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# Form **990-PF**

#### EXTENSION GRANTED TO 8/15/11

### **Return of Private Foundation**

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

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.

2010

OMB No 1545-0052

Ford	alend	lar year 2010, or tax yea	ar beginning	- <u> </u>	, and ending		<del></del>
G C	heck	all that apply:	Initial return	Initial return of a fo		Final ret	urn
_			Amended return	Address chang	je L	Name change	
Nan	ne of t	foundation				A Employer identificat	ion number
				DOGDAM		00 01050	\1
Num	hor 20		R C.A.R.E. P		Room/suite	88-019509	<u> </u>
INDI	Dei aii	P.O. BOX		addi ess)	Hoonvalle	B Telephone number (775) 289	9-8981
Cuba	or to	wn, state, and ZIP code	131000		<del></del>	C If exemption application	
City	OI IU		89315			D 1. Foreign organizati	· · · · · · · · · · · · · · · · · · ·
H 0	heck		X Section 501(c)(3) ex	empt private foundation		Foreign organizations check here and attack	
<u> </u>	_	tion 4947(a)(1) nonexen	` ' <del>'</del> -	Other taxable private founda	tion	1	
I Fa		rket value of all assets at			Accrual	LE If private foundation under section 507(b)	status was terminated
		Part II, col. (c), line 16)	·   ——	her (specify)		1	a 60-month termination
•		1		mn (d) must be on cash b	pasis)	under section 507(b)	
Pa	rt I	Analysis of Revenue a	nd Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		necessarily equal the amounts in coli	umns (b), (c), and (d) may not nts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, gran	nts, etc., received	10,166.		N/A	
		Check X if the foundati					
	3	Interest on savings and temp cash investments	oorary	1.	1.		STATEMENT 1
	4	Dividends and interest fr	om securities				
	5a	Gross rents					
	b	Net rental income or (loss)					
ē	6a	Net gain or (loss) from sale of Gross sales price for all	f assets not on line 10			RECEI	
Revenue	l	assets on line 6a	<del></del>			+	VED
Ř	'	Capital gain net income (from			0.	100	
	l _	Net short-term capital ga	ain			15 JUN 24	2011
	9	Income modifications Gross sales less returns					<u> </u>
		and allowances Less Cost of goods sold			· · · · · · · · · · · · · · · · · · ·	OGDEN	
		Gross profit or (loss)	<u> </u>				
		Other income					
	12	Total. Add lines 1 throu	ah 11	10,167.	1.		
_	13	Compensation of officers, di	<del></del>	0.	0.		0.
	14	Other employee salaries	and wages				
	15	Pension plans, employe	e benefits				
enses	16a	Legal fees					
ben	b	Accounting fees					
ŭ	C	Other professional fees				<del></del>	
ti Ve	17	Interest					
5 LUIV and Administrative Exp	18	Taxes					
ii:	19	Depreciation and deplet	ion				
<b>L</b> vi <b>y</b> I Admi	20	Occupancy		<del></del>		<del></del>	
<b>5</b> ₹	21	Travel, conferences, and					<del></del>
	22	Printing and publication		52.	0	<del></del>	52.
	23	Other expenses	STMT 2	54.		•	54.
SCANNED JUN Operatir	24	Total operating and ad expenses. Add lines 13		52.	0		52.
ے 9	25	Contributions, gifts, gra		9,272.		•	9,272.
	23	Total expenses and dis	·	7,2,2,			
ž	20	Add lines 24 and 25	reconnelle.	9,324.	0		9,324.
Z	27	Subtract line 26 from lir	ne 12:	7,524.		<del></del>	7,524.
Ċ	1	Excess of revenue over expe		843.			
S	ì	Net investment income			1		
	1	Adjusted net income (if				N/A	

