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# Form '990-PF

Department of the Treasury

# **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

OMB No 1545-0052

|                          |         | chae da vice   |                  |                | be able to use a copy of this             |                                       | rting requirements.                                     |                           |
|--------------------------|---------|--|------------------|----------------|---|---------------------------------------|---|---------------------------|
| Ford                     | alen    | dar year 2010, or tax yea  | r beginning      |                | · · · · · · · · · · · · · · · · · · ·     | , and ending                          |   | <del>,</del>              |
| G C                      | heck    | all that apply"  | Initial retur    |                |   | rmer public charity                   | Final return  |                           |
|                          |         |  | Amended r        | eturn          | Address chan                              | ge                                    | Name change   |                           |
| Nan                      | ne of   | foundation   |                  |                |   |                                       | A Employer identification                               | number                    |
| 1                        |         |  |                  |                |   |                                       |   |                           |
|                          |         | THE WHC FO   |                  |                |   |                                       | 88-0429920  | <del></del>               |
| Nurr                     | ber ar  | id street (or P.O. box number if   |                  |                |   | Room/suite                            | B Telephone number                                      |                           |
|                          |         | 10391 DOUE   | BLE R            | BOULEV         | ARD                                       |                                       | 775-849-15  | 75                        |
| City                     | or to   | wn, state, and ZIP code  |                  |                |   |                                       | C If exemption application is po                        |                           |
| L                        |         | RENO, NV   | 89521            |                |   |                                       | D 1. Foreign organizations                              | , check here              |
| H C                      | -       | ,, ,   |                  |                | empt private foundation                   |                                       | 2 Foreign organizations me<br>check here and attach con | nputation                 |
| <u> </u>                 |         | ction 4947(a)(1) nonexem   |                  |                | Other taxable private founda              |                                       | E If private foundation stat                            |                           |
|                          |         | rket value of all assets at e  | end of year      | J Accounti     | <del>-</del>                              | Accrual                               | under section 507(b)(1)                                 | (A), check here           |
| •                        |         | Part II, col (c), line 16)   |                  | Ot Look        | her (specify)<br>mn (d) must be on cash l | hages I                               | F If the foundation is in a 6                           |                           |
| <b>D</b>                 |         |  |                  |                | i   |                                       | under section 507(b)(1)                                 | (d) Disbursements         |
| ГЬа                      | rt I    | The total of amounts in colur  | mns (b), (c), ar | nd (d) may not | (a) Revenue and expenses per books        | (b) Net investment income             | (c) Adjusted net  | for charitable purposes   |
|                          |         | necessarily equal the amount   |                  |                | 23,329.                                   |                                       | N/A   | (cash basis only)         |
|                          |         | Contributions, gifts, grant  |                  |                | 43,349.                                   |                                       | N/A   |                           |
|                          | _       | Check I if the foundation interest on savings and temporary  |                  | O AUDEN SEN B  | 155.                                      | 155.                                  |   | STATEMENT 1               |
|                          | 3       | cash investments   |                  | •              | 910.                                      | 910.                                  | <del> </del>  | STATEMENT 2               |
|                          | 4       | Dividends and interest fro   | mi securine:     | S              | 910.                                      | 310.                                  |   | SIAIEMENI Z               |
|                          |         | Gross rents  |                  |                |   |                                       |   |                           |
|                          | _       | Net rental income or (loss)  |                  |                | 8,297.                                    |                                       |   |                           |
| e e                      | Da<br>F | Net gain or (loss) from sale of a<br>Gross sales price for all   |                  | line 10        | 0,257.                                    |                                       |   |                           |
| ₹ P                      | 7       | assets on line 6a  Capital gain net income (from   |                  |                |   | 8,297.                                |   |                           |
| AVIN CENTRACES  Revenue  |         | Net short-term capital gar   |                  |                |   | 0,257                                 |   |                           |
| Z                        |         | Income modifications   | "                |                |   |                                       |   |                           |
| T                        | _       | Gross sales less returns and allowances  |                  |                |   |                                       |   |                           |
|                          |         | Less Cost of goods sold  |                  |                |   |                                       |   |                           |
| $\leq$                   |         | Gross profit or (loss)   |                  |                |   |                                       |   |                           |
| 2                        |         | Other income   |                  |                |   |                                       | -   |                           |
| ميب                      | 12      | Total Add lines 1 throug   | h 11             |                | 32,691.                                   | 9,362.                                |   |                           |
| E                        | 13      | Compensation of officers dire  |                  | s etc          | 0.  | 0.                                    |   | 0.                        |
| 2011                     | 14      | Other employee salaries a  |                  |                |   |                                       |   |                           |
|                          |         | Pension plans, employee  | •                |                |   |                                       |   |                           |
| ses                      | 1       | Legal fees   |                  |                |   |                                       |   |                           |
| ens                      | 6       | Accounting fees  | SI               | <b>TMT</b> 3   | 720.                                      | 720.                                  |   | 0.                        |
| Expens                   | С       | Other professional fees  | ST               | MT 4           | 195.                                      | 195.                                  |   | 0.                        |
| φ                        |         | Interest   | 1                |                |   |                                       |   |                           |
| rat                      | R       | <b>ENEIVED</b>   | เรา              | MT 5           | 42.                                       | 42.                                   |   | 0.                        |
| 3084<br>Ind Administrati | 19      | Depreciation and depleto   | þ                |                |   | · · · · · · · · · · · · · · · · · · · |   |                           |
| ᅔᇀ                       | 20,     | Occupancy 2011   |                  |                |   |                                       |   |                           |
| ãĕ.                      | 2 M     | Traver, conferences, and   | rheetings        |                |   |                                       |   |                           |
| ``₽                      | 22      | Printing and publications  |                  |                |   |                                       |   |                           |
| ıng                      |         | Office for the first of the fir | J si             | CMT 6          | 25.                                       | 25.                                   |   | 0.                        |
| <del>اية</del>           | _       | Total operating and adm  |                  |                |   |                                       |   | _                         |
| Operat                   |         | expenses Add lines 13 t  |                  |                | 982.                                      | 982.                                  |   | 0.                        |
| J                        | 23      | Contributions, gifts, gran   |                  |                | 12,584.                                   | <del></del>                           |   | 12,584.                   |
|                          | 26      | Total expenses and disb  | ursements        |                |   |                                       |   | 40 501                    |
|                          |         | Add lines 24 and 25  |                  |                | 13,566.                                   | 982                                   |   | 12,584.                   |
|                          | 27      | Subtract line 26 from line   | 12               |                | 10.10-                                    |                                       |   |                           |
|                          | ı       | Excess of revenue over expen   |                  |                | 19,125.                                   | 0.300                                 | <u> </u>  |                           |
|                          | Į.      | Net investment income (  |                  |                |   | 8,380.                                |   |                           |
| 0235                     |         | Adjusted net income (if n  | _                |                | 46  | L                                     | N/A   | Form <b>990-PF</b> (2010) |
| 0235<br>12-0             | 7-10    | LHA For Paperwork R  | reauction A      | CL NOTICE, SEE | the instructions                          |                                       |   | rum <b>330-F</b> F (2010) |

