
		4	cash investme Dividends and inte				 	2,674. 370.		2,67 37	/4.	2,674.	
			Gross rents	-103				310.			υ.	370.	
	ļ	b	Net rental income or (loss)	_									
300 E	!		Net gain/(loss) from Gross sales price for			line 10					_		
	<i>!</i>		assets on line 6a							-1 0	_	BEULINED IC	
E	2	7 8	Net short-term		e (from Part IV, line apital dain	: 2)				E	M	AV S O BOUL	4
高上		9	Income modifi		•					M	- (*)	TO ZUII CA	
8		10 a	Gross sales less returns and allowances	l			}			'	_	75.	
		b	Less Cost of goods sold	\vdash						1	9	MUEN, UI	
MAN		c	Gross profit/(loss) (a	tt sch).			·					
<u></u>			Other income			•	 -						
\Box								00.004		2 0 4			
		12 13	Total. Add line		I through II ers, directors, truster	es etc		23,094.		3,04	14.	3,044.	
880Z			Other employee sa			,						<u> </u>	
		15	Pension plans	, е	mployee benef	its							
	A D M		Legal fees (attach									 	
	M		Accounting fees (a Other prof fees (a			ST. I	<u> </u>	330.		1(9.	· <u> </u>	221.
ō	Ņ	17	Interest	llac	ii sui)							 	
O P E R A	S	18	Taxes (attach schedule)(see	instr) SEE S.	TM 2		29.		1	LO.		19.
Ã	R A T	19	Depreciation (att	ach			324.		2.7	24.		
i N	ij	20	sch) and deple Occupancy	euc	on .	•	<u> </u>	324.		32	.4.		
N G	Ě	21		end	es, and meetir	ngs							
A N D	E	22	Printing and p										
D	EXPERSES	23	Other expense	es SF	(attach schedul E STATEME	ie) NT 3		32.		1	11.		21.
	Ş	24	Total operatin	a i	and administra	tive							
	ร		expenses. Add	ďΙ	nes 13 through	23	<u> </u>	715.		45	54,	·	261.
		25			rants paid PART			10,200.				<u> </u>	10,200.
			Total expense Add lines 24 a	ınd	25	ents.	<u></u> _	10,915.		45	54.	0.	10,461.
			Subtract line 2										
		а	Excess of revenues and disburser	en: ne	ue over expens nts	ses		12,179.					
		b	Net investment inc			-0-)				2,59	90.		
		C	Adjusted net incor	ne	(if negative, enter -0)-)			L			3,044.	5 000 PF (0010)

Pari		See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing			
	2	Savings and temporary cash investments	148,501.	159,637.	159,637.
	3	Accounts receivable.			
		Less: allowance for doubtful accounts ▶			·
	4	Pledges receivable . •			
i	İ	Less: allowance for doubtful accounts			
	5	Grants receivable	-		
	6	Receivables due from officers, directors, trustees, and other			
	_	disqualified persons (attach schedule) (see the instructions)			
Α	′	Other notes and loans receivable (attach sch) Less: allowance for doubtful accounts			
S	8				
A S E T	9	Inventories for sale or use	·· <u>-</u>		
T S	1 -	· · · · · · · · · · · · · · · · · · ·			
•	107	a Investments – U.S. and state government obligations (attach schedule)			
	l	b Investments — corporate stock (attach schedule). STATEMENT . 4	19,044.	19,411.	16,689.
	,	c 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: basis7,811.			
		Less: accumulated depreciation (attach schedule) SEE STMT 5 - 2,326.	5,809.	5,485.	5,784.
		Other assets (describe			
	16	Total assets (to be completed by all filers – see instructions Also, see page 1, item I)	173,354.	184,533.	182,110.
Ļ	17	Accounts payable and accrued expenses .			
Ā	18	Grants payable .	1,000.		
В	19	Deferred revenue			
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons			
+	21	Mortgages and other notes payable (attach schedule) .			
Ţ.	22	Other liabilities (describe			
E S	23	Total liabilities (add lines 17 through 22)	1,000.	0.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
NF	24	Unrestricted			
N F E U T N	25	Temporarily restricted			
T N D	26	Permanently restricted			
A B A L T A		and complete lines 27 through 31.			
TĀ	27	Capital stock, trust principal, or current funds			
S N C	28	Paid-in or capital surplus, or land, building, and equipment fund	170 254	104 533	
OE	29	Retained earnings, accumulated income, endowment, or other funds	172,354.	184,533.	
кэ	30 31	Total net assets or fund balances (see the instructions) Total liabilities and net assets/fund balances	172,354.	184,533.	
	5	(see the instructions)	173,354.	184,533.	
Part		Analysis of Changes in Net Assets or Fund Balance	es		
1	Tota	I net assets or fund balances at beginning of year - Part II, colur	mn (a), line 30 (must agr	ee with	
	end-	of-year figure reported on prior year's return)	(2), 20 (aut ag.	· <u> 1</u>	172,354.
		r amount from Part I, line 27a		. 2	12,179.
		increases not included in line 2 (itemize).	_ 	3	
		lines 1, 2, and 3		4	184,533.
5	Decre	ases not included in line 2 (itemize)		5	