Page 2

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only			Beginning of year	End of	· · · · · · · · · · · · · · · · · · ·		
<u> </u>	arti	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash - non-interest-bearing					
•	2	Savings and temporary cash investments	17,502.	18,345.	18,345.		
- {	3	Accounts receivable ►					
		Less: allowance for doubtful accounts ▶					
	4	Pledges receivable ►					
l		Less: allowance for doubtful accounts					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
Ì		disqualified persons					
		Other notes and loans receivable					
		Less: allowance for doubtful accounts ▶		j			
ς,		Inventories for sale or use			<del></del>		
Assets	-	Prepaid expenses and deferred charges					
As		Investments - U.S. and state government obligations					
Ì		Investments - corporate stock			-		
		Investments - corporate bonds					
		Investments - land, buildings, and equipment basis					
	''	Less accumulated depreciation					
	12	Investments - mortgage loans			<del></del>		
	l	Investments - other					
	_	Land, buildings, and equipment: basis					
	'*	Less accumulated depreciation					
	15	Other assets (describe	<del></del>				
	15	Other assets (describe			·		
	4.0	Tatal assets (to be completed by all filers)	17,502.	18,345.	18,345.		
_		Total assets (to be completed by all filers)	11,302.	10,343.	10,343.		
	l	Accounts payable and accrued expenses Grants payable					
	18	Deferred revenue	<u> </u>	<del></del>			
Liabilities	1	1	1,000.	1,000.			
iii	20	Loans from officers, directors, trustees, and other disqualified persons	1,000.	1,000.			
Lia	21	Mortgages and other notes payable					
-	22	Other liabilities (describe )					
		Total liabilities (add lease 17 through 20)	1,000.	1,000.			
	23	Total liabilities (add lines 17 through 22)	1,000.				
		Foundations that follow SFAS 117, check here					
es		and complete lines 24 through 26 and lines 30 and 31.					
	1	Unrestricted					
aja	25	Temporarily restricted					
or Fund Balanc	26	Permanently restricted  Foundations that do not follow SFAS 117, check here					
Ë	ļ	·					
o I		and complete lines 27 through 31.	16 500	17 245			
	27	Capital stock, trust principal, or current funds	16,502.	17,345.			
Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.			
ř.	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.			
Net	30	Total net assets or fund balances	16,502.	17,345.			
	١		17 500	10 245			
-	31		17,502.	18,345.			
P	art	Analysis of Changes in Net Assets or Fund B	alances				
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30				
	(mu	st agree with end-of-year figure reported on prior year's return)		1	16,502.		
2	Ente	r amount from Part I, line 27a		2	843.		
3	Othe	er increases not included in line 2 (itemize)		3	0.		
4	Add	lines 1, 2, and 3		4	17,345.		
5	Deci	reases not included in line 2 (itemize)		5	0.		
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	17,345.		

		erty sold (e.g., real estate, tock, 200 shs. MLC Co.)		( <b>b)</b> Ho P - D -	ow acquired Purchase Donation		acquired Jay, yr.)	(d) Date sold (mo., day, yr.)
1a <u>'</u>								
b NO	NE							······································
C								
<u>d</u>			<u></u>			<u></u>		
<u>e</u>				Ц_				
(e) Gross sales price	(f) Depreciation a (or allowable		st or other basis expense of sale				iain or (loss) s (f) minus (	
<u>a</u>								
b				_				
<u>C</u>				_				
<u>d</u>								
Complete only for exacts shown	a saus us salums (b) es	nd award by the foundation	on 10/01/00	-				
Complete only for assets shown	, <u>, , , , , , , , , , , , , , , , , , </u>	<del>-                                    </del>		_			Col. (h) gaın not less thar	
(i) F.M.V. as of 12/31/69	(j) Adjusted be as of 12/31/6		cess of col. (1) col. (j), if any			Losses	(from col. (	h))
a								
<u>b</u>			<u> </u>					
<u>C</u>					-			
d								
e	<u> </u>			_				
2 Capital gain net income or (net ca	$ \begin{array}{c} \text{If ga}\\ \text{apital loss}) \end{array} $	ain, also enter in Part I, line oss), enter -0- in Part I, line	7 7	}	2			
3 Net short-term capital gain or (lo	ss) as defined in section	ns 1222(5) and (6):						
If gain, also enter in Part I, line 8,				J				
If (loss), enter -0- in Part I, line 8  Part V Qualification U		940(e) for Reduced			3			
Nas the foundation liable for the sec f "Yes," the foundation does not qua	lify under section 4940	(e). Do not complete this pa	art.					Yes X No
1 Enter the appropriate amount in	each column for each y	ear; see instructions before	making any entrie	es.				
(a) Base period years Calendar year (or tax year beginn	ing in) Adjusted	(b) qualifying distributions	Net value of no	( <b>c)</b> nchari	table-use asse	ts	Distrib (col. (b) div	(d) pution ratio rided by col. (c))
2009		12,716.			15,18	1.		.837626
2008		10,243.			17,08	7.		.599462
2007		5,353.			16,91			.316483
2006		2,172.			12,95			.167631
2005		5,604.			8,09	2.	r	.692536
2 Total of line 1, column (d)						2		2.613738
3 Average distribution ratio for the	5-year base period - div	vide the total on line 2 by 5.	or by the number	of yea	ırs			
the foundation has been in existe			•	•		3	<del> </del>	.522748
4 Enter the net value of noncharita	ble-use assets for 2010	from Part X, line 5				4		12,886
5 Multiply line 4 by line 3						5		6,736
6 Enter 1% of net investment inco	me (1% of Part I, line 27	'b)				_6_		0
7 Add lines 5 and 6						7		6,736
8 Enter qualifying distributions from	m Part XII, line 4					8_		9,324
If line 8 is equal to or greater tha See the Part VI instructions.	n line 7, check the box i	n Part VI, line 1b, and comp	plete that part usin	ng a 1%	6 tax rate.			