| 01111            | 990-PF, (2010) THE WHC FOUNDATION   | Beginning of year | End of         | 0429920 Page          |
|------------------|---|-------------------|----------------|-----------------------|
| Pa               | Halance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only                  | (a) Book Value    | (b) Book Value | (c) Fair Market Value |
| $\neg \tau$      | 1 Cash - non-interest-bearing   | 7,657.            | (B) Book Value | (b) tan Market Value  |
|                  | 2 Savings and temporary cash investments  | 7,037.            |                |                       |
|                  | 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   |                   |                |                       |
|                  | disqualified persons  |                   |                |                       |
|                  | 7 Other notes and loans receivable  |                   |                |                       |
|                  | Less: allowance for doubtful accounts   |                   |                |                       |
| 2                | 8 Inventories for sale or use   |                   |                |                       |
| ssets            | 9 Prepaid expenses and deferred charges   |                   |                | <del> </del>          |
| ₹   1            | Oa Investments - U.S. and state government obligations  |                   |                |                       |
|                  | b Investments - corporate stock STMT 8  | 330,927.          | 358,594.       | 360,921               |
|                  | c Investments - corporate bonds   |                   |                |                       |
| 1                | 1 Investments land buildings and equipment basis  |                   |                |                       |
|                  | Less accumulated depreciation   |                   |                | <del></del>           |
| 1                | 2 Investments - mortgage loans  |                   |                |                       |
| 1                | 3 Investments - other   |                   |                | ·                     |
| 1                | 4 Land, buildings, and equipment basis  |                   |                |                       |
|                  | Less accumulated depreciation   |                   |                | ···                   |
| 1                | 5 Other assets (describe ►)   |                   |                |                       |
| 1.               | 6 Total assets (to be completed by all filers)  | 338,584.          | 358,594.       | 360,921               |
|                  | 7 Accounts payable and accrued expenses   | 330,30 1          | 330,331.       | 3007322               |
|                  | 8 Grants payable  |                   |                |                       |
| - 1.             | 9 Deferred revenue  |                   |                |                       |
| <u>თ</u>         | Loans from officers, directors, trustees and other disqualified persons   |                   |                |                       |
| <b>=</b>         | 1 Mortgages and other notes payable   |                   |                |                       |
| ≃                | 2 Other liabilities (describe ►   |                   |                |                       |
|                  |   |                   |                |                       |
| 2                | 3 Total liabilities (add lines 17 through 22)   | 0.                | 0.             |                       |
| 1                | Foundations that follow SFAS 117, check here  |                   |                |                       |
| ,,               | and complete lines 24 through 26 and lines 30 and 31  |                   |                |                       |
| ğ  2             | 4 Unrestricted  |                   |                |                       |
|                  | 5 Temporarily restricted  |                   |                |                       |
| ž 2              | 6 Permanently restricted  |                   |                |                       |
| <u> </u>         | Foundations that do not follow SFAS 117, check here   |                   |                |                       |
| or Fund Balances | and complete lines 27 through 31  | 0.                | 0.             |                       |
| န္ <u>မ</u> ၂ဒို | 7 Capital stock, trust principal, or current funds  | 0.                | 0.             |                       |
| 188              | Paid-in or capital surplus, or land, bldg, and equipment fund  Retained earnings, accumulated income, endowment, or other funds | 338,584.          | 358,594.       |                       |
| ₩                |   | 338,584.          | 358,594.       |                       |
| Z                | O Total net assets or fund balances   | 330,304.          | 330,334.       |                       |
| Ι,               | 11 Total liabilities and net assets/fund halances   | 338.584.          | 358.594.       |                       |

# Part III Analysis of Changes in Net Assets or Fund Balances

| 1 | Total net assets or fund balances at beginning of year - Part II, column (a), line 30                 |    |             |   |         |
|---|---|----|-------------|---|---------|
| • | (must agree with end-of-year figure reported on prior year's return)                                  |    |             | 1 | 338,584 |
| 2 | Enter amount from Part I, line 27a  |    |             | 2 | 19,125. |
| 3 | Other increases not included in line 2 (itemize)  | EE | STATEMENT 7 | 3 | 885     |
| 4 | Add lines 1, 2, and 3   |    |             | 4 | 358,594 |
| 5 | Decreases not included in line 2 (itemize)  |    |             | 5 | 0       |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 |    |             | 6 | 358,594 |