184,533.

6

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Bairi	(a) List and describe	e the kind(s) of property sold (e.g., rese; or common stock, 200 shares ML	eal estate,	(b) How acqu P — Purcha D — Donatio	se (month, day, year)	
1a	N/A		···	U — Conati		
- Б						
			· · · · · · · · · · · · · · · · · · ·			
d		· · · · · · · · · · · · · · · · · · ·				
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale		(h) Gain or (e) plus (f) m	
a						
b						
c						
d			<u>. </u>		• •	
<u> e </u>						· <u> </u>
	Complete only for assets show	ng gain in column (h) and owned by	the foundation on 12/31/69	·	(I) Gains (Col	umņ (h)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if an		gain minus column (than -0-) or Losses (fi	k), but not less rom column (h))
a						
<u> </u>			· · · · · · · · · · · · · · · · · · ·			
<u> </u>						
<u>d</u>						
<u>е</u>						
2 (Capital gain net income or (net	capital loss)if gain, alsoif (loss), enter	enter in Part I, line 7 er -0- in Part I, line 7		2	
3 V	let short-term capital gain or (loss) as defined in sections 1222(5)	and (6):			
tı	n Part I, line 8	8, column (c) (see the instructions)			3	
Part	Qualification Under	Section 4940(e) for Reduced	Tax on Net Investme	nt Incom	e	
If 'Yes	,' the foundation does not qual	tion 4942 tax on the distributable am ify under section 4940(e). Do not cor n each column for each year; see the	nplete this part.		Yes	X No
	(a) Base period years alendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass		(d) Distribution (column (b) divided	
	2009	9,121.	173	,239.		0.052650
	2008	8,063.		,693.		0.046690
	2007	2,230.		745.		0.014892
	2006	5,415.		,221.		0.043945
	2005	5,335.		,711.		0.040200
2 1	Total of line 1, column (d)				2	0.198377
3 A	Average distribution ratio for th number of years the foundation	e 5-year base period – divide the tol has been in existence if less than 5	tal on line 2 by 5, or by the years		3	0.039675
4 E	Enter the net value of nonchari	table-use assets for 2010 from Part 2	X, line 5		4	178,140.
5 N	Multiply line 4 by line 3				5	7,068.
	Enter 1% of net investment inc	ome (1% of Part L line 27h)			6	26.
		one (170 or 1 art 1, line 270)				·
_	Add lines 5 and 6			 	7	7,094.
	Enter qualifying distributions fro f line 8 is equal to or greater th	om Part XII, fine 4 nan line 7, check the box in Part VI,	line 1b. and complete that r	part using a	8 1% tax rate See t	<u>10,461.</u> he
F	Part VI instructions					n 990-PF (2010)

