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# Form 990-PF

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

OMB No 1545 0052

2011

Department of the Treasury Internal Revenue Service

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

For ca	endar year 2011, or tax year beginning	, 2011,	and ending			
	D O. KINGSTON FOUNDATION, IN	C.		Α	Employer identification num 20-4914701	nber
	SHOUP AVENUE O FALLS, ID 83402			В	Telephone number (see the 208-522-2365	instructions)
				С	If exemption application is	pending, check here
G Ch	eck all that apply Initial return	Initial Return of a form	ner public charity	İ	1 Foreign organizations, chec	
	Final return	Amended return			2 Foreign organizations meet	<u>.                                    </u>
H (	Address change	Name change (c)(3) exempt private for	oundation		here and attach computation	
	Section 4947(a)(1) nonexempt charitable to	rust Other taxable p	rivate foundation	E	If private foundation status	
	( 0 . 1 . 1	ounting method X Ca	ash Accrual	_	under section 507(b)(1)(A)	
<b>►</b> 5	11,036. (Part I,	Other (specify) column (d) must be on	cash basis)	F	If the foundation is in a 60 under section 507(b)(1)(B)	
Part		(a) Revenue and	(b) Net investme	nt	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces-	expenses per books	income		income	for charitable purposes
	sarily equal the amounts in column (a) (see instructions) )					(cash basis only)
	1 Contributions, gifts, grants, etc, received (att sch)	66,155.				- ,
	2 Ck if the foundn is not req to att Sch B					,
	3 Interest on savings and temporary cash investments					
	4 Dividends and interest from securities			•	DECEN	
	5a Gross rents b Net rental income	-			RECEIVE	D
R	or (loss)  6a Net gain/(loss) from sale of assets not on line 10			-		<u> </u>
E V	b Gross sales price for all assets on line 6a				AUG 1 3 201	2 0
Ē	7 Capital gain net income (from Part IV, line 2)				,	
N U	8 Net short-term capital gain 9 Income modifications		-	$\dashv$	OGDEN I	<del></del>
E	10 a Gross sales less returns and				OODEN, C	
	allowances b Less Cost of				<del> </del>	```
	goods sold		· · · · · · · · · · · · · · · · · · ·		`	
	c Gross profit/(loss) (att sch)  11 Other income (attach schedule).					
					<u> </u>	
	12 Total. Add lines 1 through 11	66,155. 0.		0.	0.	
	13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages	<u> </u>			<del> </del>	<u> </u>
	15 Pension plans, employee benefits				<u> </u>	<del> </del>
А	16a Legal fees (attach schedule)					
D M	<b>b</b> Accounting fees (attach sch) SEE ST 1	1,021.	-			1,021.
N	c Other prof fees (attach sch)					
PS	17 Interest					
O I SE T R A A T T	18 Taxes (attach schedule)(see instrs) 19 Depreciation (attach					
1 1	sch) and depletion					
N V	20 Occupancy 21 Travel, conferences, and meetings	1,219. 23,643.			<del> </del>	1,219. 23,643.
	21 Havel, contenences, and meetings	23,043.				23,043.
A E	23 Other expenses (attach schedule)					
N N	SEE STATEMENT 2	3,384.				3,384.
A E N X D P E N S S E S	24 Total operating and administrative expenses. Add lines 13 through 23	29,267.				29,267.
_	25 Contributions, gifts, grants paid PART XV	30,771.	,		*	30,771.
	26 Total expenses and disbursements. Add lines 24 and 25	60,038.		0.	. 0.	60,038.
	27 Subtract line 26 from line 12:	00,030.			7	30,030.
	a Excess of revenue over expenses and disbursements	6,117.	·			
	b Net investment income (if negative, enter -0 ).	. 0,111.	<del> </del>	0 .		
	C Adjusted net income (if negative, enter -0 )	,			0.	

C Adjusted net income (if negative, enter -0 )

BAA For Paperwork Reduction Act Notice, see instructions.