|   | WHC FOUNDATION and Losses for Tax on Ir  | vestmen                                | Income                               |              |  |             | 88-042  | 29920 Page                       |  |
|---|--|--|--------------------------------------|--------------|--|-------------|---|----------------------------------|--|
| (a) List and describe the kind(s) of property sold (e.g., real estate,  |  |  |                                      |              | łow acquired<br>- Purchase<br>- Donation | 1 (0        | c) Date acquired<br>(mo , day, yr )   | (d) Date sold<br>(mo., day, yr.) |  |
| 1a CROSS CREEK CA   |  |  |                                      | Ť            | P  |             |   | -                                |  |
| b CROSS CREEK CA  |  |  |                                      |              | P  |             |   |                                  |  |
| c CHARLES SCHWAB  |  |  |                                      |              | P  |             |   |                                  |  |
| d CHARLES SCHWAB  |  |  |                                      |              | P  |             |   |                                  |  |
| e CAPITAL GAINS   | DIVIDENDS  |  |                                      |              |  |             | · <del></del> · ·   |                                  |  |
| (e) Gross sales price   | (f) Depreciation allowed (or allowable)  |  | st or other basis<br>expense of sale |              |  |             | (h) Gain or (los<br>(e) plus (f) minus  |                                  |  |
| a   |  |  | 16                                   | 5.           |  |             |   | <165                             |  |
| b 3,302.  |  |  |                                      |              |  |             |   | 3,302                            |  |
| c 11,907.   |  |  | 12,44                                |              |  |             |   | <534                             |  |
| d 14,727.   |  |  | 13,19                                | 5.           |  |             |   | 1,532                            |  |
| e 4,162.  |  | L                                      |                                      |              |  |             |   | 4,162                            |  |
|   | g gain in column (h) and owned by<br>(j) Adjusted basis                              | (k) Ex                                 | cess of col. (1)                     |              |  | col (F      | (1) Gains (Col. (h) gain minus<br>of (k), but not less than -0-) or<br>Losses (from col. (h)) |                                  |  |
| (i) F.M V as of 12/31/69  | as of 12/31/69   | over                                   | col (j), if any                      |              |  |             |   | ···//                            |  |
| a   |  |  | <u> </u>                             |              |  |             |   | <165                             |  |
| b   |  |  |                                      |              |  |             |   | 3,302                            |  |
| С   |  |  |                                      |              |  |             |   | < 534                            |  |
| d   |  |  |                                      |              |  |             |   | 1,532                            |  |
| e   | · · · · · · · · · · · · · · · · · · ·  | L                                      |                                      |              |  |             |   | 4,162                            |  |
| 2 Capital gain net income or (net ca  | pital loss) $ \begin{cases} If gain, also enter \\ If (loss), enter -0 \end{cases} $ | r in Part I, line<br>- in Part I, line | 7<br>7                               | }            | 2  | . <u> </u>  |   | 8,297                            |  |
| 3 Net short-term capital gain or (los if gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8 |  | nd (6)                                 |                                      | }            | 3  |             | N/A   | 2                                |  |
| Part V Qualification U  | nder Section 4940(e) for   | Reduced                                | Tax on Net                           | Inve         | estment                                  | Inco        |   | 1                                |  |
| (For optional use by domestic private   | <del></del>  | <del></del>                            |                                      |              |  |             |   | <del></del>                      |  |
| If section 4940(d)(2) applies, leave it   | nis part blank   |  |                                      |              |  |             |   |                                  |  |
| Was the foundation liable for the sect  |  |  |                                      | rod?         |  |             |   | Yes X No                         |  |
| If "Yes," the foundation does not qual  1 Enter the appropriate amount in 6   | each column for each year, see instr   |  |                                      | es.          | <u>.</u> .                               | <del></del> |   |                                  |  |
| (a) Base period years Calendar year (or tax year beginnii   | (b) Adjusted qualifying dis  | tributions                             | Net value of no                      | (c)<br>nchar | ıtable-use as                            | sets        | (d) Distribution ratio (col. (b) divided by col. (c))   |                                  |  |
| 2009  |  | 2,459.                                 |                                      |              | 251,6                                    | 83.         |   | .049503                          |  |
| 2008  | · · - · · - · · - · · - · · - · - · - ·  | 4,961.                                 |                                      |              | 271,7                                    |             |   | .055048                          |  |
| 2007  |  | 4,622.                                 |                                      |              | 302,9                                    |             |   | .01525                           |  |
| 2006  |  | 9,747.                                 |                                      |              | 223,8                                    | 36.         |   | .04354                           |  |
| 2005  |  | 6,869.                                 |                                      |              | 160,2                                    |             |   | .04286                           |  |
| 2 Total of line 1, column (d)   |  |  |                                      |              |  |             | 2   | .206222                          |  |
| 3 Average distribution ratio for the state the foundation has been in existent                                      | 5-year base period - divide the total<br>nce if less than 5 years                    | on line 2 by 5,                        | or by the number                     | of yea       | ars                                      |             | 3   | .04124                           |  |
| 4 Enter the net value of noncharitab  | ole-use assets for 2010 from Part X,   | line 5                                 |                                      |              |  |             | 4   | 311,757                          |  |

| _ | 2006  | 9,747.                                  | 223,836.                             |   | .043545  |
|---|---|---|--------------------------------------|---|----------|
| _ | 2005  | 6,869.                                  |                                      |   | .042867  |
| 2 | Total of line 1, column (d)  Average distribution ratio for the 5-year base p       | eriod - divide the total on line 2 hv 5 | or by the number of years            | 2 | .206222  |
| Ū | the foundation has been in existence if less tha                                    |   | , or by the nombor or your           | 3 | .041244  |
| 4 | Enter the net value of noncharitable-use assets                                     | for 2010 from Part X, line 5            |                                      | 4 | 311,757. |
| 5 | Multiply line 4 by line 3   |   |                                      | 5 | 12,858.  |
| 6 | Enter 1% of net investment income (1% of Par  | t I, line 27b)                          |                                      | 6 | 84.      |
| 7 | Add lines 5 and 6   |   |                                      | 7 | 12,942.  |
| 8 | Enter qualifying distributions from Part XII, line                                  | 4                                       |                                      | 8 | 12,584.  |
| _ | If line 8 is equal to or greater than line 7, check<br>See the Part VI instructions | the box in Part VI, line 1b, and com    | plete that part using a 1% tax rate. |   |          |