form 990-PF (2010) GEORGE E. WHITE FOUNDATION 46-042907		<u> </u>	age 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the instr	uctions)		
1 a Exempt operating foundations described in section 4940(d)(2), check here			
Date of ruling or determination letter: (attach copy of letter if necessary — see instr.)			
b Domestic foundations that meet the section 4940(e) requirements in Part V,			26.
check here ► X 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, column (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-).			0.
			26.
			0.
, , , , , , , , , , , , , , , , , , , ,			26.
			20.
6 Credits/Payments:			
a 2010 estimated tax pmts and 2009 overpayment credited to 2010 b Exempt foreign organizations — tax withheld at source			
			İ
c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld			
			0.
Total ordano and paymonto, the most of the age of			<u> </u>
			26.
			20.
<u> </u>			
11 Enter the amount of line 10 to be: Credited to 2011 estimated tax	_		
Part VII-A Statements Regarding Activities	[Yes	No
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?	1a	163	X
	' "		
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1 ь		X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			
c Did the foundation file Form 1120-POL for this year?	1 c		<u> X</u>
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	1		
(1) On the foundation \$ 0. (2) On foundation managers \$ (5) (2) e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	-		ì
foundation managers >\$ 0.			
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
If 'Yes,' attach a detailed description of the activities.			
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	4Ь	N	/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	. 5		X
If 'Yes,' attach the statement required by General Instruction T.			Ì
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	}		
● By language in the governing instrument, or			Ì
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict			
with the state law remain in the governing instrument?	6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	_X_	
8a Enter the states to which the foundation reports or with which it is registered (see the instructions)		ļ	
SD			
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 SEE STATEMENT 6.	8b		X
			-41
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(6) for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' complete Part XI	9		X
			 -
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names			
and addresses.	10		X

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Par	t VII-A Statements Regarding Activities (Continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		x
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	. 13	X	
14	Website address ► N/A Telephone no ► 40	6-756-	6248	
14	Located at PO BOX 1624 KALISPELL MT ZIP + 4 > 59903	<u> </u>	0210	
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.	N/	A •	N/A
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over bank, securities, or other financial account in a foreign country?	a <u>16</u>	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If 'Yes,' enter the name of the foreign country ▶	i		
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			1
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 a	a 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 X	NO		
	(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?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	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		
t	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 the instructions)?	1	b N	A
	Organizations relying on a current notice regarding disaster assistance check here			
(c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010?	1	С	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)):			
ā	a 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? Yes X	No		
	If 'Yes,' list the years ► 20 , 20 , 20			
ł	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 the instructions)	2	b N	I/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			
3 8	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X	No		1
I	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 foundation had excess business holdings in 2010.)	2	b N	I/A
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its			
	charitable purposes?	_4	а	X
l	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?		ь	 X
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Form 990-PF (2010) GEORGE E. WHITE FOUNDATION

Part VII-B Statements Regarding Activiti	es for Which Form	1 4720 May Be Req	uired (continued)			
5a During the year did the foundation pay or incu	r any amount to:					
(1) Carry on propaganda, or otherwise attemp	t to influence legislatio	n (section 4945(e))?	. Yes X	No		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?.						
(3) Provide a grant to an individual for travel, study, or other similar purposes?						
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	nan a charitable, etc, oi 4940(d)(2)? (see instru	rganization described uctions)	Yes X	No		
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes X	No		
b If any answer is 'Yes' to 5a(1)-(5), did any of to described in Regulations section 53.4945 or in	the transactions fail to a current notice regard	qualify under the except ding disaster assistance	tions	5b N/A		
(see instructions)? Organizations relying on a current notice regarding disaster assistance check here						
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? N/A Yes No If 'Yes,' attach the statement required by Regulations section 53.4945-5(d).						
6a Did the foundation, during the year, receive ar on a personal benefit contract?	•	•	∐ Yes X	No 6b X		
b Did the foundation, during the year, pay premi If 'Yes' to 6b, file Form 8870	ums, directly or indirec	tily, on a personal bene	iit contract:	6b X		
7a At any time during the tax year, was the found	lation a party to a prob	ibited tax shelter transa	ction? Yes X	No		
b If yes, did the foundation receive any proceeds				7b		
Part VIII Information About Officers, Di	rectors. Trustees.	Foundation Manag	ers, Highly Paid E			
and Contractors						
1 List all officers, directors, trustees, foundatio	n managers and their o	compensation (see inst	ructions).			
(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		
BETTY J. WHITE	PRESIDENT	0.	0.	0.		
PO BOX 769	0.30					
SUNDANCE, WY 82729						
KATHY A. LENZ	VP/ SEC	0.	0.	0.		
PO BOX 903	0.30					
SUNDANCE, WY 82729						
STEVEN J LENZ	DIRECTOR	0.	0.	0.		
PO BOX 903	0.10					
SUNDANCE, WY 82729						
KAY L. WALKER	TREASURER	0.	0.	0		
PO BOX 1624	0.30					
KALISPELL, MT 59903						
2 Compensation of five highest-paid employee						
(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)	· ·	>	. 0		

