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Form 990-PF

Department of the Treasury

Internal Revenue Service

Return of Private Foundation

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

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

2010

OMB No 1545-0052

For calendar year 2010, or tax year beginning APR 1 2010 , and ending MAR . 2011 Initial return of a former public charity Final return Initial return G Check all that apply: Amended return Address change Name change A Employer identification number Name of foundation THE RICHARDSON FAMILY FOUNDATION 83-0310875 Room/suite Number and street (or P.O. box number if mail is not delivered to street address) B Telephone number 307-775-8050 5025 CAMPSTOOL ROAD City or town, state, and ZIP code C If exemption application is pending, check here D 1. Foreign organizations, check here CHEYENNE, WY 82007 2. Foreign organizations meeting the 85% test, check here and attach computation Section 501(c)(3) exempt private foundation H Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation E If private foundation status was terminated I Fair market value of all assets at end of year | J Accounting method: X Cash Accrual under section 507(b)(1)(A), check here Other (specify) (from Part II, col (c), line 16) F If the foundation is in a 60-month termination 60,593. (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here ▶\$ Part I Analysis of Revenue and Expenses
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) (a) Revenue and (d) Disbursements (b) Net investment (c) Adjusted net charitable purposes (cash basis only) expenses per books income income 646,150 N/A Contributions, gifts, grants, etc., received 2 Check In at the foundation is not required to attach Sch. B Interest on savings and temporary cash investments Dividends and interest from securities 5a Gross rents b Net rental income or (loss) RECEIVED 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Ğ, 0 7 Capital gain net income (from Part IV, line 2) B 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances OGDEN. UT b Less Cost of goods sold c Gross profit or (loss) 11 Other income 0 646,150 12 Total. Add lines 1 through 11 0. 0. n Compensation of officers, directors, trustees, etc. 0. 3,693 0. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees STMT 1 1,395 0. 0. b Accounting fees c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 3,020 0. 0. 21 Travel, conferences, and meetings 22 Printing and publications 873 0. 0. 23 Other expenses STMT 2 24 Total operating and administrative 8,981 0. expenses Add lines 13 through 23 577,150. 577,150 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 577.150. 586,131 0 Add lines 24 and 25 27 Subtract line 26 from line 12: 60,019 8 Excess of revenue over expenses and disbursements 0. b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-) Form 990-PF (2010)

Part III Analysis of Changes in Net Assets or Fund Balanc	alances	Fund B	or	Assets	Net	res i	Chan	of	Analysis	Part III
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31 Total liabilities and net assets/fund balances

-	Total net assets or fund balances at beginning of year - Part II, column (a), line 30			
		١.		E 77.4
	(must agree with end-of-year figure reported on prior year's return)	1	┸	574.
2	Enter amount from Part I, line 27a	2		60,019.
3	Other increases not included in line 2 (itemize)	3		0.
4	Add lines 1, 2, and 3	4		60,593.
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		60,593.