	t VI Evoire Tax Pered on Investment Income (Section 404)	1/61	40	10/h) 4040/s)			0132			age 4
	rt VI Excise Tax Based on Investment Income (Section 4940	<del></del>			or 4	<del>,48</del>	· see II	istru	cuon	is)
1a	Exempt operating foundations described in section 4940(d)(2), check here   and en									
	Date of ruling or determination letter: (attach copy of letter if nec									
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	LXJ	and	l enter 1%	- [	_1_			_	0.
	of Part I, line 27b									
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Par	t I, I	ine 12, col. (b). ノ	- 1					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Of	hers er	nter	-0-)	ļ	2	<b> </b>			0.
3	Add lines 1 and 2					3_			_	<u>0.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. O	thers e	nter	-0-)		4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-					5				<u>0.</u>
6	Credits/Payments:				İ					
а	2010 estimated tax payments and 2009 overpayment credited to 2010	6a	1_							
b	Exempt foreign organizations - tax withheld at source	_6b_								
C	Tax paid with application for extension of time to file (Form 8868)	6c								
đ	Backup withholding erroneously withheld	6d								
7	Total credits and payments. Add lines 6a through 6d			<del></del> :		7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ched			- [	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				▶	9				0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				<b>•</b>	10				
	Enter the amount of line 10 to be: Credited to 2011 estimated tax			Refunded	<b>•</b>	11				
	rt VII-A Statements Regarding Activities						-			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legis	lation	or d	d it participate or inte	vene	ın			Yes	No
	any political campaign?							1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	ses (se	e in	structions for definition	n)?			1b		X
_	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	•			•	d or				
	distributed by the foundation in connection with the activities.	,-								
c	Did the foundation file Form 1120-POL for this year?							1c		Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	vear.								
•	(1) On the foundation. > \$ 0. (2) On foundation managers	-	S.		0.					
۵	Enter the reimbursement (if any) paid by the foundation during the year for political expend		_							
٠	managers. > \$ 0.	itai o ta		pood on roundation						
2	Has the foundation engaged in any activities that have not previously been reported to the l	RS?						2		x
-	If "Yes," attach a detailed description of the activities							<u> </u>	_	
2	Has the foundation made any changes, not previously reported to the IRS, in its governing	instrun	nent	articles of incorpora	יוטט נ	ır				
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change			, articles of incorpora		"		3		x
40	Did the foundation have unrelated business gross income of \$1,000 or more during the year							4a	_	X
	If "Yes," has it filed a tax return on Form 990-T for this year?	1) .				1	I/A	4b	-	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year'	•				1	1/12	5	_	x
0	If "Yes," attach the statement required by General Instruction T	•						<del>"</del>	_	
^	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	ıtharı								
0	• • • • • • • • • • • • • • • • • • • •	illiet.								
	By language in the governing instrument, or  Purchase legislation that effectively emends the governing instrument on that he mendate									
	By state legislation that effectively amends the governing instrument so that no mandato	ry airec	Juoi	s that conflict with the	State	aw			<b>.</b>	
_	remain in the governing instrument?							6	X	_
7	Did the foundation have at least \$5,000 in assets at any time during the year?							7	X	_
_	If "Yes," complete Part II, col (c), and Part XV.	, .								
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ons) 🕨	_							
	<u>NV,UT</u>									
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attorne	y Ge	neral (or designate)						
	of each state as required by General Instruction G? If "No," attach explanation							8b	_X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of se				or cale	ndar				_
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes,"							9	<u> </u>	<u> </u>
10	Did any persons become substantial contributors during the tax year? it "Yes," attach a sched	ule listin	na th	er names and addresses				10	)	X