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid I and Contractors (continued)	Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	0
Part IX-'A' Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	
Pair IX-B; Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 <u>N/A</u>	
2	
All other program-related investments. See instructions.	
Total Add lines 1 through 3	
Total. Add lines 1 through 3	0.

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<u>. u.</u>	see instructions.)	n cigir i	oundations,
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	16,029.
	Average of monthly cash balances	1 b	159,256.
	Fair market value of all other assets (see instructions)	1 c	<u>5,568.</u>
	Total (add lines 1a, b, and c)	1 d	180,853.
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
_	(attach detailed explanation)		
_	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d .	3	180,853.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	2,713.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	178,140.
6	Minimum investment return. Enter 5% of line 5	6	8,907.
Part			undations
	and certain foreign organizations check here ► and do not complete this pa	rt.)	
1	Minimum investment return from Part X, line 6	1	<u>8,907.</u>
2a	Tax on investment income for 2010 from Part VI, line 5 . 2a . 26.		
ь	Income tax for 2010. (This does not include the tax from Part VI) . 2b		
c	Add lines 2a and 2b	2c	26.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	8,881.
4	Recoveries of amounts treated as qualifying distributions .	4	
5	Add lines 3 and 4	5	8,881.
6	Deduction from distributable amount (see instructions)	6	
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	8,881.
Par	t XII Qualifying Distributions (see instructions)	 -	
1 a	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	10,461.
b	Program-related investments — total from Part IX-B	1 Ъ	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes.	2	
3 a	Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required)		
	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	10,461.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	26.
	Adjusted qualifying distributions. Subtract line 5 from line 4	6	10,435.
U			
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether qualifies for the section 4940(e) reduction of tax in those years	the four	ndation
BAA			Form 990-PF (2010)

Form **990-PF** (2010)

Part XIII Undistributed Income (see instructions)