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Page 3

	arehouse; or common stock, 20	I (e.g., real estate, O shs. MLC Co.)) - Q D -	w acquired Purchase Donation	(c) Date acqı (mo., day, ı	yr.)	(d) Date sold (mo., day, yr.)
a								<u>. </u>
bNO	<u>NE</u>							
<u> </u>								
<u>d</u> e								
(e) Gross sales price	(f) Depreciation allowed (or allowable)		or other basis pense of sale		(h) Gain or (loss) (e) plus (f) minus (g)			
1								
<u> </u>		- 			· -	_		
<u>: </u>								·-
				-+				
Complete only for assets showin	ng gain in column (h) and owne	d by the foundation (on 12/31/69	$\neg \uparrow$	(1)	Gains (Col. ((h) gain mi	nus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		ess of col. (ı) col. (j), ıf any			(k), but not i Losses (fro	ess than -(O-) or
<u> </u>								
<u> </u>			-7-					
1				-				—
<u> </u>				$\overline{+}$	 1			
Capital gain net income or (net ca	apital loss) { If gain, also If (loss), ent	enter in Part I, line 7 ter -0- in Part I, line 7	,	}	2			
Net short-term capital gain or (los		(5) and (6):						
If gain, also enter in Part I, line 8,				}	,			
If (loss), enter -0- in Part I, line 8 Part V Qualification U	Inder Section 4940(e)	for Reduced	Tax on Net	Inve	stment inc	ome		
as the foundation liable for the sec	ilify under section 4940(e). Do n	not complete this par	t					Yes X
Enter the appropriate amount in (a)			making any entrie	<u>.s.</u>				
Base period years Calendar year (or tax year beginni	(b)	<i>i</i>		(0)		1)
	ing in) Aujusteu qualifyii	ng distributions	Net value of nor	(c) ncharit			- ` 	ed by col. (c))
2009	ing in) Aujusteu quamyii	1g distributions 462,325.	Net value of nor	(c) ncharit	608	•	1. (b) divide 7	60.4029
2008	ing in) Aujusteu quaniyii	462,325. 403,250.	Net value of nor	(c) ncharit	608 695		1. (b) divide 7 5	60.4029 80.2158
2008 2007	ing in) Aujusteu qualilyii	462,325. 403,250. 513,000.	Net value of nor	(c) ncharit	608 695 1,060		1. (b) divide 7 5 4	60.4029 80.2158 83.9622
2008 2007 2006	ing in) Aujusteu qualilyii	462,325. 403,250. 513,000. 533,996.	Net value of nor	(c) ncharit	608 695 1,060 4,871	•	7 5 4 1	60.4029 80.2158 83.9622 09.6275
2008 2007	ing in) Aujusteu qualilyii	462,325. 403,250. 513,000.	Net value of nor	(c) ncharit	608 695 1,060	•	7 5 4 1	1) 1) 1) 1) 1) 1) 1) 1) 1) 1) 1) 1) 1) 1
2008 2007 2006 2005	ing in) Aujusteu qualilyii	462,325. 403,250. 513,000. 533,996.	Net value of nor	(c) ncharit	608 695 1,060 4,871	•	7 5 4 1	60.4029 80.2158 83.9622 09.6275
2008 2007 2006 2005 Total of line 1, column (d)	5-year base period - divide the	462,325. 403,250. 513,000. 533,996. 578,950.		ncharit	608 695 1,060 4,871 4,183		7 5 4 1 1 2,0	80.4029 80.2158 83.9622 09.6275 38.4054
2008 2007 2006 2005 Total of line 1, column (d) Average distribution ratio for the the foundation has been in existe	5-year base period - divide the ence if less than 5 years	19 distributions 462,325. 403,250. 513,000. 533,996. 578,950.		ncharit	608 695 1,060 4,871 4,183	2	7 5 4 1 1 2,0	80.4029 80.2158 83.9622 09.6275 38.4054 72.6140
2008 2007 2006 2005 Total of line 1, column (d) Average distribution ratio for the the foundation has been in existe	5-year base period - divide the ence if less than 5 years	19 distributions 462,325. 403,250. 513,000. 533,996. 578,950.		ncharit	608 695 1,060 4,871 4,183	2	7 5 4 1 1 2,0	80 . 4029 80 . 2158 83 . 9622 09 . 6275 38 . 4054 72 . 6140 14 . 5228
2008 2007 2006 2005 Total of line 1, column (d) Average distribution ratio for the the foundation has been in existe Enter the net value of noncharitat Multiply line 4 by line 3	5-year base period - divide the ence if less than 5 years ble-use assets for 2010 from Pa	19 distributions 462,325. 403,250. 513,000. 533,996. 578,950.		ncharit	608 695 1,060 4,871 4,183	2 3	7 5 4 1 1 2,0	80.4029 80.2158 83.9622 09.6275 38.4054 72.6140 14.5228 30,12
2008 2007 2006 2005 Total of line 1, column (d) Average distribution ratio for the	5-year base period - divide the ence if less than 5 years ble-use assets for 2010 from Pa	19 distributions 462,325. 403,250. 513,000. 533,996. 578,950.		ncharit	608 695 1,060 4,871 4,183	2 3 4 5	12	60.4029 80.2158 83.9622 09.6275 38.4054
2008 2007 2006 2005 Total of line 1, column (d) Average distribution ratio for the the foundation has been in existe Enter the net value of noncharitat Multiply line 4 by line 3 Enter 1% of net investment incor	5-year base period - divide the ence if less than 5 years ble-use assets for 2010 from Pame (1% of Part I, line 27b)	19 distributions 462,325. 403,250. 513,000. 533,996. 578,950. total on line 2 by 5, cart X, line 5	or by the number	of year	608 695 1,060 4,871 4,183	2 3 4 5	12	30,12 30,487,08