Don't VII D State wants De garding Activities for Which	KAM		<u>88-0132</u>	OAT	Page 6
Part VII-B   Statements Regarding Activities for Which	Form 4/20 May Be F	requirea (continu	ued)	<del>-</del>	
5a During the year did the foundation pay or incur any amount to:				=	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s 🗶 No		
(2) Influence the outcome of any specific public election (see section 4955); (	or to carry on, directly or indire				
<ul> <li>any voter registration drive?</li> </ul>			s 🔀 No 🥈	. 1	
(3) Provide a grant to an individual for travel, study, or other similar purposes	37	└── Ye	s 🗶 No		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f				
the prevention of cruelty to children or animals?		☐ Ye	s 🗶 No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described i	n Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instri	uctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check l	here				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption to	from the tax because it mainta	ined			
expenditure responsibility for the grant?	N	[ / A	s 🔲 No		
If "Yes," attach the statement required by Regulations section 53 494	!5-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to					
a personal benefit contract?		☐ Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6ь	Х
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?	Ye	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attrib			N/A	7b	
Part VIII Information About Officers, Directors, Trust		nagers, Highly			
Part VIII Paid Employees, and Contractors					
List all officers, directors, trustees, foundation managers and their	compensation.	· · · · · · · · · · · · · · · · · · ·			
( ) Nove and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid.	(d) Contributions to employee benefit plan and deferred	ns a	(e) Expense count, other
(a) Name and address	to position	enter -0-)	and deferred compensation		allowances
KEVIN ROBISON	PRESIDENT				
P.O. BOX 151000	_				
ELY, NV 89315	4.00	0.	0		0.
DESIREE ROBISON	SECRETARY			i	_
P.O. BOX 151000					
ELY, NV 89315	4.00	0.	0		0.
WILMA SANFORD	TREASURER				
P.O. BOX 151000	]				
ELY, NV 89315	4.00	0.	lo		0.
BUNNY HILL	DIRECTOR				
P.O. BOX 151000	1		İ		
ELY, NV 89315	4.00	0.	l o	١. ١	0.
2 Compensation of five highest-paid employees (other than those in	cluded on line 1). 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 ( employee benefit pla and deferred compensation	ns a	(e) Expense ccount, other allowances
NONE	dovotod to position	<del> </del>	our pursuation		4.10.114.114.114
	7	-			
		1			
	7				
	7				
	<u></u>		<u></u>		
Total number of other employees paid over \$50,000			<b></b>		0

MT WHEELER C.A.R.E. PROGRAM		95091 Page /
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	
, (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 number of organizations and other beneficiaries served, conferences convened, research papers produce		Expenses
1		
SEE STATEMENT 3		9,272.
2		
3		
4		
Part IX-B Summary of Program-Related Investments	<del> </del>	
Describe the two largest program-related investments made by the foundation during the tax year on line	s 1 and 2.	Amount
1 <u>N/A</u>		
	<del></del>	
2		
All other program-related investments. See instructions.		
3		

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Total. Add lines 1 through 3