| Form.990-PE (2010) THE WHC FOUNDATION  Part VI Excise Tax Based on Investment Income (Section 4940(a), 494   | 0(b), 4940(e), or 49           | 38-0429<br>948 - see | 9 <u>920</u><br>instru | ıctio | Page 4<br>ns) |
|--|--------------------------------|----------------------|------------------------|-------|---------------|
| 1a Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on   |                                |                      |                        |       |               |
| Date of ruling or determination letter (attach copy of letter if necessary-see   |                                |                      |                        |       |               |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check here  |                                | 1                    |                        | 1     | 68.           |
| of Part I, line 27b  |                                |                      |                        |       |               |
| c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, lin  | ne 12, col. (b).               |                      |                        |       |               |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter-  | 0-)                            | 2                    |                        |       | 0.            |
| 3 Add lines 1 and 2  |                                | 3                    |                        | _ 1   | 68.           |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter-  | .0-)                           | 4                    |                        |       | 0.            |
| 5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-   | Ĺ                              | 5                    |                        | 1     | 68.           |
| 6 Credits/Payments:  |                                |                      |                        |       |               |
| a 2010 estimated tax payments and 2009 overpayment credited to 2010 6a   |                                |                      |                        |       |               |
| b Exempt foreign organizations - tax withheld at source 6b   |                                |                      |                        |       |               |
| c Tax paid with application for extension of time to file (Form 8868)  |                                |                      |                        |       |               |
| d Backup withholding erroneously withheld 6d 6d  |                                |                      |                        |       |               |
| 7 Total credits and payments Add lines 6a through 6d   | Ĺ                              | 7                    |                        |       | 0,            |
| 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached   |                                | 8                    |                        |       |               |
| 9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed   | <b>&gt;</b>                    | 9                    |                        | 1     | 68.           |
| 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  | , ▶                            | 10                   |                        |       |               |
| 11 Enter the amount of line 10 to be: Credited to 2011 estimated tax   | Refunded -                     | 11                   |                        |       |               |
| Part VII-A Statements Regarding Activities   |                                |                      |                        |       |               |
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did   | it participate or intervene i  | n                    |                        | Yes   | <del> </del>  |
| any political campaign?  |                                |                      | 1a                     |       | _X_           |
| <b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see inst   | ructions for definition)?      |                      | 1b                     |       | 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?   |                                |                      | 1c                     |       | X             |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  |                                |                      |                        |       |               |
| (1) On the foundation ► \$ O . (2) On foundation managers ► \$   | 0.                             |                      |                        |       |               |
| e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imp  | osed on foundation             |                      |                        |       |               |
| managers ► \$O.  |                                |                      |                        |       |               |
| 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, a  | 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?   |                                | 37 / 3               | 4a                     | -     | X             |
| b If "Yes," has it filed a tax return on Form 990-T for this year?   |                                | N/A                  | 4b                     |       | 37            |
| 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   |                                |                      |                        |       |               |
| Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either   |                                |                      |                        |       |               |
| <ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions</li> </ul> | that conflict with the ctate I | low                  |                        |       |               |
|  | that commet with the State i   | avv                  | 6                      |       | х             |
| remain in the governing instrument?  7. Did the foundation have at least \$5,000 in assets at any time during the year?  |                                |                      | 7                      | Х     |               |
| 7 Did the foundation have at least \$5,000 in assets at any time during the year?  |                                |                      |                        | Λ     |               |
| 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 instructions)                       |                                |                      |                        |       |               |
| NV   |                                |                      |                        |       |               |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gene  | eral (or designate)            | <del></del>          |                        |       |               |
| of each state as required by General Instruction G? If "No," attach explanation  | oral (or acoignate)            |                      | 8b                     | Х     |               |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942()   | i)(3) or 4942(i)(5) for calen  | dar                  | 00                     | - 21  | <del> </del>  |
| year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Pa   |                                |                      | 9                      |       | X             |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their  |                                |                      | 10                     |       | X             |

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

| Form 990-PF (2010) THE WHC FOUNDATION   |   | ·   | 88-04299  | 20 Page 6                                   |
|---|---|---|---|---|
| Part VII-B Statements Regarding Activities for Which F  | Form 4720 May Be F  | Required (contin                                | nued)   |   |
| Part VII-B Statements Regarding Activities for Which F  Ba During the year did the foundation pay or incur any amount to:  (1) Carry on propaganda, or otherwise attempt to influence legislation (section (2) Influence the outcome of any specific public election (see section 4955); or 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 than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)?  (5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?  b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53 4945 or in a current notice regarding disaster assistance (see instru Organizations relying on a current notice regarding disaster assistance check h  c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant? | n 4945(e))? r to carry on, directly or indirectly or described in section  or educational purposes, or described exceptions described extensely?  ere  or the tax because it mainta | ectly, Ye Ye for Ye In Regulations              | es X No                               | 5b  |
| <ul> <li>If "Yes," attach the statement required by Regulations section 53 4945</li> <li>6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?</li> <li>b Did the foundation, during the year, pay premiums, directly or indirectly, on a pulf "Yes" to 6b, file Form 8870</li> <li>7a At any time during the tax year, was the foundation a party to a prohibited tax section.</li> </ul>   | pay premiums on ersonal benefit contract? helter transaction?   |   | es X No   | 6b X  |
| b If "Yes," did the foundation receive any proceeds or have any net income attribution. Information About Officers, Directors, Trusto   | nable to the transaction /  | nagere Highly                                   |   | / D   |
| Part VIII Paid Employees, and Contractors   | ees, i ouiluation ivia  | magers, riiging                                 | y   |   |
| 1 List all officers, directors, trustees, foundation managers and their   | compensation.   | <del></del>                                     |   |   |
| (a) Name and address  | (b) Title, and average<br>hours per week devoted<br>to position   | (c) Compensation<br>(If not paid,<br>enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances       |
| SEE STATEMENT 9   |   | 0.  | 0.  | 0.  |
|   |   |   |   |   |
| 2 Compensation of five highest-paid employees (other than those inc   |   | enter "NONE."                                   |   |   |
| (a) Name and address of each employee paid more than \$50,000   | (b) Title, and average<br>hours per week<br>devoted to position   | (c) Compensation                                | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense<br>account, other<br>allowances |
| NONE  |   |   |   |   |
|   |   |   |   |   |
| Total number of other employees paid over \$50,000  |   |   | <u> </u>  | 0   |

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|---|---------------------------------|----------|-------------|
| Part VIII Information About Officers, Directors, Trustees, Foundatio 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) Com  | pensation   |
| NONE  |                                 |          |             |
|   |                                 |          |             |
|   |                                 |          |             |
| Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities   |                                 | <b>•</b> | 0           |
| 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 | information such as the d, etc. | Expenses | S           |
| 1 <u>N/A</u>  |                                 |          |             |
| 2   |                                 |          | 0.          |
| 3   |                                 |          |             |
| 4   |                                 |          | ·-          |
| Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines  | 1 and 2                         | Amount   |             |
| 1 N/A   | s railu z                       | Amount   |             |
| 2   |                                 |          | <del></del> |
| All other program-related investments. See instructions 3   |                                 |          |             |
|   |                                 |          |             |

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Total. Add lines 1 through 3