_	1990-PF (2010) THE RICHARDSON FAMILY FOUNDATION			<u>0310</u>			Page 4
	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e)), or 4	948	- see ii	nstru	ctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.)					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%)	1				0.
	of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).) [
	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	1	3	i			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	ľ	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5				0.
6	Credits/Payments:	Ì					
	2010 estimated tax payments and 2009 overpayment credited to 2010 6a	1					
	Exempt foreign organizations - tax withheld at source 6b						
	· · · · · · · · · · · · · · · · · · ·						
	,						
			-				Λ
	Total credits and payments. Add lines 6a through 6d						0.
_	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		9	-			0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10				
	Enter the amount of line 10 to be: Credited to 2011 estimated tax	led 🖊	11				
	art VII-A Statements Regarding Activities				 1	<u> </u>	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or it	ntervene	ın			Yes	
	any political campaign?				1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for defin				1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials p	ublishe	d or				!
	distributed by the foundation in connection with the activities.						
C	Did the foundation file Form 1120-POL for this year?				1c		X
d	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:						
	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$	0.					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundati	on					
	managers. ▶ \$ 0 .						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		X
	If "Yes," attach a detailed description of the activities						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporate	oration, c	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes				3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		Х
b	o If "Yes," has it filed a tax return on Form 990-T for this year?		N	I/A	4b		
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.						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:						
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with	the state	law				
	remain in the governing instrument?				6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?				7	Х	
٠	If "Yes," complete Part II, col. (c), and Part XV						
82	a Enter the states to which the foundation reports or with which it is registered (see instructions)						
J	WY				'		
,	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate						
٠	of each state as required by General Instruction G? If "No," attach explanation	• •			8b	X	
۵	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)) for cale	ndar		"		1
3	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV	, ioi vaic	ui		9		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and address				10		X
10	Die ung personis besonie substantial commissions during the acceptance in test attach a schedule listing their names and address		-	For	m 990	-PF	
						- •	··

orm 990-PF (2010) THE RICHARDSON FAMILY FO	UNDATION		<u>83-03108</u> .	/ 5 Page 6		
Part VII-B Statements Regarding Activities for Which F	orm 4/20 May Be R	equired (continu	ued)	- , - ,		
5a During the year did the foundation pay or incur any amount to:						
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s X No			
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,						
any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? Yes X No						
(3) Provide a grant to an individual for travel, study, or other similar purposes'		Ye	S LAL NO			
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section	□ v ₂	s X No			
509(a)(1), (2), or (3), or section 4940(d)(2)?	ar advantional auranage or fe		אובאן או			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or it		s X No			
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	for the exceptions described ii		5 LA 140			
section 53.4945 or in a current notice regarding disaster assistance (see instru		ii riegulations	N/A 5	5 b		
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 fi		ned	· _			
expenditure responsibility for the grant?		/A	s 🔲 No			
If "Yes," attach the statement required by Regulations section 53 494		,				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to			1			
a personal benefit contract?		Ye	s X No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			Sb X		
If "Yes" to 6b, file Form 8870						
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	s X No			
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A						
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	/			
1 List all officers, directors, trustees, foundation managers and their	compensation.					
() Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expense account, other		
(a) Name and address	to position	enter -0-)	and deferred compensation	allowances		
	PRESIDENT					
P.O. BOX 5690		_		_		
CHEYENNE, WY 82003	0.00	0.	0.	0.		
	VICE-PRES.			I		
P.O. BOX 5690	0.00		ا م			
CHEYENNE, WY 82003	0.00 SEC. / TREAS.	0.	0.	0.		
NORMAN J. WYMAN	SEC. / TREAS.					
P.O. BOX 5690 CHEYENNE, WY 82003	0.00	0.	0.	0.		
CHEIENNE, WI 02003	0.00	•	0.	<u>.</u>		
	†					
	1					
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 hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances		
NONE						
	-					
	4					
						