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P	art X Minimum Investment Return (All domestic foundations must	complete this part. Foreign foun	dations, see	instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.	c., purposes:		
٠a	Average monthly fair market value of securities	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1a	0.
	Average of monthly cash balances		1b	13,082.
	Fair market value of all other assets		10	
d	Total (add lines 1a, b, and c)		1d	13,082.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation) 1e	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	13,082.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see	instructions)	4	<u> 196.</u>
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Par	t V, line 4	5	12,886.
6_	Minimum investment return. Enter 5% of line 5		6	644.
P	art XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i) foreign organizations check here and do not complete this part.)	(5) private operating foundations an	d certain	
1	Minimum investment return from Part X, line 6		1	644.
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.)			
C	Add lines 2a and 2b		2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	644.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	644.
6	Deduction from distributable amount (see instructions)		6	0.
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	line_1	7	644.
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpose	s:		
а	,		_1a	9,324.
b	· · · · · · · · · · · · · · · · · · ·		1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, e	etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:			
a	, , ,		_3a	<del></del>
b	( )		3b	<del></del>
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and P	•	4	9,324.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	ent		
	income. Enter 1% of Part I, line 27b		5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4		6	9,324.

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

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
Distributable amount for 2010 from Part XI, line 7				644.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years:				
·		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005 5,199.				
b From 2006 1,524.				
c From 2007 4,507.				
d From 2008 9,389. e From 2009 11,957.				
	22 576			
f Total of lines 3a through e	32,576.			
4 Qualifying distributions for 2010 from Part XII, line 4: ► \$ 9,324.				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior		<del></del>		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			<del>-</del>	
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount	- 0.			644.
e Remaining amount distributed out of corpus	8,680.			044.
5 Excess distributions carryover applied to 2010	0.	<del></del>	···	0.
(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	41,256.			
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		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				0 <u>.</u>
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	5,199.			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	36,057.			
10 Analysis of line 9:	ļ			
a Excess from 2006 1,524.				
<b>b</b> Excess from 2007 <b>4</b> , <b>507</b> .				
c Excess from 2008 9,389.				
d Excess from 2009 11,957.				
e Excess from 2010 8,680.			L	

	LER C.A.R.E			88-	0195091 Page 10
Part XIV Private Operating Fo	oundations (see in	structions and Part V	II-A, question 9)	<u>N/A</u>	
1 a If the foundation has received a ruling or	r determination letter tha	t it is a private operating			
foundation, and the ruling is effective for	2010, enter the date of	the ruling	<b>▶</b>		
. b Check box to indicate whether the found	ation is a private operatii	ng foundation described	in section	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2010	<b>(b)</b> 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed		<u> </u>	<u> </u>		
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not		1			
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly		ļ			
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			
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed					
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			1		
an exempt organization					
(4) Gross investment income	<u> </u>				
Part XV Supplementary Info			, if the foundation	on had \$5,000 or	more in assets
at any time during t	the year-see the	instructions.)		<u></u>	
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh			ntributions received by t	the foundation before th	e close of any tax
year (but only if they have contributed r	nore than \$5,000). (See	section 507(d)(2).)			
NONE					
<b>b</b> List any managers of the foundation wh			n (or an equally large po	rtion of the ownership o	of a partnership or
other entity) of which the foundation ha	is a 10% or greater inter	est.			
NONE			<del></del> _		
2 Information Regarding Contribut	tion, Grant, Gift, Loar	n, Scholarship, etc., l	Programs:		
Check here 🕨 📖 If the foundation of					
the foundation makes gifts, grants, etc.	(see instructions) to ind	ividuals or organizations	under other conditions	, complete items 2a, b, i	c, and d.
a The name, address, and telephone num	nber of the person to who	om applications should l	oe addressed:		
SEE STATEMENT 4	- · · · · · · · · · · · · · · · · · · ·				
<b>b</b> The form in which applications should	be submitted and inform	ation and materials they	should include:		
c Any submission deadlines:	<del> </del>				
d Any restrictions or limitations on success	le euch as hy goograph:	ngl grage, charitable field	le kinde of institutions	or other feetore:	
d Any restrictions or limitations on award	is, such as by geographi	vai ai cas, Chantable 11610	is, kinus oi institutions,	or other factors.	

