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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Star Valley Hospital Foundation

Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

83-0294706

Part VI Line 11b- The foundation is a very small foundation that's sole purpose and operation is to raise funds for equipment for the local
hospital. The foundation has no employees so the hospital provides staff and help at no charge to help the foundation. The form 990 is
prepared by the hospital's CFO who is a CPA with experience in preparation of these types of returns. The form 990 is reviewed with the
governing board of the foundation and the part time foundation director who is employed by and furnished to the foundation at the expense
of the hospital. The hospital is a non-profit governmental entity monitored by the State of Wyoming and it's Department of Audit
Part VI Line 19 - The hospital holds the records and files for the foundation. All records are available for public inspection during office
hours. Foundation board meetings are open to the public and meeting times posted. Financial statements are reviewed at the meetings
The foundation and the hospital have conflict of interest policies and compliance is monitored by the hospital's compliance officer
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STAR VALLEY HOSPITAL FOUNDATION PO BOX 579
AFTON WY 83110



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DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete. I understand that this declaration will become a permanent part of that return.

Signature of officer or trustee

Date

Title