TEEA0504L 12/05/11

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COLLI	330-	PP (2011) DAVID O. KINGSION FOUNDATION, INC.	•	20-49	14701 Page 2
Párt	il	Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only (See instructions)	Beginning of year (a) Book Value	End of <b>(b)</b> Book Value	f year (c) Fair Market Value
	1		(2) 20011 10100	(-)	(a) t all that talde
	2	Savings and temporary cash investments	11,082.	10,606.	10,606.
		Accounts receivable	11,002.	10,000.	10,606.
	3			,	, '
		Less allowance for doubtful accounts			
	4	Pledges receivable			-
	_	Less allowance for doubtful accounts			
	5	Grants receivable		<del></del>	
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)			
S		Less allowance for doubtful accounts ►			
Š	8	Inventories for sale or use			
A S S E T S	9	Prepaid expenses and deferred charges		105.	105.
Ś	10 a	Investments – U.S. and state government			
		obligations (attach schedule)			
	t	Investments — corporate stock (attach schedule)			
		: Investments — corporate bonds (attach schedule)		· · · · · · · · · · · · · · · · · · ·	
	11	Investments – land, buildings, and	•	·	,
		equipment basis			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation	,	•	
		(attach schedule)			
	15	Other assets (describe ► SEE STATEMENT 3 )	767.	325.	325.
	16	Total assets (to be completed by all filers –	11 040	11 026	11 006
		see the instructions Also, see page 1, item I)	11,849.	11,036.	11,036.
ì	17	Accounts payable and accrued expenses	16,338.	9,391.	,
À	18	Grants payable			
В	19	Deferred revenue		<del></del>	
Ĺ	20	Loans from officers, directors, trustees, & other disqualified persons		<del>-</del>	
T	21	Mortgages and other notes payable (attach schedule)			
ı	22	Other liabilities (describe			j
E S	22	Total liabilities (add lines 17 through 22)	16,338.	9,391.	
э	23	Foundations that follow SFAS 117, check here	10,330.	3,331.	1
		and complete lines 24 through 26 and lines 30 and 31.			- ,
ΝF	24	Unrestricted			
N F E U T N	25	Temporarily restricted		<del></del>	1:
ח		Permanently restricted			
A B S A E L T A	-				1
SB		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ĔĹ	27	Capital stock, trust principal, or current funds			
T A S N	27	· · · · · · · · · · · · · · · · · · ·			-
С	28	Paid-in or capital surplus, or land, building, and equipment fund	4 400	1 645	· ·
O E R S	29	Retained earnings, accumulated income, endowment, or other funds	-4,489.	1,645.	
к 5	30	Total net assets or fund balances (see instructions)	-4,489.	1,645.	-
	31	Total liabilities and net assets/fund balances (see instructions)	11,849.	11,036.	
Par	t III	Analysis of Changes in Net Assets or Fund Balance		12,000.	1
				roo with	
1		I net assets or fund balances at beginning of year — Part II, colu of-year figure reported on prior year's return)	min (a), line 30 (must ag	ree with	-4,489.
2		er amount from Part I, line 27a		2	6,117.
3		increases not included in line 2 (itemize)   SEE STATEMENT	4	3	17.
4		lines 1, 2, and 3		<del>-</del> <del>-</del> 4	1,645.
5		ases not included in line 2 (itemize)		5	1,043.
		I net assets or fund balances at end of year (line 4 minus line 5)	- Part II column (h) 1:	<del> </del>	1,645.
<u> </u>	1010	The bases of land balances at end of year (line 4 minus line 5)	- $i$ art ii, coluitiii (0), iii	iie su j <b>o</b>	1,045.

(a) List and describ	Losses for Tax on Investmen e the kind(s) of property sold (e g , r se, or common stock, 200 shares ML	eal estate.	(b) How acquired P — Purchase	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
		,	D — Donation		
b				<del> </del>	
c					
d					
е				<del>                                     </del>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sa		(h) Gain or (e) plus (f) m	
a				- · · · · · · · · · · · · · · · · · · ·	
b				, <u>, , , , , , , , , , , , , , , , , , </u>	
С					
d					
e					<del></del>
	ring gain in column (h) and owned by			(I) Gains (Col	umn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a	ny th	gain minus column (l ian -0-) or Losses (fi	rom column (h))
ab					
С					
d					
<u>e</u>					
2 Capital gain net income or (ne		enter in Part I, line 7 ter -0- in Part I, line 7	. 2		
3 Net short-term capital gain or	(loss) as defined in sections 1222(5)	and (6)			-
If gain, also enter in Part I. Jin	e 8, column (c) (see instructions) If	(loss) enter -0.	_		
ın Part I, line 8		(1033), critici 0	3		
Part V Qualification Unde (For optional use by domestic private	r Section 4940(e) for Reduce	<del> </del>			
If section 4940(d)(2) applies, leave was the foundation liable for the sectif 'Yes,' the foundation does not qua	tion 4942 tax on the distributable an		se period?	Yes	No
	in each column for each year, see th	<del></del>	g any entries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	<b>(c)</b> Net value of noncharitable-use as:		<b>(d)</b> Distribution lumn (b) divided	
2010		·			
2009				<del></del>	<del></del>
2008					
2007					
2006					
2 Total of line 1, column (d)			2		
3 Average distribution ratio for the	he 5-year base period — divide the to n has been in existence if less than !	otal on line 2 by 5, or by the			
•		•		-	
	ritable-use assets for 2011 from Part	X, line 5	4		
5 Multiply line 4 by line 3			5		<del></del>
6 Enter 1% of net investment in	come (1% of Part I, line 27b)		6		·
7 Add lines 5 and 6			7		
8 Enter qualifying distributions f	rom Part XII, line 4		8		
If line 8 is equal to or greater Part VI instructions	than line 7, check the box in Part VI,	line 1b, and complete that	part using a 1°	% tax rate See t	he