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y		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 business)	or substantial contributor	recipient	Contribution	
a Paid duning the year CHRIS KAAMASEE #18 JV WALKER ST ELY, NV 89301	NONE	N/A	ENERGY ASSISTANCE	540.
LYLE'S PROPANE P.O. BOX 150426 ELY, NV 89315	NONE	N/A	ENERGY ASSISTANCE	552.
MT. WHEELER POWER, INC. P.O. BOX 151000 ELY, NV 89315	NONE	N/A	ENERGY ASSISTANCE	7,213.
SUBURBAN PROPANE 1700 E AULTMAN STREET ELY, NV 89301	NONE	N/A	ENERGY ASSISTANCE	967.
Tabal	<u> </u>		<u> </u>	9 272
Total b Approved for future payment		1	<b>▶</b> 3a	9,272
,,				
NONE				
Total			<b>▶</b> 3b	0

Part XVI-A	Analysis of	Income-	Producing	Act

Unrelated b	usiness income	Excluded I	oy section 512, 513, or 514	(e)
(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
	<del></del>	<del>                                     </del>		<del></del>
	<del></del>	1 1		
		1 1		
l i				
		14	1.	
			_	
			_	
_				
				_
	0		1.	
			13	
5.)				
s to the Accon	nplishment of E	Exempt F	Purposes	
		-A contribute	d importantly to the accom	plishment of
				<u></u>
				<u> </u>
			<del>_</del>	_ <del>_</del>
<del></del>			. <u>.</u>	
				<del>_</del>
	s.) es to the Accon	Business Amount  Output  Business Amount  Output  Output  S.)  Ses to the Accomplishment of I	S.)  Sto the Accomplishment of Exempt Funcome is reported in column (e) of Part XVI-A contribute	Amount Sicole Amount Amount    14

Form 990-PF (2010) MT WHEELER C.A.R.E. PROGRAM 88-0195091 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No 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? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) X X (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 16(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c 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. (c) Name of noncharitable exempt organization (a) Line no (b) Amount involved (d) Description of transfers, transactions, and sharing arrangements **A1** 7,753.MT WHEELER POWER, SEE STATEMENT 5 311.MT WHEELER POWER, INC. 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described

ın sect	ion 501(c) of the Code (other than section	501(c)(3)) or in section 527?	X Yes No		
b If Yes	," complete the following schedule.				
	(a) Name of organization	(b) Type of organization	(c) Description of relationship		
MT WH	EELER POWER, INC.	501(C)(12)	SEE STATEMENT 6		
		mined this return, including accompanying schedules and expayer or fiduciary) is based on all information of which			
	Signature of Officer or trustee	Date	Title		
Paid	Print/Type preparer's name  MATT R. WILLIS	Preparer's signature	Date Check of PTIN self- employed 06/09/11		
Prepare Use On		SEGARS, GILBERT AND	MOSS LLP Firm's EIN ▶		
	Firm's address ▶ 8215 NAS	HVILLE AVENUE			

LUBBOCK, TX 79423

Form **990-PF** (2010)

<u>(806)747-3806</u>

Phone no.

FORM 990-PF INTEREST ON SAVI	NGS AND TEM	PORARY CASH IN	IVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
MONEY MARKET BANK ACCOUNT			·		1.
TOTAL TO FORM 990-PF, PART I,		1.			
FORM 990-PF OTHER EXPENSES STA				STATEMENT	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		CHARITA	
STATE OF NEVADA FILING FEE BANK FEES	25. 27.				25. 27.
TO FORM 990-PF, PG 1, LN 23	52.	0.			52.

#### ACTIVITY ONE

PROVIDE ENERGY PAYMENT ASSISTANCE TO NEEDY INDIVIDUALS THROUGH SOLICITED CONTRIBUTIONS FROM MT WHEELER POWERS' BILLING STATMENTS, NEWSLETTERS AS WELL AS UNCLAIMED CAPITAL CREDITS. DURING 2010 53 FAMILIES RECEIVED ASSISTANCE WITH THEIR ENERGY BILLS.

	EXPENSES
TO FORM 990-PF, PART IX-A, LINE 1	9,272.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

WHITE PINE COUNTY SOCIAL SERVICES 995 CAMPTON ELY, NV 89301

TELEPHONE NUMBER

(775) 289-3271

FORM AND CONTENT OF APPLICATIONS

APPLICATION FORM IS AVAILABLE AT THE WELFARE OFFICE. THE WELFARE OFFICE USES ITS CRITERIA FOR ASSESSING ASSISTANCE NEEDS AND THEN CONTACTS THE MT WHEELER C.A.R.E. PROGRAM.