	-					
Total number of other employees paid over \$50,000	I		' 	0		
Total number of other employees paid ever 400,000						

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

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	30,583.
	Fair market value of all other assets	1c	
	Total (add lines 1a, b, and c)	1d	30,583.
	Reduction claimed for blockage or other factors reported on lines 1a and		*
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	30,583.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	459.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	30,124.
6	Minimum investment return. Enter 5% of line 5	6	1,506.
Р	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	1,506.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010. (This does not include the tax from Part VI.)	}	
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,506.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,506.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,506.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	577,150.
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 charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	577,150.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	577,150.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies fo	r the section

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4940(e) reduction of tax in those years.

Part XIII Undistributed Income (se	ee instructions)			
	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,				1,506.
2 Undistributed income, if any, as of the end of 2010			-	
a Enter amount for 2009 only			0.	
b Total for prior years:		-		
,,		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005 578,741.				
b From 2006 533,752.				
c From 2007 512,947.				
dFrom 2008 403,215.				
e From 2009 462,295.				
f Total of lines 3a through e	2,490,950.			· ···
4 Qualifying distributions for 2010 from				
Part XII, line 4: ► \$ 577,150.	!			
a Applied to 2009, but not more than line 2a	<u>,</u>		0.	-1
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.			1 506
d Applied to 2010 distributable amount		·		1,506.
e Remaining amount distributed out of corpus	575,644.			
Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	3,066,594.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b	#***	0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				_
be distributed in 2011				0.
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	578,741.			
9 Excess distributions carryover to 2011.	0 405 055			
Subtract lines 7 and 8 from line 6a	2,487,853.		<u> </u>	
10 Analysis of line 9:				
a Excess from 2006 533, 752.	1			
b Excess from 2007 512, 947.	{			
c Excess from 2008 403, 215.	-			
d Excess from 2009 462, 295.	-			
e Excess from 2010 575,644.	1			

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<u> </u>			-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for b Check box to indicate whether the foun			in coction	4942(j)(3) or 49	942(J)(5)
	Tax year	ly loundation described i	Prior 3 years	<u> </u>	
2 a Enter the lesser of the adjusted net	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
income from Part I or the minimum	(4) 2010	(5) 2000	(6) 2000	(0)2001	(0) 1012
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					
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)			<u></u>		
b "Endowment" alternative test - enter 2/3 of minimum investment return					
shown in Part X, line 6 for each year					
listed					
c "Support" alternative test - enter		Ï			
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section		ļ			
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	1				
(4) Gross investment income					
Part XV Supplementary Info	ormation (Comple	ete this part only	if the foundation	n had \$5,000 or m	ore in assets
at any time during	the year-see the	instructions.)			
1 Information Regarding Foundati	on Managers:				
a List any managers of the foundation w	ho have contributed more	than 2% of the total con	tributions received by t	ne foundation before the clo	se of any tax
year (but only if they have contributed	more than \$5,000). (See	section 507(d)(2).)			
NONE					
b List any managers of the foundation w			(or an equally large por	tion of the ownership of a p	partnership or
other entity) of which the foundation h	as a 10% or greater intere	est.			
NONE		-12			
2 Information Regarding Contribu	tion, Grant, Gift, Loan	, Scholarship, etc., P	rograms:		
Check here ▶ ☐ If the foundation					
the foundation makes gifts, grants, etc	. (see instructions) to indi	viduals or organizations	under other conditions,	complete items 2a, b, c, an	d d.
a The name, address, and telephone nur	nber of the person to who	m applications should be	e addressed:		
KEITH W. RICHARDSON	, PRESIDENT	, 5025 CAMPS	STOOL RD, C	CHEYENNE WY	82007
b The form in which applications should				TON TEMMER	
	SHEET, NARRA	ATIVE STMT,	TKO EVEWL.	ION LETTER	
c Any submission deadlines:					
NONE d Any restrictions or limitations on awar	ds, such as hy geographic	cal areas, charitable fields	kinds of institutions of	r other factors:	
MUST BE A 501(C)(3)		•	,		
		<u> </u>			