	990-PF (2011) DAVID O. KINGSION FOUNDATION, INC. 20-4914701			age 4
Par		;)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here		,	
_	Date of ruling or determination letter (attach copy of letter if necessary – see instrs)			
Ь	Domestic foundations that meet the section 4940(e) requirements in Part V,			0.
	check here ► and enter 1% of Part I, line 27b	-	•	
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)		*	-
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			•
_	foundations only Others enter -0-)			0.
_	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		_	0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			0.
6	Credits/Payments.			
	2011 estimated tax pmts and 2010 overpayment credited to 2011 6a		-	
	Exempt foreign organizations — tax withheld at source  6b			
	Tax paid with application for extension of time to file (Form 8868)  6c			
	Backup withholding erroneously withheld  Tatal available and assessed Add least Calling at Calling			^
_	Total credits and payments Add lines 6a through 6d			<u>0.</u>
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  Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		_	0.
10				
Par	Enter the amount of line 10 to be Credited to 2012 estimated tax    Refunded   11			
<u> I ai</u>	t vii-A   Statements Regarding Activities		V	Ma
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1 b		Х
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	ĺ		
С	Did the foundation file Form 1120-POL for this year?	1 c		Х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	ŀ		· .
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers.   \$\Bigs \\$\$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
-	If 'Yes,' attach a detailed description of the activities	-		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	27	X_
	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4b	N	/A
Э	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		t	
	<ul> <li>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?</li> </ul>	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	X	
8 a	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 General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	8b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5)		-	
10	for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If 'Yes,' complete Part XIV  Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names	9	<u> X</u>	
BAA	and addresses SEE STATEMENT 5	10	X n-pr	(2011)
	Fit.	1111 <b>33</b>	0-1 F	(/ ()     1 )

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	1 990-PF (2011) DAVID O. KINGSTON FOUNDATION, INC. 20-491470	1	Р	age <b>5</b>
Par	t VII-A Statements Regarding Activities (continued)	<del>, , ,</del>		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11	_	X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions).	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  Website address  N/A	13	Х	
14	The books are in care of ► JANAE KINGSTON  Located at ► 477 SHOUP AVENUE IDAHO FALLS ID  Telephone no ► 208-5  ZIP + 4 ► 83402	22-2	365	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year	N/A	<b>-</b> ►	N/A
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1 If 'Yes,' enter the name of the	10		
Par	t VII-B  Statements Regarding Activities for Which Form 4720 May Be Required	لــــــــــــــــــــــــــــــــــــــ	i	
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly).			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?  Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)  Yes X No			
ŀ	olf any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1 ь	N	/A
	Organizations relying on a current notice regarding disaster assistance check here			
•	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?	1 c		х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section $4942(j)(3)$ or $4942(j)(5)$ )			į.
ā	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011?  Yes X No			
	If 'Yes,' list the years ► 20, 20, 20	1		
l	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to		N	//3
	all years listed, answer 'No' and attach statement — see instructions ).	2b	IN	/A
,	c If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  20, 20, 20			ļ · .
3	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No			,
ł	b If 'Yes,' did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or			
	(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedulé Č, Form 4720, to determine if the foundation had excess business holdings in 2011)	3 b	N	/A
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	_4a		Х

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?
BAA

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Part VII-B Statements Regarding Activition		4/20 May Be Requ	ıırea (continued)	<del></del>
<ul><li>5a During the year did the foundation pay or incur</li><li>(1) Carry on propaganda, or otherwise attemp</li></ul>	=	n (section 4945(e))?	Yes X	No /
(2) Influence the outcome of any specific publ on, directly or indirectly, any voter registra	ic election (see section	4955), or to carry	Yes X	No l
(3) Provide a grant to an individual for travel,		ourposes?	Yes X	
(4) Provide a grant to an organization other th in section 509(a)(1), (2), or (3), or section	ian a charitable, etc, or 4940(d)(2)? (see instru	ganization described ictions)	Yes X	No
(5) Provide for any purpose other than religiou educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children (	, literary, or or animals?	Yes X	No No
b If any answer is 'Yes' to 5a(1)-(5), did any of to described in Regulations section 53 4945 or in (see instructions)?	he transactions fail to d a current notice regard	qualify under the except ling disaster assistance	ions	5b N/A
Organizations relying on a current notice regar	ding disaster assistanc	e check here	► _	
c If the answer is 'Yes' to question 5a(4), does t tax because it maintained expenditure response If 'Yes,' attach the statement required by Requ	sibility for the grant?	•	N/A Yes	No
6a Did the foundation, during the year, receive ar		, ,		
on a personal benefit contract? <b>b</b> Did the foundation, during the year, pay premi		-	☐ Yes X	No 6b X
If 'Yes' to 6b, file Form 8870	•			
7a At any time during the tax year, was the found	· -			No ,
b If 'Yes,' did the foundation receive any procee Part VIII Information About Officers, Di				M/A   7b    Emplovees.
and Contractors				
1 List all officers, directors, trustees, foundation				T
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
DAVID O KINGSTON	PRESIDENT	0.	0.	0.
5250 SOUTH RAINBOW UNIT #2109 LAS VEGAS, NV 89118	1.00			
JANAE KINGSTON	SECRETARY	0.	0.	0.
477 SHOUP AVE #207 IDAHO FALLS, ID 83402	1.00			
DEAN ARMSTRONG	DIRECTOR	0.	0.	0.
580 S. ORANGE	80.00	0.	0.	0.
LOS ANGELES, CA 90036	00.00			
BRANDON SNYDER	DIRECTOR	0.	0.	0.
5055 W. HACIENDA AVE.	1.00			
LAS VEGAS, NV 89118		<u> </u>		
2 Compensation of five highest-paid employee				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Total number of other employees paid over \$50,000	<u> </u> 		<b> </b>	0
BAA	TEEA0306L	12/05/11	· · · · · · · · · · · · · · · · · · ·	Form <b>990-PF</b> (2011)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Pa and Contractors (continued)	id Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'NONE.	
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	<del></del>
Total number of others receiving over \$50,000 for professional services	<b>▶</b> 0
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses ——————————————————————————————————
1 TO MAKE BETTER THE LIVING STANDARDS OF FINANCIALLY DISADVANTAGED	
INDIVIDUALS THROUGHOUT THE WORLD.	
2	60,037.
<b>*</b>	
3	
	<del></del>
4	
	· — —
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
N/A	
****	
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	▶ 0.
BAA	Form <b>990-PF</b> (2011)