1 Distributable amount for 2010 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2010: a Enter amount for 2009 only 5 Total for prior years: 20, 20, 20 3 Excess distributions carryover, if any, to 2010: a From 2005 b From 2006 c From 2007 d From 2008 e From 2009 f Total of lines 3a through e 4 Qualifying distributions for 2010 from Part XII, line 4* \stacksigned \	81.
2 Undstributed income, if any, as of the end of 2010: a Enter amount for 2009 only b Total for prior years' 20, 20	
a Enter amount for 2009 only b Total for prior years' 20 , 20 , 20	
b Total for prior years: 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20	
3 Excess distributions carryover, if any, to 2010: a From 2005 b From 2006 c From 2007 d From 2008 e From 2009 f Total of lines 3a through e 4 Qualifying distributions for 2010 from Part XII, line 4 \rightarrow \sqrt{10,461.} a Applied to 2009, but not more than line 2a b Applied to undistributed income of prior years (Election required — see instructions) c Treated as distributions out of corpus (Election required — see instructions) d Applied to 2010 distributable amount e Remaining amount distributed out of corpus Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a).) 6 Enter the net total of each column as indicated below: a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistribution.	
a From 2005 b From 2006 c From 2007 d From 2009 f Total of lines 3a through e 4 Qualifying distributions for 2010 from Part XII, line 4 \$ 10,461. a Applied to 2009, but not more than line 2a b Applied to undistributed income of prior years (Election required — see instructions) c Treated as distributions out of corpus (Election required — see instructions) d Applied to 2010 distributed amount e Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a).) 6 Enter the net total of each column as indicated below: a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistribution.	
b From 2006 c From 2007 d From 2008 e From 2009 f Total of lines 3a through e 4 Qualifying distributions for 2010 from Part XIII, line 4 \$ 10,461. a Applied to 2009, but not more than line 2a b Applied to undistributed income of prior years (Election required — see instructions) c Treated as distributions out of corpus (Election required — see instructions) d Applied to 2010 distributable amount e Remaining amount distributed out of corpus (If an amount appears in column (a), the same amount must be shown in column (a).) 6 Enter the net total of each column as indicated below: a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistribut-	
c From 2007 d From 2008 e From 2009 f Total of lines 3a through e 4 Qualifying distributions for 2010 from Part XII, line 4 * \$ 10,461. a Applied to 2009, but not more than line 2a b Applied to undistributed income of prior years (Election required — see instructions) c Treated as distributions out of corpus (Election required — see instructions) d Applied to 2010 distributable amount e Remaining amount distributed out of corpus Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a).) 6 Enter the net total of each column as indicated below: a Corpus, Add lines 3f, 4c, and 4e. Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistribut-	
d From 2008 e From 2009 f Total of lines 3a through e 4 Qualifying distributions for 2010 from Part XII, line 4:	
e From 2009 f Total of lines 3a through e 4 Qualifying distributions for 2010 from Part XII, line 4 ► \$ 10,461. a Applied to 2009, but not more than line 2a b Applied to undistributed income of prior years (Election required — see instructions) c Treated as distributions out of corpus (Election required — see instructions) d Applied to 2010 distributable amount e Remaining amount distributed out of corpus Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a).) 6 Enter the net total of each column as indicated below: a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistribut-	
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XII, line 4	
a Applied to 2009, but not more than line 2a b Applied to undistributed income of prior years (Election required – see instructions) c Treated as distributions out of corpus (Election required – see instructions) d Applied to 2010 distributable amount e Remaining amount distributed out of corpus Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a).) 6 Enter the net total of each column as indicated below: a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 b Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistribut-	
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line 4b from line 2b c Enter the amount of prior years' undistribut-	
c Enter the amount of prior years' undistribut-	
ad income for which a notice of deticiency.	
ed income for which a notice of deficiency has been issued, or on which the section	
4942(a) tax has been previously assessed 0.	
d Subtract line 6c from line 6b. Taxable amount — see instructions .	
e Undistributed income for 2009. Subtract line 4a from Inne 2a. Taxable amount — see instructions	
The 2d. Totals difficult out the decision	
f Undistributed income for 2010. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011	0.
7 Amounts treated as distributions out of	.
corpus to satisfy requirements imposed	
by section 170(b)(1)(F) or 4942(g)(3) (see instructions) 0.	
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions) 0.	
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a 1, 199.	
10 Analysis of line 9:	
a Excess from 2006	
b Excess from 2007.	
c Excess from 2008	
d Excess from 2009	
e Excess from 2010 1,199.	

Form 990-PF (2010) GEORGE E. WHITE I				46-042907	
Pa社XIX Private Operating Foundation					N/A
1a If the foundation has received a ruling or on is effective for 2010, enter the date of the	letermination letter ruling .	that it is a private	operating foundatio	n, and the ruling .	
b Check box to indicate whether the foundat		erating foundation		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		
investment return from Part X for each year listed	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
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			<u> -</u>		
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()(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
assets at any time during the Information Regarding Foundation Manag a List any managers of the foundation who had close of any tax year (but only if they have BETTY J. WHITE	jers:	·	total contributions resection 507(d)(2).)	eceived by the foun	dation before the
b List any managers of the foundation who ca partnership or other entity) of which the NONE	own 10% or more of foundation has a 1	of the stock of a co 0% or greater inter	rporation (or an equi rest	ally large portion of	the ownership of
2 Information Regarding Contribution, Gran Check here ► X if the foundation only makes requests for funds if the foundation makes complete items 2a, b, c, and d.	nakes contributions s gifts, grants, etc,	to preselected cha (see instructions)	arıtable organızatıon to ındıvıduals or orga	anizations under oth	ept unsolicited ner conditions,
a The name, address, and telephone numbe	r of the person to	whom applications	should be addressed	d.	
b The form in which applications should be s	submitted and infor	mation and materi	als they should inclu	de:	
c Any submission deadlines:					
d Any restrictions or limitations on awards, s	such as by geograp	hical areas, charita	able fields, kinds of i	nstitutions, or other	factors:
	т т	EA0310L 02/16/11		F	form 990-PF (201