Supplementary information	(COTTUTUEU)			
3 Grants and Contributions Paid During the Ye	ar or Approved for Future I	Payment		
. Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
a Paid during the year				
		!		
	!			
SEE STATEMENT 4		<u> </u>		
Total		<u> </u>	<u>▶ 3a</u>	577,150.
b Approved for future payment				
		1		
NONE				
]
				:
	<u> </u>	<u></u>		
Total			► 3b	0.

_		
Рапе	1	2

Part XVI-A	Analysis of	Income-Producing	Activities
------------	-------------	------------------	------------

	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
Enter gross amounts unless otherwise indicated.	(a) Business	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue:	Business code	Amount	sion	Amount	function income
-	0000			· · · · · · · · · · · · · · · · · · ·	
a		<u> </u>			
b					
c					
d	<u> </u>	 			
e	<u> </u>				
f					
g Fees and contracts from government agencies			ļ		
2 Membership dues and assessments			<u> </u>		
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities	_				
5 Net rental income or (loss) from real estate:			ļ		
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other			i		
than inventory					
9 Net income or (loss) from special events		**			
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:			1		
a	I				
b	1		İ		
<u> </u>			 	-	
d			+		
6		0.	 	0.	0
12 Subtotal. Add columns (b), (d), and (e)			<u> </u>		0.
13 Total. Add line 12, columns (b), (d), and (e)				10_	
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Acc	omplishment of Ex	xemp	ot Purposes	
					mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of
	ome is reported	ın column (e) of Part XVI-A			mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of
Line No. Explain below how each activity for which income	ome is reported	ın column (e) of Part XVI-A			mplishment of

	-	Exempt Organi	izations					
1	Did the org	ganızatıon dırectly or ındır	ectly engage in any of the follow	ing 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 organiz	ations?			
a	Transfers	from the reporting founda	ation to a noncharitable exempt	organization of:				
	(1) Cash					1a(1)		X
	(2) Other	assets				1a(2)		X
b	Other trans	sactions:				1		
	(1) Sales	of assets to a noncharitat	ble exempt organization			1b(1)		X
	(2) Purch	ases of assets from a nor	ncharitable exempt organization			1b(2)		_X_
	(3) Renta	I of facilities, equipment, o	or other assets			1b(3)	<u> </u>	X
	(4) Reiml	bursement arrangements				1b(4)		X
	(5) Loans	s or loan guarantees				1b(5)		X
	(6) Perfo	rmance of services or me	mbership or fundraising solicita	tions		1b(6)	<u> </u>	X
	c Sharing of facilities, equipment, mailing lists, other assets, or paid employees							X
d		-	-	• •	ays show the fair market value of the goods, o		sets,	
					in any transaction or sharing arrangement, s	how IN		
		·	other assets, or services receive		1 (0			
(a)	Line no	(b) Amount involved		ble exempt organization	(0) Description of transfers, transactions, and	sharing a	rrangeme	ents
			N/A	•				
					-			
			···-					
				· · · · · · · · · · · · · · · · · · ·				
								