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Form 990-PF (2011) DAVID O. KINGSTON FOUNDATION,	~~~

20-4914701

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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  b Average of monthly cash balances  c Fair market value of all other assets (see instructions)  d Total (add lines 1a, b, and c)  e Reduction claimed for blockage or other factors reported on lines 1a and 1c  (attach detailed explanation)  2 Acquisition indebtedness applicable to line 1 assets  3 Subtract line 2 from line 1d  4 Cash deemed held for charitable activities Enter 1-1/2% of line 3  (for greater amount, see instructions)  5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4  6 Minimum investment return. Enter 5% of line 5  Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations)	1 a 1 b 1 c 1 d 2 3 4 5 6 ating four 1	8,738. 430. 9,168. 0. 9,168. 138. 9,030. 452. ndations
c Fair market value of all other assets (see instructions) d Total (add lines 1a, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)  2 Acquisition indebtedness applicable to line 1 assets  3 Subtract line 2 from line 1d  4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)  5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 6 Minimum investment return. Enter 5% of line 5  Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations)	1 c 1 d 2 3 4 5 6 ating four	9,168.  0. 9,168.  138. 9,030. 452.
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Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations	ating fou	
	<del></del>	ndations
	1	
and certain foreign organizations check here ► X and do not complete this part )	_1	
1 Minimum investment return from Part X, line 6 N/A		
2a Tax on investment income for 2011 from Part VI, line 5	1	
b Income tax for 2011 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2c	
3 Distributable amount before adjustments Subtract line 2c from line 1	3	
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	<del></del>
6 Deduction from distributable amount (see instructions)	6	<del></del>
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	
Part XII Qualifying Distributions (see Instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	60,038.
<b>b</b> Program-related investments — total from Part IX-B	1 b	
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
Amounts set aside for specific charitable projects that satisfy the     a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule).	3ь	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	60,038.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	60,038.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether qualifies for the section 4940(e) reduction of tax in those years		
BAA		orm <b>990-PF</b> (2011)

Part XIII Undistributed Income (see instri	uctions)	N/A		
	<b>(a)</b> Corpus	(b) Years prior to 2010	<b>(c)</b> 2010	<b>(d)</b> 2011
1 Distributable amount for 2011 from Part XI, line 7	,	,		
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only				,
<b>b</b> Total for prior years 20 , 20 , 20	' -			
3 Excess distributions carryover, if any, to 2011				
a From 2006				•
<b>b</b> From 2007	•		•,	-
<b>c</b> From 2008	•	,	, '	, ,
<b>d</b> From 2009	•		•	
e From 2010				•
f Total of lines 3a through e			,	
4 Qualifying distributions for 2011 from Part			· · · · · · · · · · · · · · · · · · ·	
XII, line 4· ► \$				
a Applied to 2010, but not more than line 2a			,	
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)				
c Treated as distributions out of corpus		,	,	
(Election required – see instructions)				
d Applied to 2011 distributable amount	<u>'</u>			-
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the				
same amount must be shown in column (a) )	ı			
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	10		-	-
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b			, ,	
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				
d Subtract line 6c from line 6b Taxable amount — see instructions.	· , '			, , , , , , , , , , , , , , , , , , ,
e Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount — see instructions				
f Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2012	,			
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				-
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)				
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a			:	
10 Analysis of line 9				
a Excess from 2007			,	
<b>b</b> Excess from 2008				
c Excess from 2009				•
d Excess from 2010				
e Excess from 2011	1	•	-	1 .