| P  | art X Minimum Investment Return (All domestic foundations  | must o    | complete this pai    | t Foreign four   | ndations, se    | e instructions ) |
|----|--|-----------|----------------------|------------------|-----------------|------------------|
| 1  | Fair market value of assets not used (or held for use) directly in carrying out charitat   | ole, etc  | , purposes.          |                  |                 | <del></del>      |
| а  | Average monthly fair market value of securities  |           |                      |                  | 1a              | 313,364.         |
| b  | Average of monthly cash balances   |           |                      |                  | 1b              | 3,141.           |
| C  | Fair market value of all other assets  |           |                      |                  | 1c              |                  |
| d  | Total (add lines 1a, b, and c)   |           |                      |                  | 1d              | 316,505.         |
|    | Reduction claimed for blockage or other factors reported on lines 1a and   |           |                      |                  |                 |                  |
|    | 1c (attach detailed explanation)   | 1e        |                      | 0.               | İ               |                  |
| 2  | Acquisition indebtedness applicable to line 1 assets   |           | <del> </del>         |                  | 2               | 0.               |
| 3  | Subtract line 2 from line 1d   |           |                      |                  | 3               | 316,505.         |
| 4  | Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amoun   | t, see ii | nstructions)         |                  | 4               | 4,748.           |
| 5  | Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and o  |           |                      |                  | 5               | 311,757.         |
| 6  | Minimum investment return Enter 5% of line 5   |           |                      |                  | 6               | 15,588.          |
| P  | art XI Distributable Amount (see instructions) (Section 4942(j)(3) a 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               | 15,588.          |
| 2a | Tax on investment income for 2010 from Part VI, line 5   | 2a        |                      | 168.             |                 |                  |
| b  | Income tax for 2010 (This does not include the tax from Part VI.)  | 2Ь        |                      |                  |                 |                  |
| С  | Add lines 2a and 2b  |           |                      |                  | 2c              | 168.             |
| 3  | Distributable amount before adjustments Subtract line 2c from line 1   |           |                      |                  | 3               | 15,420.          |
| 4  | Recoveries of amounts treated as qualifying distributions  |           |                      |                  | 4               | 0.               |
| 5  | Add lines 3 and 4  |           |                      |                  | 5               | 15,420.          |
| 6  | Deduction from distributable amount (see instructions)   |           |                      |                  | 6               | 0.               |
| 7_ | Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Par   | t XIII, I | ine 1                |                  | 7               | 15,420.          |
| P  | art XII Qualifying Distributions (see instructions)  |           |                      |                  |                 |                  |
| 1  | Amounts paid (including administrative expenses) to accomplish charitable, etc., pur   | rposes    |                      |                  |                 |                  |
| a  | Expenses, contributions, gifts, etc - total from Part I, column (d), line 26   |           |                      |                  | 1a              | 12,584.          |
| b  | Program-related investments - total from Part IX-B   |           |                      |                  | 1b              | 0.               |
| 2  | Amounts paid to acquire assets used (or held for use) directly in carrying out charita   | ible, etc | c , purposes         |                  | 2               |                  |
| 3  | Amounts set aside for specific charitable projects that satisfy the  |           |                      |                  |                 |                  |
| a  | Suitability test (prior IRS approval required)   |           |                      |                  | 3a              |                  |
| þ  | Cash distribution test (attach the required schedule)  |           |                      |                  | 3b              |                  |
| 4  | Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, a   | and Par   | t XIII, line 4       |                  | 4               | 12,584.          |
| 5  | Foundations that qualify under section 4940(e) for the reduced rate of tax on net inv  | estmer    | nt                   |                  |                 |                  |
|    | income Enter 1% of Part I, line 27b  |           |                      |                  | 5               | 0.               |
| 6  | Adjusted qualifying distributions Subtract line 5 from line 4  |           |                      |                  | 6               | 12,584.          |
|    | Note. The amount on line 6 will be used in Part V. column (b), in subsequent years v   | when c    | alculating whether   | the foundation o | ualifies for th | e section        |

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4940(e) reduction of tax in those years.

88-0429920

|   | (a)<br>Corpus | (b)<br>Years prior to 2009 | (c)<br>2009 | <b>(d)</b><br>2010 |
|---|---------------|----------------------------|-------------|--------------------|
| 1 Distributable amount for 2010 from Part XI,   |               |                            |             |                    |
| line 7  |               |                            |             | 15,420.            |
| 2 Undistributed income, if any as of the end of 2010  |               |                            |             |                    |
| a Enter amount for 2009 only  |               |                            | 12,584.     |                    |
| b Total for prior years.  |               |                            |             |                    |
|   |               | 0.                         |             |                    |
| 3 Excess distributions carryover, if any, to 2010:  |               |                            |             |                    |
| <b>a</b> From 2005  |               |                            |             |                    |
| <b>b</b> From 2006  |               |                            |             |                    |
| c From 2007   |               |                            | į           |                    |
| d From 2008   |               |                            |             |                    |
| e From 2009   |               |                            |             |                    |
| f Total of lines 3a through e   | 0.            |                            |             |                    |
| 4 Qualifying distributions for 2010 from  |               |                            |             |                    |
| Part XII, line 4: ►\$ 12,584.   |               |                            |             |                    |
| a Applied to 2009, but not more than line 2a  |               |                            | 12,584.     |                    |
| <b>b</b> Applied to undistributed income of prior   |               |                            |             |                    |
| years (Election required - see instructions)  |               | 0.                         |             |                    |
| c Treated as distributions out of corpus  |               |                            |             |                    |
| (Election required - see instructions)  | 0.            |                            |             |                    |
| d Applied to 2010 distributable amount  |               |                            | -           | 0.                 |
| e Remaining amount distributed out of corpus  | 0.            |                            |             |                    |
| 5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount | 0.            |                            |             | 0.                 |
| 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   | 0.            |                            |             |                    |
| 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  |               |                            |             | 15,420.            |
| 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   | 0.            |                            |             |                    |
| 9 Excess distributions carryover to 2011  |               |                            | ĺ           |                    |
| Subtract lines 7 and 8 from line 6a   | 0.            |                            |             |                    |
| 10 Analysis of line 9   |               |                            |             |                    |
| a Excess from 2006  |               |                            |             |                    |
| <b>b</b> Excess from 2007   |               |                            |             |                    |
| c Excess from 2008  |               |                            |             |                    |
| d Excess from 2009  |               |                            |             |                    |
| e Excess from 2010  |               |                            |             |                    |

N/A

4942(j)(3) or **b** Check box to indicate whether the foundation is a private operating foundation described in section Tax year Prior 3 years 2 a Enter the lesser of the adjusted net (a) 2010 (b) 2009 (c) 2008 (d) 2007 income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c 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 c "Support" alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets Part XV at any time during the year-see the instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2)) SEE STATEMENT b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here X 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 instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number of the person to whom applications should be addressed b The form in which applications should be submitted and information and materials they should include:

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

c Any submission deadlines.