	<u> </u>							
								
	ın section	501(c) of the Code (other	tly affiliated with, or related to, o r than section 501(c)(3)) or in s		ations described	Yes	<u> </u>	No
<u>b</u>	If "Yes," co	omplete the following sch		(1) T (1)	(1)	h		
		(a) Name of org	ganization	(b) Type of organization	(c) Description of relations	nıp		
		N/A						
			-					
			· · · · · · · · · · · · · · · · · · ·					
		0 0 0	`		Ma			
S			e the have examined this return, inc are (other than taxpayer or fiduciary) is		statements, and to the best of my knowledge and be reparer has any knowledge Board Memb.		EVÝ	
		Signature of officer or tru	ustee /	Date	Title	1		
_		Print preparer's na	1 1	s signature	Date Check if PTIN self- employed			·
Ρ	aid reparer		EE, HEARNE & F	PAIZ LLP	Firm's EIN ►			
U	se Only	Firm's address ► CH	O. BOX 1088 EYENNE, WY 820	103	Phone no. 307-	634-	-215	51
		L				rm QQ	O DE	(2010)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2010

Name of the organization Employer identification number 83-0310875 THE RICHARDSON FAMILY 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 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	
age	⊥ of	☐ of Part I	

Name of organization

Employer identification number

THE RICHARDSON FAMILY FOUNDATION

83-0310875

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	SIERRA TRADING POST 5025 CAMPSTOOL ROAD CHEYENNE, WY 82007	\$646,150.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Omnicash Omnicash Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		s	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- - \$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- \$	Person Payroll Noncash Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

THE RICHARDSON FAMILY FOUNDATION

83-0310875

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u> </u>	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		<u></u>	
1 1453 12-23	3-10		990, 990-EZ, or 990-PF) (20

of

Employer identification number

rt III	Exclusively religious, charitable, etc., in	TION dividual contributions to section 50	83-0310875 1(c)(7), (8), or (10) organizations aggregating				
	more than \$1,000 for the year. Complete Part III, enter the total of exclusively religion	e columns (a) through (e) and the follogon	wing line entry. For organizations completing				
	\$1,000 or less for the year. (Enter this info	ormation 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, a	nd 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	(b) Ful pose of gift	(c) Ose of gift	(a) bescription of now gift is field				
	(e) Transfer of gift						
	Transferoe's name address a	nd 7 ID . 4	Relationship of transferor to transferee				
<u> </u>	Transferee's name, address, a	IU ZIF + 4	netationship of transfer to transferee				
1							
(a) No. from Part I							
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
Part I	(b) Purpose of gift	(c) Use of gift (e) Transfer of gift	(d) Description of how gift is held				
Part I	(b) Purpose of gift Transferee's name, address, a	(e) Transfer of gift	(d) Description of how gift is held Relationship of transferor to transferee				
Part I		(e) Transfer of gift					
Part I		(e) Transfer of gift					
(a) No. from	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee				
(a) No. from	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee				

2010 DEPRECIATION AND AMORTIZATION REPORT

Γ	, B c	4	4	one
	Ending -Accumulated Depreciation	1,114.	1,114.	J ction, GO Z
	Current Year Deduction	0.	0.	* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone
	Current Sec 179 Expense			nercial Revita
	Beginning Accumulated Depreciation	1,114.	1,114.	Bonus, Comn
	Basis For Depreciation	1,114.	1,114.	ITC, Salvage,
	Reduction In Basis			*
	Section 179 Expense		-	
990-PF	Bus % Excl	_		pesoc
	Unadjusted Cost Or Basis	1,114.	1,114.	D) - Asset disposed
	Line No	HY16		_
	Life	5.00 H		
	Method	SL		
	Date Acquired M	s 96/0E/90		
FORM 990-PF PAGE 1	Description	COMPUTER	* TOTAL 990-PF PG 1 DEPR	
NRM 99	Asset	н		028111 05-01-10
F	L	1		 66

FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	1
DESCRIPTION	EXPE	A) NSES BOOKS			(C) ADJUSTED NET INCOM		
ACCOUNTING	:	1,395.		0.			0.
TO FORM 990-PF, PG 1, LN 16B		1,395.		0.			0.
FORM 990-PF	0'	THER E	XPENSES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
SECRETARY OF STATE SUPPLIES SERVICE CHARGE MISCELLANEOUS		50. 480. 212. 131.		0. 0. 0.			0. 0. 0.
TO FORM 990-PF, PG 1, LN 23		873.		0.			0.
FORM 990-PF DEPRECIATION OF	ASSE	TS NOT	HELD FOR	INV	ESTMENT	STATEMENT	3
DESCRIPTION			T OR BASIS		JMULATED RECIATION	BOOK VAL	JE
COMPUTER	•		1,114.		1,114.		0.
TOTAL TO FM 990-PF, PART II,	LN 14		1,114.		1,114.	-	0.