SEE STATEMENT FOR LINE 2A

SEE STATEMENT FOR LINE 2A

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

3 Grants and Contributions Paid During the	Year or Ap <u>pro</u> ved for Fut	ure Payment	t	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient	Contibution	
Name and address (home or business)  a Paid during the year  SEE STATEMENT 7	substantial contributor	recipient	CONTIDUCTOR	
		<u> </u>	<u> </u>	
Total b Approved for future payment		Τ	<u>► 3</u> ;	a 30,771.
Total			▶ 3	Ы

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

Enter aross	s amounts unless otherwise indicated	Unrelate	d business income	Excluded by	section 512, 513, or 514	
	ram service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (See instructions)
	an service revenue.			code		
b						
c						
d						
	<del></del>					
	and contracts from government agencies			+		
-	bership dues and assessments			1		
	it on savings and temporary cash investments			14		
4 Divide	ends and interest from securities					
	ental income or (loss) from real estate					
	financed property	-				
	ebt-financed property			+ +		
	ntal income or (loss) from personal property r investment income					<del> </del>
	r (loss) from sales of assets other than inventory					<del></del>
	ncome or (loss) from special events			1		
	s profit or (loss) from sales of inventory			+		
	revenue			1		
a		<u> </u>		1		
b						
				<del> </del>	· · · · · · · · · · · · · · · · · · ·	
e	A					
12 Subto	otal Add columns (b), (d), and (e)	1				
	Add line 12 columns (b) (d) and (e)		····		12	Δ
13 Total	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	ins )			13	0.
13 Total (See works	sheet in line 13 instructions to verify calculation		ichment of Even	nt Burnos		0.
13 Total (See works Part XVI	-B Relationship of Activities to the	Accompli		-	es	
13 Total (See works	-B Relationship of Activities to the	Accompli		-	es	
13 Total (See works Part XVI Line No.	sheet in line 13 instructions to verify calculation	Accompli		-	es	
13 Total (See works Part XVI Line No.	-B Relationship of Activities to the	Accompli		-	es	
13 Total (See works Part XVI Line No.	-B Relationship of Activities to the	Accompli		-	es	
13 Total (See works Part XVI Line No.	-B Relationship of Activities to the	Accompli		-	es	
13 Total (See works Part XVI Line No.	-B Relationship of Activities to the	Accompli		-	es	
13 Total (See works Part XVI Line No.	-B Relationship of Activities to the	Accompli		-	es	
13 Total (See works Part XVI Line No.	-B Relationship of Activities to the	Accompli		-	es	
13 Total (See works Part XVI Line No.	-B Relationship of Activities to the	Accompli		-	es	
13 Total (See works Part XVI Line No.	-B Relationship of Activities to the	Accompli		-	es	
13 Total (See works Part XVI Line No.	-B Relationship of Activities to the	Accompli		-	es	
13 Total (See works Part XVI Line No.	-B Relationship of Activities to the	Accompli		-	es	
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13 Total (See works Part XVI Line No.	-B Relationship of Activities to the	Accompli		-	es	
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13 Total (See works Part XVI Line No.	-B Relationship of Activities to the	Accompli		-	es	
13 Total (See works Part XVI Line No.	-B Relationship of Activities to the	Accompli		-	es	
13 Total (See works Part XVI Line No.	-B Relationship of Activities to the	Accompli		-	es	
13 Total (See works Part XVI Line No.	-B Relationship of Activities to the	Accompli		-	es	
13 Total (See works Part XVI Line No.	-B Relationship of Activities to the	Accompli		-	es	
13 Total (See works Part XVI Line No.	-B Relationship of Activities to the	Accompli		-	es	