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THE WHC FOUNDATION

1 a If the foundation has received a ruling or determination letter that it is a private operating

foundation, and the ruling is effective for 2010, enter the date of the ruling

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to **Amount** status of any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year 10,000. THE BEAR LEAGUE (TIN N/APUBLIC EDUCATE PUBLIC TO LIVE CHARITY 68-0468708) IN HARMONY WITH BEARS P O BOX 393 HOMEWOOD, CA 96141 PUBLIC 2,584. PETS OF THE HOMELESS (TIN N/A PROVIDE FOOD & CHARITY 26-3010540) VETERINARY CARE TO 2255 WATERFORD PLACE PETS OF THE HOMELESS CARSON CITY, NV 89703 12,584. **▶** 3a Total **b** Approved for future payment NONE

**▶** 3b

# Part XVI-A Analysis of Income-Producing Activities

| Enter gross amounts unless otherwise indicated.              | Unrelated             | business income                       |                       | section 512, 513, or 514  | (e)               |
|--|-----------------------|---------------------------------------|-----------------------|---------------------------|-------------------|
| -  | (a)<br>Business       | (b)                                   | (C)<br>Exclu-<br>sion | (d)                       | Related or exempt |
| 1 Program service revenue:                                   | code                  | Amount                                | code                  | Amount                    | function income   |
| a  |                       |                                       |                       |                           |                   |
| b  |                       |                                       |                       |                           |                   |
| C  |                       |                                       |                       |                           |                   |
| d  |                       |                                       |                       |                           |                   |
| e  | 1 1                   |                                       |                       |                           |                   |
| f  |                       |                                       |                       |                           |                   |
| g Fees and contracts from government agencies                |                       |                                       |                       |                           |                   |
| 2 Membership dues and assessments                            |                       |                                       |                       |                           |                   |
| 3 Interest on savings and temporary cash                     |                       |                                       |                       |                           |                   |
| investments  |                       |                                       | 14                    | 155.                      |                   |
| 4 Dividends and interest from securities                     |                       |                                       | 14                    | 910.                      |                   |
| 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 property property                         |                       |                                       |                       |                           |                   |
| 7 Other investment income                                    | -                     | <u></u>                               |                       |                           |                   |
| 8 Gain or (loss) from sales of assets other                  |                       |                                       | 18                    | 8,297.                    |                   |
| than inventory  9 Net income or (loss) from special events   |                       |                                       | 10                    | 0,271.                    | - 100             |
| O Gross profit or (loss) from sales of inventory             |                       |                                       |                       |                           |                   |
| 1 Other revenue:   |                       |                                       |                       |                           | <del></del>       |
|  |                       |                                       |                       |                           |                   |
| ab   |                       | · · · · · · · · · · · · · · · · · · · |                       |                           |                   |
|  | 1                     |                                       | +                     |                           | <del></del>       |
|  | i i                   | ·                                     |                       |                           |                   |
| de   |                       |                                       |                       |                           |                   |
| 2 Subtotal Add columns (b), (d), and (e)                     |                       | C                                     | ).                    | 9.362.                    | 0                 |
| 3 Total Add line 12, columns (b), (d), and (e)               | L                     |                                       | -                     |                           | 9,362             |
| See worksheet in line 13 instructions to verify calculations | ;.)                   |                                       |                       | _                         |                   |
|  |                       | nnlishment of                         | Evomot Di             | rnocos                    |                   |
| Part XVI-B Relationship of Activitie                         | is to the Accor       | iibii2iiiieiir oi i                   | Exemple               | ii hoses                  |                   |
| Line No Explain below how each activity for which i          | income is reported in | column (e) of Part XV                 | I-A contributed       | importantly to the accomp | olishment of      |
| the foundation's exempt purposes (other the foundation)      | han by providing func | ls for such purposes)                 |                       |                           |                   |
|  |                       |                                       |                       |                           |                   |
|  |                       | ·-· · · · · · · ·                     |                       |                           |                   |
|  |                       |                                       |                       |                           |                   |
|  |                       |                                       |                       |                           |                   |
|  |                       |                                       |                       |                           |                   |
|  |                       |                                       |                       |                           |                   |
|  |                       |                                       |                       |                           |                   |

(a) Line no

(b) Amount involved

| Forn | m 990-PF (2010) THE WHC FOUNDATION 88-04  | 29920    | _ Pa | age 13 |
|------|---|----------|------|--------|
| Pa   | art XVII Information Regarding Transfers To and Transactions and Relationships With Nonch   | aritable | е    |        |
|      | Exempt Organizations  |          |      | ,      |
| 1    | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of |          | Yes  | No     |
|      | the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?                         |          |      |        |
| а    | Transfers from the reporting foundation to a noncharitable exempt organization of:  |          |      |        |
|      | (1) Cash  | 1a(1)    |      | X      |

|   | Did the digalization directly of indirectly engage in any of the following with any other organization described in section 50 (c) of        |           | 163 | 140 |
|---|--|-----------|-----|-----|
|   | the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?                                |           |     |     |
| l | Transfers from the reporting foundation to a noncharitable exempt organization of:   | ŀ         |     |     |
|   | (1) Cash   | 1a(1)     |     | X   |
|   | (2) Other assets   | 1a(2)     |     | X   |
| ) | Other transactions   |           |     |     |
|   | (1) Sales of assets to a noncharitable exempt organization   | 1b(1)     |     | X   |
|   | (2) Purchases of assets from a noncharitable exempt organization   | 1b(2)     |     | X   |
|   | (3) Rental of facilities, equipment, or other assets   | 1b(3)     |     | X   |
|   | (4) Reimbursement arrangements   | 1b(4)     |     | X   |
|   | (5) Loans or loan guarantees   | 16(5)     |     | X   |
|   | (6) Performance of services or membership or fundraising solicitations   | 1b(6)     |     | X   |
| ; | Sharing of facilities, equipment, mailing lists, other assets, or paid employees   | 1c        |     | X   |
|   | If the accurate any of the shove is "Ves" complete the following school to Column (b) should always show the fair market value of the goods. | nther acc | ote |     |

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

( $\mathbf{d}$ ) Description of transfers, transactions, and sharing arrangements