ANY SUBMISSION DEADLINES

NONE

RESTRICTIONS AND LIMITATIONS ON AWARDS

\$400 MAXIMUM PER NEEDY ENTITY OR FAMILY UNIT WITHIN A TWO YEAR PERIOD.

INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS STATEMENT 5 990-PF PART XVII, LINE 1, COLUMN (D)

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

MT WHEELER POWER, INC.

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

PAYMENT TO UTILITY COOPERATIVE ON BEHALF OF NEEDY INDIVIDUALS. THE FOUNDATION WAS ESTABLISHED TO PROVIDE ASSISTANCE WITH ENERGY BILLS OF NEEDY FAMILIES.

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

MT WHEELER POWER, INC.

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

COOP. STAFF MAINTAINS RECORDS FOR THE PROGRAM AT NO COST TO THE PROGRAM.

990-PF AFFILIATION WITH TAX-EXEMPT ORGANIZATIONS STATEMENT 6 PART XVII, LINE 2, COLUMN (C)

NAME OF AFFILIATED OR RELATED ORGANIZATION

MT WHEELER POWER, INC.

DESCRIPTION OF RELATIONSHIP WITH AFFILIATED OR RELATED ORGANIZATION DIRECTORS OF C.A.R.E. ARE ALSO EMPLOYEES OR DIRECTORS OF THE COOPERATIVE. MT. WHEELER C A R E PROGRAM EIN # 88-0195091 2010 FORM 990-PF SCHOLARSHIP APPLICATION PAGE 10, PART XV, LINE 2 B, C, & D

# C.A.R.E. PROGRAM APPLICATION

LAST NAM	E	FIRST	MIDDLE		
ADDRESS		CITY	STATE		
SOCIAL SE	CURITY NUMBER	PHONE NUMBER	DATE OF BIRTH		
TOTAL PER	RSONS IN HOUSEHO	DLD (INCLUDE ROOMMA	TES, ETC.)		
NAME	AGE	NAME	AGE		
NAME	AGE	NAME	AGE		
Handicappe 60 or older	JSEHOLD MEMBER:	NAME	AGE		
PRIMARY H		Amount \$			
SECONDARY	HEAT SOURCE.	Amount Owed	d \$		
Account #		Amount Owed	Amount Owed \$		
AMOUNT F	RECEIVED FROM		ce, (LIHEA) State/Federal		
INCLUDES		SUPPORT, UNEMPLOY	OUSEHOLD INCOME. THIS MENT BENEFITS, SOCIAL		
usage and ve	erify that an attempt h		ative may survey my energy autility payments current and eupcoming utility bills.		
SIGNATURE			DATE		

02/15/5011 03:50 1125835402

Form **8868**(Rev January 2011)
Department of the Treasury

Internal Revenue Service

## Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev 1-2011)

ightharpoonsIf you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs gov/efile and click on e-file for Chanties & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Name of exempt organization **Employer identification number** print 88-0195091 MT WHEELER C.A.R.E. PROGRAM File by the Number, street, and room or suite no. If a P.O. box, see instructions. due date fo filing your P.O. BOX 151000 return See City, town or post office, state, and ZIP code. For a foreign address, see instructions instructions ELY, NV 89315 0 4 Enter the Return code for the return that this application is for (file a separate application for each return) Return Return **Application Application** Is For Code Is For Code Form 990 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 80 Form 990-EZ Form 4720 03 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 12 Form 8870 SHELLIE WATTS The books are in the care of ► 1600 GREAT BASIN BLVD. - ELY, NV 89301 Telephone No ▶ (775) 289-8981 FAX No. If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) \_\_\_\_\_\_\_. If this is for the whole group, check this box If it is for part of the group, check this box Image and attach a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until AUGUST 15, 2011 , to file the exempt organization return for the organization named above. The extension is for the organization's return for. ► X calendar year 2010 or 」tax year beginning , and ending Final return Initial return If the tax year entered in line 1 is for less than 12 months, check reason. Change in accounting period If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. 3a If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and 0. estimated tax payments made. Include any prior year overpayment allowed as a credit 3b Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions

LHA

For Paperwork Reduction Act Notice, see Instructions.