# Form 990-PF (2011) DAVID O. KINGSTON FOUNDATION, INC. 20-4914701 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

BAA								_		(2011)
		IDAHO FALLS					Phone no (208	3) 529-	9276	<u> </u>
Use Or	-		ORUFF AVE	<del></del>				<u> </u>		
Prepar			PANY PLL	, ~~~~, (/ \				467399		
Paid	J. BRIAN HI	LL	J. в	FARCULL	$\mathcal{L}$	7/31/12	self employed	P0020	6294	
	Print/Type preparer's na	ame	Preparer	signature .	2-	Date	Check If	PTIN		1
	Signature of officer or trustee			Date		Title		- I (see Insi	Yes	)/     No
Here	grace 1			0-0	<u> </u>	PRESIDENT	U	preparer (see ins	shown	below
Sign	> Huao K	MOSTON	ノ	18-8-1	2 🕨	Secretar	40	May the this retu	n with ti	he I
	correct, and complete Declaratio	n or preparer (other tha	an taxpayer) is bas	ed on all informat	ion of which	preparer has any knowl	eage			
Ī	Under penalties of perjury, I decta correct, and complete Declaration	are that I have examine	ed this return, inclu	ding accompanyir	g schedules	and statements, and to	the best of my knowledge	e and belief,	it is true	,
	<del></del>									
N/A						<del> </del>	<del></del>			
NT / 3	(a) Name of organiza	tion	<b>(b)</b> Type	e of organiza	lion	(c	) Description of re	ationship		
<u> </u>	<del></del>		/LN Torri				\Danagarta (	-4		
	Yes,' complete the follow		or man accitor	. 501(6)(3)) (	360110	// JC/		Ye:	, (A)	110
Zaisi dec	he foundation directly or scribed in section 501(c)	r indirectly affiliat of the Code (oth	ed with, or rela	ated to, one of	or more ta	x-exempt organiz	zations	$\square_{\vee_{\wedge}}$	s [X]	No
	- <del> </del>	1							-	
<u></u>										
				···	$\perp$					
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		<del></del>								
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				<del></del>	_					
			<del></del>			······································	<u>-</u>			
N/A	" -			<u></u>	<u> </u>	,			. 3	
(a) Line r			noncharitable exem				sfers, transactions, and		ngemen	ts
any	transaction or sharing a	arrangement, sho	w in column (	d) the value of	of the goo	ds, other assets,	or services receive	ed_		
a it ti the	he answer to any of the goods, other assets, or	above is Yes, co services given by	ompiete the fol v the reporting	ilowing sched foundation	ule Colur	nn <b>(b)</b> should alw Idation received li	ays show the fair	market val et value in	ue of	
بالديا	ha amanina ta seri et il				1. 6.	<i>a</i>			_	_
<b>c</b> Sh	aring of facilities, equipm	nent, mailing lists	s, other assets	, or paid emp	loyees			1 c		Χ_
	Performance of service							1 b (6)		X
(5)	Loans or loan guarante	es						1 b (5)		X
(4)	Reimbursement arrange	ements						1 b (4)		X
	Rental of facilities, equi	•	assets					1 b (3)		X
	Purchases of assets fro			anization.				1 b (2)		X
	Sales of assets to a no							1 b (1)		X
	ner transactions									
	Other assets							1 a (2)		X
(1) Cash								1 a (1)	_	X
	insfers from the reporting	g foundation to a	noncharitable	exempt orga	nızatıon o	f				
	ating to political organiza									
des	scribed in section 501(c)	of the Code (oth	er than section	1 501(c)(3) or	ganızatıor	ns) or in section 5	527,	,		
1 Did	the organization directly	v or indirectly end	nage in any of	the following	with any	other organization	n	١.	Yes	No

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

Department of the Treasury Internal Revenue Service

## **Schedule of Contributors**

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

OMB No 1545 0047

2011

Maine of the organization		Employer Identification number
DAVID O. KINGSTON FOUNDATION,	INC.	20-4914701
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated	d 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 <b>Go Note</b> . Only a section 501(c)(7), (8), or (10) organization	eneral Rule or a Special Rule anization can check boxes for both the General Rule a	nd a Special Rule See instructions.
General Rule		
X For an organization filing Form 990, 990-E2 contributor (Complete Parts I and II)	Z, or 990-PF that received, during the year, \$5,000 or r	nore (in money or property) from any one
Special Rules		
509(a)(1) and 170(b)(1)(A)(vi), and receive	orm 990 or 990-EZ that met the 33-1/3% support test d from any one contributor, during the year, a contribu VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Par	ition of the greater of (1) \$5,000 or
For a section 501(c)(7), (8), or (10) organize total contributions of more than \$1,000 for the prevention of cruelty to children or anim	ation filing Form 990 or 990-EZ that received from any use <i>exclusively</i> for religious, charitable, scientific, literals Complete Parts I, II, and III	one contributor, during the year, ary, or educational purposes, or
contributions for use exclusively for religious if this box is checked, enter here the total of	ation filing Form 990 or 990-EZ that received from any is, charitable, etc, purposes, but these contributions discontributions that were received during the year for an unless the <b>General Rule</b> applies to this organization b	id not total to more than \$1,000  exclusively religious, charitable, etc.
religious, charitable, etc, contributions of \$	5,000 or more during the year	<b>▶</b> \$
990-PF) but it <b>must</b> answer 'No' on Part IV. Iin	y the General Rule and/or the Special Rules does not to e 2, of its Form 990, or check the box on line H of its lost filing requirements of Schedule B (Form 990, 990-E	Form 990-EZ or on Part L line 2 of its
BAA For Paperwork Reduction Act Notice, so 990EZ, or 990-PF.	ee the Instructions for Form 990, Sch	nedule <b>B</b> (Form 990, 990-EZ, or 990-PF) (2011)

Name of org. DAVTD	O. KINGSTON FOUNDATION, INC.	1	ridentification number
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional sp		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KINGSTON & ASSOCIATES MARKETING 477 SHOUP AVE, STE 207 IDAHO FALLS, ID 83402	\$30,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	KINGSTON AVIATION LLC 477 SHOUP AVE, STE 207 IDAHO FALLS, ID 83402	\$30,000 <u>.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	COVANTA ENERGY  445 SOUTH STREET  MORRISTOWN, NJ 07960	\$6 <u>,1</u> 55_	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

1 of Part 1

1 of

Page

1 to

1 of Part II

Name of organization
DAVID O. KINGSTON FOUNDATION, INC.

ige .