Page 11

3 Grants and Contributions Paid During the Y	ear or Approved for Fut	ure Paymen	ıt	
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
	substantial contributor	recipient		
Name and address (home or business) a Paid during the year SEE STATEMENT 7	any foundation manager or substantial contributor	recipient	contribution	
			▶ 3a	
Total		1	<u> </u>	10,200.
b Approved for future payment				
Total		•	> 3b	<u> </u>

Part XVI-A	Analysi	s of Inco	me-Produc	cing Acti	vities
. u	thinaly 31.	3 01 11100	iiic i iodui	oning Acu	4100

Ente	gross amounts unless otherwise indicated	Unrelate	ed business income	Exclude	d by section 512, 513, or 514	(e)
•	B	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (see the instructions)
	Program service revenue			code		
a H				-		
c						
						
е						
f						
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments		·	14	2,674.	<u> </u>
4	Dividends and interest from securities			14	370.	
	Net rental income or (loss) from real estate:			ļ		
	Debt-financed property					
	Not debt-financed property					
	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory					
9 10	Net income or (loss) from special events Gross profit or (loss) from sales of inventory		<u> </u>			
	Other revenue:				·	
'' a						
ь			- · · · · · · · · · · · · · · · · · · ·		-	
c					-	
d						
е						
_					3,044.	
12 13	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)				3,044. 13	3,044.
12 13	Subtotal Add columns (b), (d), and (e)	ns)				3,044.
12 13 See	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)		ishment of Exemp	t Purpe	13	3,044.
12 13 See Par	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the	Accompl			oses	
12 13 See Par	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation	Accompl			oses	
12 13 See Par	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the No. Explain below how each activity for which in accomplishment of the foundation's exempt	Accompl			oses	
12 13 See Par	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the	Accompl			oses	
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12 13 See Par	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the No. Explain below how each activity for which in accomplishment of the foundation's exempt	Accompl			oses	
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12 13 See Par	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the No. Explain below how each activity for which in accomplishment of the foundation's exempt	Accompl			oses	
12 13 See Par	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the No. Explain below how each activity for which in accomplishment of the foundation's exempt	Accompl			oses	
12 13 See Par	Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation XVI-B Relationship of Activities to the No. Explain below how each activity for which in accomplishment of the foundation's exempt	Accompl			oses	
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Form 990-PF (2010) GEORGE E. WHITE FOUNDATION 46-0429077 PartiXVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

descri	ie organization directly ibed in section 501(c) ing to political organizat	of the Code (other	gage in any of the following er than section 501(c)(3) org	with any other organiza janizations) or in sectio	ation on 527,	Yes No
	- '					
		toundation to a	noncharitable exempt organ	lization or:		
(1) C			• • • • • • •		• • • • • • • • • • • • • • • • • • • •	1a(1) X
	ther assets			••••		1a (2) X
	transactions:					
		•	pt organization			1 b (1) X
(2) Pi	urchases of assets from	m a noncharitable	e exempt organization			1b(2) X
(3) Re	ental of facilities, equip	pment, or other a	issets			1b (3) X
(4) Re	eimbursement arrange	ments				1 b (4) X
(5) Lo	oans or loan guarantee	es				1b (5) X
(6) Pe	erformance of services	or membership	or fundraising solicitations			1b(6) X
		•	, other assets, or paid empl			1c X
			•	•		\
d if the the go any tra	answer to any of the a ods, other assets, or s ansaction or sharing a	bove is 'Yes,' co services given by rrangement, sho	mplete the following schedu the reporting foundation. If w in column (d) the value of	le. Column (b) should the foundation receive the goods, other asset	always show the fair r d less than fair marke ts, or services receive	narket value of et value in d
(a) Line no.	(b) Amount involved		oncharitable exempt organization		transfers, transactions, and	
N/A						
						
				 		
		 				
		 				
		ļ				
						
						
				 		
						
descri	foundation directly or in bed in section 501(c) or in complete the following.	of the Code (othe	ed with, or related to, one or or than section 501(c)(3)) or	more tax-exempt orga in section 527?	nizations	Yes X No
	(a) Name of organization	on	(b) Type of organization	on -	(c) Description of rela	ationship
N/A						
						
						
	· -					
		+				
				 _		
Sign Under	r penaities of perjury, I declare ct, and complete Declaration	e that I have examined of preparer (other than	I this return, including accompanying a taxpayer or fiduciary) is based on a	schedules and statements, and il information of which prepare	d to the best of my knowledg r has any knowledge	e and belief, it is true,
Here 📐				1	▲ TREASURER	
1 -	Signature of officer or trustee			Date	Title	
	Print/Type preparer's nam	ne	Preparer's signature	Pate	Check if if	PTIN
	KAY LINDA WA	IKED	Nay in led	hy CPN 5/13/1		PO0168625
Paid		, 		0/0/11/0/13/1		1. V U. 10 0 V. C
Preparer	Firm's name		NALKER, C	<u>. r </u>	Firm's EIN ► N/A	
Use Only	Firm's address	80 4TH AVE				
	K	ALISPELL, M	T 59901		Phone no (406)	<u> 756-6095 </u>
RAA						Form 900 PF (2010)

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 the organization GEORGE E. WHITE FO	OUNDATION	Employer Identification number			
% SHELLY KENDRIX,	46-0429077				
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	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a priv	/ate foundation			
	501(c)(3) taxable private foundation				
Check if your organization is covered by the Ge	neral Rule or a Special Rule.				
Note. Only a section 501(c)(7), (8), or (10) orga	inization can check boxes for both the General Rule and a	Special Rule See instructions.			
General Rule					
X For an organization filing Form 990, 990-EZ contributor (Complete Parts I and II.)	, or 990-PF that received, during the year, \$5,000 or more	(in money or property) from any one			
complete rate randing					
Special Rules					
For a section 501(c)(3) organization filing For	orm 990 or 990-EZ, that met the 33-1/3% support test of the I from any one contributor, during the year, a contribution o	e regulations under sections			
(2) 2% of the amount on (i) Form 990, Part	VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I a	nd II.			
For a section 501(c)(7), (8), or (10) organiza	ation filing Form 990 or 990-EZ, that received from any one	contributor, during the year,			
aggregate contributions of more than \$1,000 the prevention of cruelty to children or anim	0 for use exclusively for religious, charitable, scientific, liter	ary, or educational purposes, or			
For a section 501(c)(7), (8), or (10) organize	ation filing Form 990 or 990-EZ, that received from any one s, charitable, etc., purposes, but these contributions did not	contributor, during the year,			
If this box is checked, enter here the total co	ontributions that were received during the year for an <i>exclu</i>	<i>isively</i> religious, charitable, etc.			
	unless the General Rule applies to this organization becaus	e it received nonexclusively			
religious, charitable, etc, contributions of \$5	0,000 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 their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form					
990-PF) but it must answer 'No' on Part IV, line 990-PF, to certify that it does not meet the filing	e 2 of their Form 990, or check the box on line H of its Form grequirements of Schedule B (Form 990, 990-EZ, or 990-P	1 990-EZ, or on line 2 of its Form F).			
BAA For Paperwork Reduction Act Notice, se	·	e B (Form 990, 990-EZ, or 990-PF) (2010			
990EZ, or 990-PF.	e the matuchons for Point 330, Schedul	E B (1 01111 330, 330-EZ, 01 330-FF) (2010			

			-
	B (Form 990, 990-EZ, or 990-PF) (2010)	Page 1	of 1 of Part I
Name of org		1 ' '	r identification number
GEORGE	E E. WHITE FOUNDATION]46-04	129077
Part I	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	BETTY J. WHITE		Person X Payroll
,	PO BOX 769 SNDANCE, WY 82729	\$20,000.	(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		 \$	Person Payroll Noncash

BAA

(a)

Number

(a)

Number

(b)

Name, address, and ZIP + 4

(b)

Name, address, and ZIP + 4

(c)
Aggregate
contributions

(c)

Aggregate contributions

(Complete Part II if there is a noncash contribution.)

(d)

Type of contribution

(Complete Part II if there is a noncash contribution.)

(d)

Type of contribution

(Complete Part II if there is a noncash contribution)

Person Payroll Noncash

Person Payroll Noncash

of 1

of Part II

GEORGE E. WHITE FOUNDATION

Employer identification number

46-0429077

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
	N/A		
		\$	
(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
		\$	
BAA	Sched	lule B (Form 990, 990-EZ	, or 990-PF) (2010)

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

Transfer of gift

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ZU	Н	U

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FEDERAL STATEMENTS

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GEORGE E. WHITE FOUNDATION % SHELLY KENDRIX, REGISTERED AGENT

46-0429077

STATEMENT 1			IE 160
FORM 990-PF ,		I, LIN	IF IPB
ACCOUNTING	FEES		

			(A) EXPENSES PER BOOKS	IN	(B) NET VESTMENT INCOME	(C) ADJUSTED NET INCOME	 (D) RITABLE RPOSES
KAY WALKER CPA		TOTAL	\$ 330. \$ 330.	\$	109. 109.	\$ 0.	\$ 221. 221.

STATEMENT 2 FORM 990-PF, PART I, LINE 18 TAXES

		(A)	(B) NET	(C)	(D)
		EXPENSES	INVESTMENT	ADJUSTED	CHARITABLE
		PER BOOKS	INCOME	NET INCOME	<u>PURPOSES</u>
INCOME TAXES		\$ 29.	\$10.		<u>\$ 19.</u>
	TOTAL	\$ 29.	\$ 10.	\$ 0.	<u>\$ 19.</u>

STATEMENT 3 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FILING FEE & PUBLICATION DOFFICE EXP	FEE TOTAL	\$ 20. 12. \$ 32.	\$ 7. 4. \$ 11.	<u>\$ 0.</u>	\$ 13.

STATEMENT 4 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
APPLIED MATERIALS WAL-MART STORES INC. GLACIER BANCORP INC	COST COST COST TOTAL	\$ 4,253. 4,415. 10,743. \$ 19,411.	\$ 1,466. 5,602. 9,621. \$ 16,689.

2010

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FEDERAL STATEMENTS

PAGE 2

GEORGE E. WHITE FOUNDATION % SHELLY KENDRIX, REGISTERED AGENT

46-0429077

STATEMENT 5 FORM 990-PF, PART II, LINE 14 LAND, BUILDINGS, AND EQUIPMENT

CATEGORY		BASIS	ACCUM. DEPREC.	BOOK VALUE	FAIR MARKET VALUE
FURNITURE AND FIXTURES MACHINERY AND EQUIPMENT LAND	\$	\$ 0. 2,811. 5,000.	\$ 0. 2,326.	\$ 0. 485. 5,000.	\$ 484. 0. 5,300.
LAND	TOTAL §	\$ 7,811.	\$ 2,326.	\$ 5,485.	\$ 5,784.

STATEMENT 6 FORM 990-PF, PART VII-A, LINE 8B COPIES OF FORM 990-PF TO STATE OFFICIALS

THE STATE OF SOUTH DAKOTA DOES NOT REQUIRE THAT IT IS FILED.

STATEMENT 7 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
CROOK COUNTY MEDICAL CROOK COUNTY SUNDANCE, WY 82729	NONE	N/A	MEDICAL EQUIPMENT FOR THE COUNTY HOSPITAL.	\$ 4,200.
CLARENBACH PARK, CITY OF SUNDANCE SUNDANCE, WY 82729	NONE	N/A	PARK IMPROVEMENTS	1,000.
SUNDANCE KIDS' DAYCARE PO BOX 684 SUNDANCE, WY 82729	NONE	N/A	TO HELP THE DAY CARE WITH THEIR EXPENSES AND EQUIPMENT FOR THE CHILDREN.	2,000.
CHAPEL OF FAITH PO BOX 1022 SUNDANCE, WY 82729	NONE	N/A	YOUTH ACTIVITY THRU THE ROYAL RANCHERS.	500.
KIDS PRINTS INC PO BOX 1453 SUNDANCE, WY 82729	NONE	N/A	TO HELP THE DAY CARE WITH THEIR EXPENSES AND EQUIPMENT FOR THE CHILDREN.	2,000.
RELAY FOR LIFE AM CANCER SOCIETY SUNDANCE, WY 82729	NONE	N/A	CANCER RESEARCH	500.
			TOTAL	\$ 10,200.