	AND CONTRIBUTIONS DURING THE YEAR	STATI	EMENT 4
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
AGAPE BAPTIST CHURCH 210 E 20TH ST CHEYENNE , WY 82001	N/A PROVIDE FINANCIAL ASSISTANCE	CHURCH	400.
CHEYENNE BEREAN CHURCH 5716 POWDERHOUSE RD CHEYENNE, WY 82009	N/A PROVIDE FINANCIAL ASSISTANCE	CHURCH	500.
HEART MOUNTAIN - CPC PO BOX 3185 CODY, WY 82414	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	10,000.
STANTON HEALTHCARE - CPC 4950 N. BRADLEY ST BOISE, ID 83714	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	10,000.
ALLIANCE DEFENSE FUND P.O. BOX 53007 PHOENIX, AZ 850723007	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	64,000.
CHILD EVANGELISM FELLOWSHIP P.O. BOX 162 CHEYENNE, WY 82003	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	4,700.
COMMON GROUND CONSULTANTS 750 2ND STREET NE, SUITE 150 HOPKINS, MN 55343	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	8,600.
CRISIS PREGNANCY CENTER 200 BRINKBY AVE. RENO, NV 89509	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	25,000.

THE RICHARDSON FAMILY FOUNDATION	ON		83-0310875
FATHERS OF THE FIELD 645 MAIN STREET LANDER, WY 82525	M/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	10,000.
FCCI P.O. BOX 735 GAINSVILLE, GA 30503	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	7,200.
FELLOWSHIP OF CHRISTIAN ATHLETES P.O. BOX 5037 CHEYENNE, WY 82003	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	16,000.
	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	27,000.
KCSP-FM- PILGRIM RADIO P.O. BOX 21888 CARSON CITY, NV 897211888	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	7,200.
NAVIGATORS P.O. BOX 6000 COLORADO SPRINGS, CO 80934	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	275,950.
PREGNANCY RESOURCE CENTER 1403 10TH AVE. GREELEY, CO 80631	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	11,000.
SIM-USA RECEIPTING DEPT. P.O. BOX 7900 CHARLOTTE, NC 28241	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	24,000.
THE SEED CO 3030 MATLOCK RD, SUITE 104 ARLINGTON, TX 790152934	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	2,000.
VENTURE INTERNATIONAL P.O. BOX 7396 TEMPE, AZ 85281	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	5,000.

THE RICHARDSON FAMILY FOUNDATIO	DN		83-0310875
WYCLIFF ASSOCIATES - JOE WALLER P.O. BOX 2000 ORANGE, CA 92669	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	4,800.
WYCLIFFE BIBLE TRANSLATORS P.O. BOX 628200 ORLANDO, FL 328628200	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	17,500.
YOUNG LIFE P.O. BOX 2920 COLORADO SPRINGS, CO 80901	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	34,000.
RESOURCE EXCHANGE INT'L 5446 N ACADEMY BLVD COLORADO SPRINGS, CO 80919	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	1,800.
MISSION SOCIETY PO BOX 922637 NORCROSS, GA 30010	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	3,000.
MOM'S IN TOUCH PO BOX 1120 POWAY , CA 92074	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	5,000.
EMEU - LEONARD RODGERS 1565 E WARNER RD TEMPE, AZ 85284	N/A PROVIDE FINANCIAL ASSISTANCE	PUBLIC CHARITY	2,500.
TOTAL TO FORM 990-PF, PART XV, L	INE 3A		577,150.