Employer identification number 20-4914701

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional	space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		\$\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		ss	
(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
		\$	
		7	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		T	

BAA

	(Form 990, 990-EZ, or 990-PF) (2011)			Page	1 to		art III
Name of organ	oration  Note: The state of the				20-4914	tification numb	er
Part III	Exclusively religious, charitable, et	c, individual contribution	s to secti	on 501(c)	(7), (8), or (	10)	
	organizations that total more than For organizations completing Part III, enter contributions of \$1,000 or less for the year Use duplicate copies of Part III if additional	total of exclusively religious, ch (Enter this information once So	arıtable, etc.		nd the followind the following the state of the s	ng line entry	N/A
(a)	(b)	(c)			(d)		
No. from Part I	Purpose of gift	Use of gift		Desc	ription of ho	w gift is held	d
	N/A						
	-						
		(e)					
		Transfer of gift					
	Transferee's name, addres	s, and ZIP + 4	Rela	tionship of	transferor to	transferee	
(a)	(b)	(c)		_	(d)		
No. from Part I	Purpose of gift	Use of gift		Desc	ription of ho	w gift is hel	d 
		· · · · · · · · · · · · · · · · · · ·					
						<del>-</del> -	
						<del></del>	
	(e)						
	Transfer of gift Transferee's name, address, and ZIP + 4			stionship of	transferor to	transferee	
	Transferee's fiame, address	- Reiz		transieror to	Hallsleiee		
					<del></del>		
	(h)	(0)		1	(4)		
(a) No. from	(b) Purpose of gift	(c) Use of gift		Des	(d) cription of ho	w aift is hel	Ч
Part I	r ar pose or gin						
				-			
			<del></del>				
	(e)						
	Transfer of gift Transferee's name, address, and ZIP + 4			ationship of	transferor to	transferee	
(a)	(b)	(c)		<del> </del>	(d)		
No. from	Purpose of gift	Use of gift		Des	cription of ho	w gift is he	ld
Part I				<del>                                     </del>			
				<del>                                     </del>			
					<del></del>		
		(e) Transfer of gift					
	Transferee's name, addres		Rel	ationship of	f transferor to	transferee	

2011	FEDERAL STATEMENTS	PAGE 1
	DAVID O. KINGSTON FOUNDATION, INC.	20-491470
STATEMENT 1 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES		
	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED (C) PER BOOKS INCOME NET INCOME  \$ 1,021. \$ \$ 0. \$ \$	(D) CHARITABLE PURPOSES  1,021. 1,021.
STATEMENT 2 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES	TO THE STATE OF TH	
BANK CHARGES MEETING EXPENSE MISCELLANEOUS POSTAGE SUPPLIES TELEPHONE	(A) (B) NET (C) EXPENSES INVESTMENT ADJUSTED PER BOOKS INCOME NET INCOME  \$ 1,137. 751. 670. 259. 27. 540.  TOTAL \$ 3,384. \$ 0. \$ 0. \$	(D) CHARITABLE PURPOSES 1,137. 751. 670. 259. 27. 540.
STATEMENT 3 FORM 990-PF, PART II, LINE 15 OTHER ASSETS		
DEPOSITS	$ \begin{array}{c c}  & & & & & & & & & & & & & & & & & & &$	R MARKET VALUE 325. 325.
STATEMENT 4 FORM 990-PF, PART III, LINE 3 OTHER INCREASES		- Angles
PRIOR YEAR ADJUSTMENTS	TOTAL \$	17. 17.

NAME OF SUBSTANTIAL CONTRIBUTOR ADDRESS OF SUBSTANTIAL CONTRIBUTOR

2011

#### FEDERAL STATEMENTS

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DAVID O. KINGSTON FOUNDATION, INC.