(c) Name of noncharitable exempt organization

|               |              |                                       |  | N/A                   |                            |   |               |                      |                          |                    |
|---------------|--------------|---------------------------------------|--|-----------------------|----------------------------|---|---------------|----------------------|--------------------------|--------------------|
|               |              |                                       |  |                       |                            |   |               |                      |                          |                    |
|               |              |                                       |  |                       |                            | <u></u>                                 |               |                      |                          |                    |
|               |              |                                       |  |                       |                            |   | ·             |                      |                          |                    |
|               |              |                                       |  |                       |                            |   |               |                      |                          |                    |
|               |              |                                       |  |                       |                            |   |               |                      |                          |                    |
|               |              |                                       |  |                       | ·                          |   | <del></del>   |                      |                          |                    |
|               |              |                                       |  |                       |                            |   |               | - <del></del>        |                          |                    |
|               |              |                                       |  |                       |                            |   |               | <del></del>          |                          |                    |
|               | -            |                                       |  |                       |                            |   | <u> </u>      |                      |                          |                    |
|               |              |                                       |  |                       |                            |   |               |                      |                          |                    |
|               | ļ. <u> </u>  |                                       |  |                       |                            |   | <u> </u>      |                      |                          |                    |
|               |              |                                       |  |                       |                            |   |               |                      |                          |                    |
|               | <del>-</del> |                                       |  |                       |                            |   |               |                      |                          |                    |
|               | -            |                                       |  |                       |                            |   |               |                      |                          |                    |
| 0 - 1- 15     |              |                                       |  |                       |                            |   |               |                      |                          |                    |
|               |              |                                       |  |                       | or more tax-exempt o       | ngamzau                                 | uns described |                      | Yes                      | X No               |
|               |              | of the Code (other the following sche |  | r(c)(3)) or in sect   | UII 527 *                  |   |               |                      | L res                    | ואט בב             |
| <u>D II 1</u> | es, complete | (a) Name of orga                      |  | <del></del>           | (b) Type of organiza       | ation                                   |               | (c) Description of   | relationship             |                    |
|               |              | N/A                                   | The state of the s |                       | (b) Typo of organiza       |   |               | (c) Edear priorit of |                          |                    |
| <del></del> - |              | 14/21                                 | <del></del>  |                       |                            |   |               |                      |                          |                    |
|               |              |                                       |  |                       | <del></del>                |   |               |                      |                          |                    |
|               |              |                                       |  |                       |                            |   |               |                      |                          |                    |
|               |              |                                       |  |                       |                            |   |               |                      |                          | <del></del>        |
|               |              |                                       |  |                       | ng accompanying schedi     |   |               |                      | lge and belief, it is tr | ue, correct        |
| Sign          | and complete | Declaration of prepare                | er (other than <b>l</b> axpa   | yer or Muciary) is ba | ised on all information of | 1 .                                     |               | owledge              |                          |                    |
| Here          |              | )                                     | )  | 1-                    | 3                          | 1216                                    | oll I         | DIRECTOR             |                          |                    |
|               | Signat       | ure of officer or trus                | stee   |                       | Date                       | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | <b>/</b> _    | Title                |                          |                    |
|               | Print/       | Type preparer's nar                   | ne   | P/eparer's si         | gnature, /                 | Da                                      | nte           | Check if             | PTIN                     |                    |
|               | RI           | CHARD D I                             | HAMMA,   | broken                | ( bem                      | -   .                                   |               | self- employed       |                          |                    |
| Paid          | CP           | A                                     |  | RICHAR                | D D HAMMA                  | , 4                                     | 1-21-11       |                      |                          |                    |
| Prepa         |              | name - GALT                           | JSHA, H  | GGINS &               | GALUSHA,                   | PC                                      |               | Firm's EIN           |                          |                    |
| Use O         | -            | 101                                   | L E. FRO   | ONT STRE              | ET #301                    |   |               |                      |                          |                    |
|               | Firm's       | address ► MIS                         | SSOULA,  | MT 5980               | 2                          |   |               | Phone no.            | 406-728-                 | 1800               |
|               |              |                                       |  |                       |                            |   |               |                      |                          |                    |
|               |              |                                       |  |                       |                            |   |               |                      | Form <b>99</b> 0         | <b>D-PF</b> (2010) |

### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

▶ Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2010

Employer identification number

88-0429920 THE WHC FOUNDATION Organization type (check one) Filers of: Section 501(c)( Form 990 or 990-EZ ) (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 private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990 EZ, or 990-PF that received during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively ▶ \$ religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990 EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990 EZ, or 990-PF)

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

|      | 4    | 4           |
|------|------|-------------|
| Page | ⊥ of | 1 of Part I |

| Schedule B (Form 990, 990-EZ, or 990-PF) (2010 | 3 |
|--|---|
|--|---|

Name of organization

Employer identification number

### THE WHC FOUNDATION

88-0429920

| Part I             | Contributors (see instructions)                      |                             |   |
|--------------------|--|-----------------------------|---|
| (a)<br>No.         | (b)<br>Name, address, and ZIP + 4                    | (c) Aggregate contributions | (d) Type of contribution  |
| 1                  | JAMES ROSS  10391 DOUBLE R BOULEVARD  RENO, NV 89521 | \$\$ 11,665.                | Person X Payroll  |
| (a)<br>No.         | (b)<br>Name, address, and ZIP + 4                    | (c) Aggregate contributions | (d) Type of contribution  |
| 2                  | PETA ROSS  10391 DOUBLE R BOULEVARD  RENO, NV 89521  | \$\$ 11,664.                | Person X Payroll Noncash (Complete Part II if there is a noncash contribution)              |
| (a)<br>No          | (b)<br>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)<br><b>N</b> o. | (b)<br>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)<br>No          | (b)<br>Name, address, and ZIP + 4                    | (c) Aggregate contributions | (d) Type of contribution  |
|                    |  | \$                          | Person Payroll Oncash Complete Part II if there is a noncash contribution )                 |
| (a)<br>No.         | (b)<br>Name, address, and ZIP + 4                    | (c) Aggregate contributions | (d) Type of contribution  |
|                    |  | <b>\$</b>                   | Person Payroll Noncash Complete Part II if there is a noncash contribution Part II if there |
| 23452 12-2         | 3-10   | Schedule B (Form            | 990, 990-EZ, or 990-PF) (2010)  |

of Part II

Employer identification number

# THE WHC FOUNDATION

88-0429920

| Part II                      | Noncash Property (see instructions)          |  |                                       |
|------------------------------|--|--|---------------------------------------|
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given   | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received                  |
|                              |  |  |                                       |
| -                            |  | \$   |                                       |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given   | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received                  |
| _                            |  |  |                                       |
| -<br> -                      |  | \$   |                                       |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received                  |
| -                            |  |  |                                       |
|                              |  | \$   |                                       |
| (a)<br>No.<br>from<br>Part I | (b)<br>Description of noncash property given | (c)<br>FMV (or estimate)<br>(see instructions) | (d)<br>Date received                  |
| -                            |  |  |                                       |
| -                            |  |  | <del></del>                           |
| (a)<br>No.<br>from<br>Part I | (b)  Description of noncash property given   | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received                  |
|                              |  |  |                                       |
| -                            |  |  |                                       |
| (a)                          |  |  |                                       |
| No.<br>from<br>Part I        | (b)  Description of noncash property given   | (c) FMV (or estimate) (see instructions)       | (d)<br>Date received                  |
| -                            |  |  |                                       |
| -                            |  | <br>   |                                       |
| 3453 12-23-10                |  | Schedule B (Form 9                             | <br> <br> 90, 990-EZ, or 990-PF) (201 |

| Schedule | В | (Form | 990, | 990-EZ, | or | 990-PF) | (2 | 01 | 101 | j |
|----------|---|-------|------|---------|----|---------|----|----|-----|---|

Page

of Part III

Name of organization Employer identification number THE WHC FOUNDATION 88-0429920 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 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) > \$ (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

|                               |                              |                             | <del></del> |                              | _====================================== |            |
|-------------------------------|------------------------------|-----------------------------|-------------|------------------------------|---|------------|
| FORM 990-PF INTEREST ON SAVI  | NGS AND TEM                  | IPORARY CA                  | ASH II      | NESTMENTS                    | STATEMENT                               | 1          |
| SOURCE                        |                              |                             |             |                              | AMOUNT                                  |            |
| CROSS CREEK CAPITAL           |                              |                             |             |                              | 1!                                      | 55.        |
| TOTAL TO FORM 990-PF, PART I, | LINE 3, CO                   | DLUMN A                     |             |                              | 1!                                      | 55.        |
| FORM 990-PF DIVIDEND          | S AND INTER                  | REST FROM                   | SECUE       | RITIES                       | STATEMENT                               | 2          |
| SOURCE                        | GROSS                        | S AMOUNT                    |             | ITAL GAINS<br>IVIDENDS       | COLUMN (A<br>AMOUNT                     | )          |
| CROSS CREEK CAPITAL<br>SCHWAB |                              | 289.<br>4,783.              |             | 0.<br>4,162.                 |   | 89.<br>21. |
| TOTAL TO FM 990-PF, PART I, I | N 4                          | 5,072.                      |             | 4,162.                       | 91                                      | 10.        |
| FORM 990-PF                   | ACCOUNTI                     | NG FEES                     |             |                              | STATEMENT                               | 3          |
| DESCRIPTION                   | (A)<br>EXPENSES<br>PER BOOKS | (B)<br>NET INVE<br>MENT INC |             | (C)<br>ADJUSTED<br>NET INCOM |   |            |
| ACCOUNTING                    | 720.                         |                             | 720.        |                              |   | 0.         |
| TO FORM 990-PF, PG 1, LN 16B  | 720.                         |                             | 720.        |                              |   | 0.         |
| FORM 990-PF C                 | THER PROFES                  | SSIONAL FE                  | EES         |                              | STATEMENT                               | 4          |
| DESCRIPTION                   | (A)<br>EXPENSES<br>PER BOOKS |                             | EST-        |                              |   |            |
| INVESTMENT                    | 195.                         |                             | 195.        |                              |   | 0.         |
| TO FORM 990-PF, PG 1, LN 16C  | 195.                         |                             | 195.        | <del> </del>                 |   | 0.         |

|   | TAX          | ES<br>                            |           | STATEMENT                         | 5          |
|---|--------------|-----------------------------------|-----------|-----------------------------------|------------|
| DESCRIPTION   |              | (B)<br>NET INVEST-<br>MENT INCOME |           | _                                 |            |
| FOREIGN TAXES   | 42.          | 42.                               |           |                                   | 0.         |
| TO FORM 990-PF, PG 1, LN 18   | 42.          | 42.                               |           |                                   | 0.         |
| FORM 990-PF   | OTHER E      | XPENSES                           |           | STATEMENT                         | 6          |
| DESCRIPTION   | EXPENSES     | (B)<br>NET INVEST-<br>MENT INCOME |           | CHARITA                           |            |
| SECRETARY OF STATE  | 25.          | 25.                               |           |                                   | 0.         |
| TO FORM 990-PF, PG 1, LN 23   | 25.          | 25.                               |           |                                   | 0.         |
|   |              |                                   |           |                                   |            |
| FORM 990-PF OTHER INCREASES   | S IN NET ASS | ETS OR FUND B.                    | ALANCES   | STATEMENT                         | 7          |
| DESCRIPTION   | S IN NET ASS | ETS OR FUND B.                    | ALANCES   | STATEMENT                         | 7          |
|   |              | ETS OR FUND B                     | ALANCES   | AMOUNT                            | 7          |
| DESCRIPTION   | r BASIS      | ETS OR FUND B                     | ALANCES - | AMOUNT<br>88                      |            |
| DESCRIPTION PRIOR YEAR ADJUSTMENT TO COST                               | r BASIS      |                                   | ALANCES - | AMOUNT<br>88                      | 85.        |
| DESCRIPTION PRIOR YEAR ADJUSTMENT TO COST TOTAL TO FORM 990-PF, PART II | r BASIS      | E STOCK                           |           | AMOUNT<br>88                      | 85.        |
| DESCRIPTION PRIOR YEAR ADJUSTMENT TO COST TOTAL TO FORM 990-PF, PART II | r BASIS      | E STOCK                           |           | AMOUNT 88 88 STATEMENT FAIR MARKE | 85.<br>85. |

|   | LIST OF OFFICERS, D<br>AND FOUNDATION MANA |    | S STATEMENT                     |          |  |  |  |
|---|--|----|---------------------------------|----------|--|--|--|
| NAME AND ADDRESS  | TITLE AND<br>AVRG HRS/WK                   |    | EMPLOYEE<br>BEN PLAN<br>CONTRIB |          |  |  |  |
| JAMES ROSS<br>10391 DOUBLE R BOULEVARD<br>RENO, NV 89521        | DIRECTOR<br>0.00                           | 0. | 0.                              | 0.       |  |  |  |
| PETA E. ROSS<br>10391 DOUBLE R BOULEVARD<br>RENO, NV 89521      | DIRECTOR<br>0.00                           | 0. | 0.                              | 0.       |  |  |  |
| AMY HARRIS<br>10391 DOUBLE R BOULEVARD<br>RENO, NV 89521        | DIRECTOR<br>0.00                           | 0. | 0.                              | 0.       |  |  |  |
| NANCY LA TOURETTE<br>10391 DOUBLE R BOULEVARD<br>RENO, NV 89521 | DIRECTOR<br>0.00                           | 0. | 0.                              | 0.       |  |  |  |
| CARRIE ORTIZ<br>10391 DOUBLE R BOULEVARD<br>RENO, NV 89521      | DIRECTOR<br>0.00                           | 0. | 0.                              | 0.       |  |  |  |
| TOTALS INCLUDED ON 990-PF, PAGE                                 | E 6, PART VIII                             | 0. | 0.                              | 0.       |  |  |  |
|   | ART XV - LINE 1A<br>F FOUNDATION MANAGE    | RS | STATI                           | EMENT 10 |  |  |  |

NAME OF MANAGER

JAMES ROSS PETA E. ROSS