20-4914701

**STATEMENT 5 (CONTINUED)** FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

COVANTA ENERGY

445 SOUTH STREET MORRISTOWN, NJ 07960

KINGSTON AVIATION LLC

477 SHOUP AVE., STE 207 IDAHO FALLS, ID 83402

#### STATEMENT 6 FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

NAME:

DAVID O KINGSTON

CARE OF:

STREET ADDRESS:

CITY, STATE, ZIP CODE:

477 SHOUP AVE STE 207 IDAHO FALLS, ID 83402

TELEPHONE:

208-522-2365

FORM AND CONTENT:

GRANT APPLICATION COVERSHEET; A DESCRIPTION OF THE PROJECT; AN ITEMIZED PROJECT BUDGET SHOWING HOW MAJOR EXPENSES ARE ESTIMATED AND HOW FOUNDATION FUNDS ARE TO BE SPENT; DESCRIPTION OF THE ORGANIZATION REQUESTING FUNDS; LIST OF THE BOARD OF DIRECTORS; ORGANIZATIONS FINANCIAL STATEMENT; INFORMATION ABOUT THE ORGANIZATION'S FINANCIAL SUPPORT FOR THE INDIVIDUAL PROJECT; COPY OF IRS TAX EXEMPT LETTER; AND LETTER OF ENDORSEMENT FROM PERSON AUTHORIZED TO RECEIVE FUNDS.

SUBMISSION DEADLINES:

N/A

RESTRICTIONS ON AWARDS:

N/A

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

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	<u> </u>	AMOUNT
QUEST TO CURE SICKLE CELL FDN, INC 519 E THOMAS ROAD PHOENIX, AZ 85012	NONE	EXEMPT	IMPROVE CHILDREN'S QUALITY OF LIFE	\$	5,000.
JOE FOSS INSTITUTE 14415 N 73RD STREET #109 SCOTTSDALE, AZ 82260	NONE	EXEMPT	EDUCATE PEOPLE ABOUT THE US		3,000.

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# FEDERAL STATEMENTS

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DAVID O. KINGSTON FOUNDATION, INC.

20-4914701

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

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMQUNT
FRIEDREICH'S ATAXIA RESEARCH ALLIANCE PO BOX 1537 SPRINGFIELD, VA 22151	NONE	EXEMPT	RESEARCH AND EDUCATION TO HELP PROVIDE RELIEF FOR INDIVIDUALS SUFFERING FROM FRIEDREICH'S ATAXIA	\$ 5,000.
HELP, INC. 1465 HOOPES AVE. IDAHO FALLS, ID 83404	NONE	EXEMPT	TO PROVIDE SUPPLIES TO BETTER SERVE ABUSED CHILDREN	200.
IDAHO FALLS HISTORIC DOWNTOWN 450 B STREET IDAHO FALLS, ID 83402	NONE	EXEMPT	TO HELP SPONSOR A BIKE RACE TO HELP DOWN TOWN	452.
FAMILY CARE FOUNDATION PO BOX 1039 SPRING VALLEY, CA 91979	NONE	EXEMPT	TO PROVIDE HUMANITARIAN SERVICES IN DEVELOPING NATIONS, MAKE GRANTS AND PROVIDE TRAINING FOR GRASSROOTS ORGANIZATIONS IN THE DEVELOPING WORLD.	10,557.
GOLD RIVER HAWKS PO BOX 1152 GOLD RIVER, VCP1GO CANADA	NONE	EXEMPT	TO HELP SPONSOR A YOUTH SOFTBALL TEAM THAT PROMOTES TEAM COMPETITION AND SPORTSMANSHIP.	6,000.
MISCELLANEOUS INDIVIDUALS MISCELLANEOUS MISCELLANEOUS, NV MISC	NONE	NONE	TO PROVIDE FOOD AND OTHER ESSENTIALS TO INDIVIDUALS.	562.
			TOTAL	\$ <u>30,771.</u>

# (Rev January 2012

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

Department	of the	e Treasury
Internal Rev	enue	Service

OMB No 1545 1709

File a separate application for each return. If you are filing for an Automatic 3-Month Extension, complete only Part and check this box X If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part fon page 2 of this form). Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed'Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visitwww irs.gov/efile and click on e-file for Charities & Nonprofits. Rart Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension- check this box and complete Part I only All other corporations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or print DAVID O. KINGSTON FOUNDATION, INC. X 20-4914701 File by the due date for filing your return See Number, street, and room or suite number. If a P.O. box, see instructions Social security number (SSN) 477 SHOUP AVENUE instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions IDAHO FALLS, ID 83402 Enter the Return code for the return that this application is for (file a separate application for each return) 04 Application Return Application Return Is For Code Code Form 990 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 orm 990-E2 01 Form 4720 Form 990-PF 04 Form 5227 10 Form 990-T (section 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) Form 8870 12 The books are in the care of ► JANAE KINGSTON Telephone No. ► 208-522-2365 FAX No ► If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, In the compact of the group, check this box In and attach a list with the names and EINs of all members. check this box the extension is for. 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15\_\_\_\_, 20 12\_, to file the exempt organization return for the organization named above The extension is for the organization's return for X calendar year 20 11 or tax year beginning \_\_\_\_\_, 20 \_\_\_\_, and ending \_\_\_\_\_, 20 \_\_\_\_. 2 If the tax year entered in line 1 is for less than 12 months, check reason. Initial return Final return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 3a|\$ 0. b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 3Ы\$ 0.

payment instructions BAA For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev 1-2012)

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aution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for

c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions.