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

OMB No 1545-0052

Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements. Department of the Treasury Internal Revenue Service For calendar year 2011 or tax year beginning , and ending Name of foundation A Employer identification number DENNIS & PHYLLIS WASHINGTON FOUNDATION 36-3606913 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number P.O. BOX 16630 (406)523-1300 City or town, state, and ZIP code C if exemption application is pending, check here MISSOULA, MT 59808-6630 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return X Amended return Foreign organizations meeting the 85% test, 2. check here and attach computation Address change Name change H Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Accrual F If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here _ > L 436,814,858. (Part I, column (d) must be on cash basis) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements (a) Revenue and (c) Adjusted net (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) charitable purposi (cash basis only) expenses per books ıncome income 78,134,276 PER NAME AND THE 當過過一點 Contributions, gifts, grants, etc., received 是他是常用的可以 if the foundation is not required to attach Sch. B 2 Check 智能和网络中国 Interest on savings and temporary cash investments 437 437 5,645,410 5,645,410 是是一种的 Dividends and interest from securities **为是最多。** 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a **医神经性病 医多种性肠炎 医神经** 751 688 686. **特别的"现在"** 3,331,303. 理论理题表现 Capital gain net income (from Part IV, line 2) 是是自己的 his armin de 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances **经验产品的** DEPOSITION OF **建筑建筑** AND THE PROPERTY OF THE PARTY O b Less Cost of goods sold c Gross profit or (loss) 11 Other income Total Add lines 1 through 11 87,111,426 8,977,150 0 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 3,163 3,163. STMT 2 81,019 0 **b** Accounting fees 80,199. STMT 3 704,315 682,590 c Other professional fees 17,732. and Administrative RECEIVE STMT 4 17 Interest 18 Taxes 22,068 0. 19 Depreciation and depletion 20 Ocqueshcy JUL 0 2 2013 21 Travel, conferences, and meetings 31,665 0 31,665. 12,238 22 Printing and publications 0. 12,238. Other expenses UEN. 409,956 Ο. 409 206. Operating Total operating and administrative expenses. Add lines 13 through 23 1,264,424 682,590 554,203. 13,890,770. 20,388,792. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements 15,155,194 Add lines 24 and 25 682,590 20,942,995

> **达是1982年** 71,956,232

8,294,560

8,294,560.

27 Subtract line 26 from line 12:

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

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

Part III Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End (End of year			
1()	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	1	Cash - non-interest-bearing	600,775.	612,347	612,347.			
	2	Savings and temporary cash investments	98,240,361.	80,186,587	80,186,587			
	3	Accounts receivable ►	HART THE WAR TO THE	AFTA PURE TO BE THE PERSON OF THE	[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]			
		Less: allowance for doubtful accounts	Car Min and the Appendix of the second con-		5. aug. 18-12-19-19-19-19-19-19-19-19-19-19-19-19-19-			
	4	Pledges receivable ► 903,583.	THE WASHINGTON TO MAKE THE	S 'ASH CARE AND ASTRON	Particular designation of			
	'	Less; allowance for doubtful accounts	888,727.	903,583	903,583			
	5	Grants receivable		200,000	, , , , , , , , , , , , , , , , , , , ,			
	ء ا							
	١	Receivables due from officers, directors, trustees, and other						
		disqualified persons	· · · · · · · · · · · · · · · · · · ·	min water the transfer of the state of the s	The matter I was the trusted to the			
	'	Other notes and loans receivable	The state of the s	图于中国的中央的				
		Less: allowance for doubtful accounts			·			
ets	ı	Inventories for sale or use						
Assets	ı	Prepaid expenses and deferred charges	,					
٩	10a	Investments - U.S. and state government obligations STMT 6	129,884,410.	150,918,984.	150,918,984.			
	b	Investments - corporate stock STMT 7	16,913,429.	0.	0.			
	C	Investments - corporate bonds STMT 8	126,719,275.	202,111,856.				
	11	Investments - land, buildings, and equipment basis	第二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十					
		Less accumulated depreciation						
	12	Investments - mortgage loans						
	13	Investments - other STMT 9	0.	2,022,576.	2,022,576.			
	14	Land, buildings, and equipment basis	PORTURE TO THE PARTY.	THE RESERVE THE PROPERTY OF THE PARTY OF THE				
	'		The state of the s	E-respondent in the same and a second				
	4.	Less accumulated depreciation Other assets (describe ► EXCISE TAX RECEIVABLE)	0.	50 025	E0 025			
	15	Other assets (describe Except TAX RECEIVABLE)	ļ	58,925.	58,925.			
		Takal and A. (A. b. and and A. all Charles	252 046 055	426 044 050	426.044.050			
	16	Total assets (to be completed by all filers)	373,246,977.	436,814,858.	436,814,858.			
	1	Accounts payable and accrued expenses	40,781.	20,580.				
	18	Grants payable	8,410,564.	1,897,542.				
ΘS	19	Deferred revenue		····				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons						
gp	21	Mortgages and other notes payable						
_	22	Other liabilities (describe STATEMENT10	109,732.	12,725.				
	23	Total liabilities (add lines 17 through 22)	8,561,077.	1,930,847.				
		Foundations that follow SFAS 117, check here						
		and complete lines 24 through 26 and lines 30 and 31.						
Ses	24	Unrestricted	364,685,900.	434,884,011.				
au	25	Temporarily restricted		· · · · · · <u> </u>				
Bal	26	Permanently restricted						
힏		Foundations that do not follow SFAS 117, check here						
Ē		and complete lines 27 through 31.						
៰	97							
ets	27	Capital stock, trust principal, or current funds						
Net Assets or Fund Balanc	28	Paid-in or capital surplus, or land, bldg., and equipment fund			AT THE RESERVE OF THE			
et A	29	Retained earnings, accumulated income, endowment, or other funds	254 505 200	104 004 044				
ž	30	Total net assets or fund balances	364,685,900.	434,884,011.				
				İ				
	31	Total liabilities and net assets/fund balances	373,246,977.	436,814,858.				
P	ärt?	Analysis of Changes in Net Assets or Fund B	alances					
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30					
		t agree with end-of-year figure reported on prior year's return)		1	364,685,900.			
		amount from Part I, line 27a	<u> </u>					
		Increases not included in line 2 (itemize)	2	71,956,232.				
		ines 1, 2, and 3		3	436,642,132.			
		eases not included in line 2 (itemize) UNREALIZED LOSS ON IN	Vectmente	. 4				
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		5	1,758,121. 434,884,011.			
6	ıvıal	net assets of futiu palatices at end of year (time 4 milius line 3) - Part II, Cl	numini (u), iiiie 30	٥	#7#,00#,UTT.			

Page 3

(a) List and descr	the the kind(s) of property sold (e.grehouse; or common stock, 200 sh	g., real estate,	t income	(b) Ho	ow acquired Purchase Donation		acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a PUBLICLY TRADED SECURI				1 0-	Donation			
b		•						
C				1				
d				1			-	
e							i	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				Sain or (loss) s (f) minus (
a 751,688,686.			748,357,3	383.				3,331,303.
b								
С								
d								
е							-	
Complete only for assets showing	g gain in column (h) and owned by	the foundation	on 12/31/69		(1)	Gains (0	Col. (h) gaın ı	minus
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any		col.		not less than (from col. (f	
a								3,331,303,
b			·					, , ,
C				_				
d		-						
е				_			-	
<u> </u>	C 15		_	\neg				
2 Capital gain net income or (net cap	oital loss) { If gain, also enter -0	r in Part I, line)- in Part I, line	7 7	<u>}</u>	2			3,331,303.
3 Net short-term capital gain or (los: If gain, also enter in Part I, line 8, 6		nd (6):		٦				
If (loss), enter -0- in Part I, line 8				<u> </u>	3		N/A	
Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	inve	stment Inc	ome		
If section 4940(d)(2) applies, leave th Was the foundation liable for the secti If "Yes," the foundation does not quali	on 4942 tax on the distributable am fy under section 4940(e). Do not co	mplete this pa	rt.					Yes X No
1 Enter the appropriate amount in e	ach column for each year; see instr	uctions before	making any entrie	es.				
(a) Base period years Calendar year (or tax year beginnin	g in) (b) Adjusted qualifying dis	tributions	Net value of no	(c) ncharita	able-use assets		Dıstrıbı (col (b) dıvı	(d) ition ratio ded by col. (c))
2010	20	718,865.			309,235,855			.067000
2009	15	,816,872.		:	249,468,427			.063402
2008	6	,013,636.		:	200,348,959		-	.030016
2007	1	,673,316.	<u> </u>		38,099,926			.043919
2006	2	,453,714.			19,860,285			.123549
2 Total of line 1, column (d)						2		.327886
3 Average distribution ratio for the 5	-year base period - divide the total o	on line 2 by 5,	or by the number	of years	3			
the foundation has been in existen		,				3		.065577
4 Enter the net value of noncharitable	e-use assets for 2011 from Part X,	line 5	-			4		371,718,847.
5 Multiply line 4 by line 3						5		24,376,207.
6 Enter 1% of net investment income	e (1% of Part I, line 27b)					6		82,946.
7 Add lines 5 and 6						7		24,459,153.
3 Enter qualifying distributions from	Part XII, line 4					8		20,942,995.
If line 8 is equal to or greater than See the Part VI instructions.	ine 7, check the box in Part VI, line	1b, and comp	lete that part using	g a 1% t	tax rate.			

Рą	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- see ir	nstru	ictio	ns)
1a	a 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)			Part of	J. PA
b	b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1%			165	,891
	of Part I, line 27b				1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
C	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	議後。	No. 27		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0
3	Add lines 1 and 2			165	,891.
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-			165	,891.
6	Credits/Payments:		1		15 - 34 h
a	a 2011 estimated tax payments and 2010 overpayment credited to 2011 6a 224,134	福業達		34	
b	b Exempt foreign organizations - tax withheld at source				
C	c Tax paid with application for extension of time to file (Form 8868)		不被		
	d Backup withholding erroneously withheld . 6d .	The state of the s			The state
7	Total credits and payments. Add lines 6a through 6d			224	,134.
	Enter any penalty for underpayment of estimated tax. Check here x if Form 2220 is attached				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9				
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			58	,243.
	Enter the amount of line 10 to be: Credited to 2012 estimated tax ▶ 58,243. Refunded ▶ 11	<u> </u>			0.
	art VII-A Statements Regarding Activities				
1a	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	ľ	4.34	Yes	No
	any political campaign?	1	1a		Х
þ	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		1b		х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			1	
	distributed by the foundation in connection with the activities.	5			
	c Did the foundation file Form 1120-POL for this year?		1c		х
đ	d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	1			
	(1) On the foundation. ► \$ 0. (2) On foundation managers. ► \$ 0.	ļ.			
е	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	F v			117
	managers. ▶ \$ 0.	Š	21.000 1000	-,6,6,9,94 	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	<u></u>	2	1P6	х
_	If "Yes," attach a detailed description of the activities.	7	24 V	4.0	Series .
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or	ş	高雄企		
4-	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	.	3		х
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	_	4a		Х
		/A	4b		
Ð	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5 ********	SERVET CO	X
	If "Yes," attach the statement required by General Instruction T.	ļ		1 (a)	
ō	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	1	美		72
	By language in the governing instrument, or By good to legislation that office wild a monday to a province with the control of the cont	80		3.00	202
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			The St	
7	remain in the governing instrument?	-	6	X	
	Did the foundation have at least \$5,000 in assets at any time during the year?	2	7	X	ECAL A
	If "Yes," complete Part II, col. (c), and Part XV.	Ě	EXI		
υa	t Enter the states to which the foundation reports or with which it is registered (see instructions) ▶	g			
h	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	F		. S.M.	
	of each state as required by General Instruction G? If "No," attach explanation	<u>ž</u>		347	
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	<u> </u>	8b	X	H_F 15.4
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV	1		(A) - 12.14	經過
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	F	9		
	בום מוץ ביי ספר שוני של היים ביים ביים ביים ביים ביים ביים ביים		10		<u> </u>

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	art VII-A Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of				Т
	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 advis	ory privileges?			†
	If "Yes," attach statement (see instructions)		12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	х	\vdash
	Website address Www.DPWFOUNDATION.ORG	• • •			
14	The books are in care of ELOISE JERGESON Telephone	no. > (406)523-	1300		
	Located at > 101 INTERNATIONAL DRIVE, MISSOULA, MT	ZIP+4 ▶598			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			•	$\overline{\Box}$
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15	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,	<u> </u>		Yes	No
	securities, or other financial account in a foreign country?		16		x
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign		编 点	· · · · · · · · · · · · · · · · · · ·	E 55 to
	country		7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	有意识	
Ŗ	Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		र्गित्व और जिल्ला	Yes	No
18	a During the year did the foundation (either directly or indirectly):		ry	自制 证	整領
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes 🗓 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?	Yes No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes 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		以為其	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		A. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		
	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			
t	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		性類		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?		1b	· · · · · · · · · · · · · · · · · · ·	X
	Organizations relying on a current notice regarding disaster assistance check here	▶□	100	語行	医
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	ı		認能	
	before the first day of the tax year beginning in 2011?	i	1c	ءة للتبة	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	ion		建的	
	defined in section 4942(j)(3) or 4942(j)(5)):			吃些	
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) begi	nning			
	before 2011?	Yes 🗴 No			
	If "Yes," list the years >				
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to inco	rrect	22		
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and a	tach		PANE.	
	statement - see instructions)	N/A	2b		12271032
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		met.		1704
	>				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
	during the year?	Yes 🗶 No			
b	olf "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified person	s after	機制		27 47 A
	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	Mark To		1. 1000
	of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedu	le C,			
	Form 4720, to determine if the foundation had excess business holdings in 2011)	N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	Ī	4a		х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable pur	pose that			隔詞
	had not been removed from jeopardy before the first day of the tax year beginning in 2011?	ľ	4b		X

4b x Form **990-PF** (2011)

(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 account, other allowances

(e) Expense account, other allowances

(f) Compensation

(h) Title, and average hours per week devoted to position

(g) Compensation

(h) Title, and average hours per week devoted to position

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Form **990-PF** (2011)

Form 990-PF (2011) DENNIS & PHYLLIS WASHINGTON FOUNDATION	36-3606	913 Page 7
Part VIII Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued)	ndation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, e	nter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
THE NORTHERN TRUST COMPANY		
50 SOUTH LASALLE STREET, CHICAGO, IL 60675	INVESTMENT FEES	676,059.
WASHINGTON BUSINESS SERVICES		
101 INTERNATIONAL DRIVE, MISSOULA, MT 59808	PROFESSIONAL SERVICES	182,415.
Total number of others receiving over \$50,000 for professional services		▶ 0
Part:IX:A Summary of Direct Charitable Activities		_
List the foundation's four largest direct charitable activities during the tax year. Include relevant st number of organizations and other beneficiaries served, conferences convened, research papers	atistical information such as the produced, etc.	Expenses
1 ADVENTURES OF THE MIND - PRIMARY PURPOSE OF THE EVENT IS TO		
INTRODUCE YOUNG ADULTS TO THE DECORATED SCHOLARS OF OUR		
TIME.		272,016.
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year	on lines 1 and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		

Form **990-PF** (2011)

►

Total. Add lines 1 through 3

Form 990-PF (2011)

B	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ındatıons, se	e 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	350,497,198.
b	Average of monthly cash balances	1b	26,882,342.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	377,379,540.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	377,379,540.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5,660,693.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	371,718,847.
6	Minimum investment return. Enter 5% of line 5	6	18,585,942.
Ŗ	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	
<u> </u>	Minimum investment return from Part X, line 6	1	18,585,942.
2a	Tax on investment income for 2011 from Part VI, line 5 2a 165,891.	200	
b	Income tax for 2011. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	165,891.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	18,420,051.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	18,420,051.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	18,420,051.
P	art XII Qualifying Distributions (see instructions)	, - ,	<u> </u>
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	ALL MAN	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	20,942,995.
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:		
a	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	20,942,995.
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	20,942,995.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for th	e section

Form **990-PF** (2011)

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
Distributable amount for	or 2011 from Part XI,		5. 15. 15. 15. 15. 15. 15. 15. 15. 15. 1		
line 7	,				18,420,051
2 Undistributed income, if an	y, as of the end of 2011	Control of the Contro	THE PROPERTY OF THE PARTY OF TH		
a Enter amount for 2010	only			0.	
b Total for prior years:		是是被特殊的证法。			
	.,		0.	是解除,但在是否是某种产品的	A TOWN
3 Excess distributions ca	irryover, if any, to 2011:			THE PROPERTY OF THE PARTY OF TH	
a From 2006					THE THE RESERVE THE THE THE THE THE THE THE THE THE TH
b From 2007		THE PARTY OF THE P			
c From 2008	1 640 500				*************************************
d From 2009	1,649,702. 5,360,862.				
e From 2010		7,010,564.			
f Total of lines 3a throug 4 Qualifying distributions		は明 前 所可 F あったいできます。	A THE THAT A PRINT AND		The state of the s
Part XII, line 4: ►\$	20,942,995.				
a Applied to 2010, but no					
b Applied to undistribute		AND THE PERSON OF THE PERSON O	E. S. S. T. S. S. A. S.		STATE OF THE WAS THE WAY
years (Election required			0.		
c Treated as distributions		8	FILL WALL SEE		
(Election required - see	· ·	0.			
d Applied to 2011 distrib		APPENDING THE		ELECTIVE SECTION	18,420,051.
e Remaining amount dis		2,522,944.			THE PARTY OF THE PARTY.
5 Excess distributions carryo (If an amount appears in co		0.	2007年中华中华中华中华中华中华中华中华中华中华中华中华中华中华中华中华中华中华中华	THE PERSONAL PROPERTY OF THE PARTY OF THE PA	0,
(If an amount appears in co must be shown in column (lumn (d), the same amount (a))	FINE WILLIAM	ALEKS TO THE SECOND	新疆南京河流的新江	
6 Enter the net total of e					
indicated below:					
a Corpus Add lines 3f, 4c, a	nd 4e Subtract line 5	9,533,508.			
b Prior years' undistribut	ted income. Subtract		!		
line 4b from line 2b			0.		
c Enter the amount of pr					
undistributed income for deficiency has been iss					
the section 4942(a) tax					
assessed			0.		
d Subtract line 6c from li					
amount - see instruction e Undistributed income f		医医神经神经 医原因氏性的	FREEL AND THE SERVEN	然是一点,但是一个人的人的人的人的人的人的人的人的人的人的人的人的人的人的人的人的人的人的人的	设置的12000 12000 12000 12000 12000 12000 12000 12000 12000 12000 12000 12000 12000 12000 12000 12000 12000 12000
4a from line 2a. Taxabl				0	
f Undistributed income f				THE REAL PROPERTY.	HIS-LAND TO THE STATE OF THE ST
lines 4d and 5 from line					
be distributed in 2012	o II. I III o di III odile III doc				0.
7 Amounts treated as dis	tributions out of	HE STORY AND MODE AND ADDRESS OF THE PERSONS AND ADDRESS.			医克萨特氏学 等等情况
corpus to satisfy requir					
section 170(b)(1)(F) or	• •	7,500.			
8 Excess distributions ca	rryover from 2006				
not applied on line 5 or	line 7	0.			
9 Excess distributions ca	arryover to 2012.				
Subtract lines 7 and 8 f	from line 6a	9,526,008.			
10 Analysis of line 9:					
a Excess from 2007		學的學學學			
b Excess from 2008					
c Excess from 2009	1,649,702.				
d Excess from 2010	5,360,862.				
e Excess from 2011	2,515,444.	2000年表演是		推翻。特別的最初發	的 是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个

Part XIV Private Operating I	-oundations (see II	nstructions and Part V	II-A, question 9)	N/A	
1 a If the foundation has received a ruling of	or determination letter tha	at it is a private operating			
foundation, and the ruling is effective fo	or 2011, enter the date of	the ruling	▶		
b Check box to indicate whether the foun	dation is a private operat	ing foundation described	ın section	4942(j)(3) or 49	42(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
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)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year					
listed		-		, , , , , ,	
c "Support" alternative test - enter					
(1) Total support other than gross					
investment income (interest, dividends, rents, payments on					
securities loans (section					
512(a)(5)), or royalties)					· · · · · · · · · · · · · · · · · · ·
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income		<u> </u>			
Part XV Supplementary Info			if the foundation	had \$5,000 or mo	re in assets
at any time during	the year-see inst	ructions.)			· .
1 Information Regarding Foundation	•				
a List any managers of the foundation wh	o have contributed more	than 2% of the total con	tributions received by the f	oundation before the close	e of any tax
year (but only if they have contributed r	nore man 45,000). (See :	section 507 (a)(2).)			
PHYLLIS J. WASHINGTON					
b List any managers of the foundation who other entity) of which the foundation ha	o own 10% or more of the	ne stock of a corporation	(or an equally large portion	n of the ownership of a pai	rtnership or
	sa 10% of greater intere				
NONE					
2 Information Regarding Contribut					
Check here if the foundation of the foundation makes gifts, grants, etc.	inly makes contributions	to preselected charitable	organizations and does no	of accept unsolicited reque	sts for funds. If
				ilpiete itellis za, u, c, aliu i	u.
a The name, address, and telephone num	uer or the person to who	iii applications should be	addressed:		
SEE STATEMENT 12					
	a submitted and informs	tion and materials there	havilet vestivetes		<u> </u>
b The form in which applications should b	e submitted and informa	mon and materials they s	modia incidae;		
c Any submission deadlines:	 				
d Any restrictions or limitations on award	s such as hy gengraphic	al areas, charitable fields	kinds of institutions, or of	her factore:	
a rany roombuons or minitations on award:	, such as by geographic	ai ai eas, citai habie 116105,	rangs of montanons, of Ot	noi iaciois.	

. . 1

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year 4H COUNCIL SWEET GRASS COUNTY NONE 170(B)(1)(A)(VI2011 FAM. SUMMER READING PROG PO BOX 1744 BIG TIMBER, MT 59011 5,000. A CAROUSEL FOR MISSOULA FOUNDATION 509(A)(2) BOO SEASON PASSES NONE 101 CAROUSEL DRIVE MISSOULA, MT 59802 5,000. A VOICE ART VISION & OUTREACH IN NONE 170(B)(1)(A)(VIARTIST IN CLASSROOM COMMUNITY EDUCATION PROJECT PO BOX 832 PABLO, MT 59855 10,000. 501(C)(3) 2011 HOLIDAY GIVING ACTION FOR EASTERN MONTANA, INC. NONE PO BOX 1309 GIFT GLENDIVE, MT 59330 1,000. ACTION FOR EASTERN MONTANA, INC. 501(C)(3) 2011 HOLIDAY GIVING NONE 110 SOUTH 1ST WEST GIFT MALTA, MT 59538 500 SEE CONTINUATION SHEET(S) Total ➤ 3a 20,388,792. Approved for future payment AMERICAN INDIAN BUSINESS LEADERSHIP NONE 509(A)(1) OR PROGRAM SUPPORT GALLAGHER BUSINESS BUILDING, SUITE 366 (A)(2) MISSOULA, MT 59812 10,000. BOYS & GIRLS CLUB OF YELLOWSTONE NONE 509(A)(1) OR PROGRAM SUPPORT COUNTY (A)(2) 505 ORCHARD LANE BILLINGS, MT 59101 10,000. BUTTE 4-C'S NONE 509(A)(1) OR PROGRAM SUPPORT 101 E. BROADWAY (A)(2) BUTTE MT 59701 5,000.

SEE CONTINUATION SHEET(S)

2,020,069.

▶ 3b

Total

Form 990-PF (2011) DENNIS & PHYLLIS W	ASHINGTON FOUND	ATION		36-36	506913 Page 12
Part XVI-A Analysis of Income-Pro	oducing Activitie	es			
Enter gross amounts unless otherwise indicated.	Unrelated	ousiness income	Excluded by section 512, 513, or 514		(e)
	(a) Business	(b)	Exclu-	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a					-
b					
С					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments _			14	437.	
4 Dividends and interest from securities			14	5,645,410.	
5 Net rental income or (loss) from real estate;	為語法國語	THE REPORT OF THE PARTY OF THE		是是的學術學的學	三十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property	. <u>L.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	-			
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	3,331,303.	
9 Net income or (loss) from special events					-
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c		······································			
d					
e	_				·
12 Subtotal. Add columns (b), (d), and (e)	是是是	0.	學	8,977,150.	0.
13 Total. Add line 12, columns (b), (d), and (e)		÷		13	8,977,150.
(See worksheet in line 13 instructions to verify calculation	ıs.)				
Part XVI-B Relationship of Activiti	es to the Accon	plishment of Ex	cemp	t Purposes	
		-			
Line No Explain below how each activity for which	income is reported in o	olumn (e) of Part XVI-A	contrib	uted importantly to the accom	plishment of
the foundation's exempt purposes (other	than by providing funds	or such purposes).			
		-			
					
					
· 				- ··-	
	 -				
-					
	 -				
					
					

36-3606913 Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

								Yes Yes		
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of									No	
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										
a Transfers from the reporting foundation to a noncharitable exempt organization of:										
(1) Cash										
(2) Other assets										
b Other transactions:										
	(1) Sales	s of assets to a noncharital	ble exempt organiza	ition				1b(1)	X	
	(2) Purci	hases of assets from a noi	ncharitable exempt (organization				1b(2)	<u>x</u> _	
	(3) Renta	al of facilities, equipment,	or other assets					1b(3)	<u>x</u>	
	(4) Reim	bursement arrangements	-					1b(4)	<u>x</u>	
	` '	s or loan guarantees						1b(5)	<u> </u>	
	` '	ormance of services or me	•	•				1b(6)	X	
		of facilities, equipment, ma			-			1c	X	
ď		•		•	dule. Column (b) should al	-	= :			
					ed less than fair market valu	ie in any transactioi	n or sharing arrangement, s	how in		
	<u>`</u>	d) the value of the goods,								
<u> </u>	ine no	(b) Amount involved	ļ		e exempt organization		n of transfers, transactions, and	sharing arrangem	ents	
1_		80,000.	MONTANA PRIMA	RY CARE AS	SOCIATION	SEE STATEM	MENT 13			
1_		750.	BUTTE CHAMBER	OF COMME	RCE					
		_						·		
				-						
							· -			
										
										
2 a	Is the four	ndation directly or indirect	lly affiliated with or	related to one	or more tax-exempt organi	zations described				
		501(c) of the Code (other	•			24110113 303011304	Γ	Yes X	□No	
h		omplete the following sch)(0)) or in sect	1011 327		_		_ 110	
	11 100, 00	(a) Name of org			(b) Type of organization		(c) Description of relations	hin		
_		N/A	amzanon -		(b) Type of organization		(e) Booking to the latter to			
		H/ A								
										
	Under	negatives of negative I decide	that I have Avamined th	is return, includin	g accompanying schedules and	statements and to the	hest of my knowledge			
<u> </u>	and h				n taxpayer) is based on all inform		w has any knowledge	y the IRS discuss irn with the prepar		
Się He	an	- 111/9/2012			1-01 10		sho	wn below (see ins		
пе	 	110 - 1000	Myn		5-31-63	· /	E DIRECTOR	Yes L	J No	
	Sign	nafture of officer of trustee		16	Date	Title	Chaote of DTIN			
Print/Type preparer's name Preparer's signature Date							Checkif PTIN			
1 cm ?							self- employed			
7-07-1								000565		
	eparer	Firm's name CLARK	NUBER 7		J		Firm's EIN ▶ 91-119	1016		
Us	e Only									
		Firm's address ► 109	00 NE 4TH STR	ZET, SUITE	3 1700					
		BEL	LEVUE, WA 980	04			Phone no. (425)45	54-4919		
							Fo	rm 990-PF (2011)	

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

Employer identification number

Name of the organization	Employer identification number						
DEN	36-3606913						
rganization type (check one):							
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
Note. Only a section 501(c)(General Rule	s covered by the General Rule or a Special Rule. 7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile. See instructions.					
For an organization contributor. Compl	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in mete Parts I and II.	oney or property) from any one					
Special Rules							
509(a)(1) and 170(b	c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the rego)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the of Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.						
total contributions	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, total 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.						
contributions for us If this box is check purpose. Do not co	c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contribute exclusively for religious, charitable, etc., purposes, but these contributions did not to ed, enter here the total contributions that were received during the year for an exclusive amplete any of the parts unless the General Rule applies to this organization because its, etc., contributions of \$5,000 or more during the year.	tal to more than \$1,000. ly religious, charitable, etc.,					
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), ut it must answer "No" on Part IV, line 2 of its Form 990-PF, to ertify 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) (2011)

Name of organization

Employer identification number

DENNIS & PHYLLIS WASHINGTON FOUNDATION

36-3606913

Partil	Contributors (see instructions) Use duplicate copies of Part I if additional	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DENNIS & PHYLLIS WASHINGTON P.O. BOX 16630 MISSOULA, MT 59808	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	P.O. BOX 16630 MISSOULA, MT 59808	\$73,936.	Person X Payroli Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	MODERN MACHINERY P.O. BOX 16660 MISSOULA, MT 59808	\$\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	MONTANA RAIL LINK P.O. BOX 16624 MISSOULA, MT 59808	\$ 781,442.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	MONTANA RESOURCES 600 SHIELDS AVENUE BUTTE, MT 59701	\$	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	P.O. BOX 3016 CHICAGO, IL 60654	\$	Person X Payroll

Employer identification number

DENNIS & PHYLLIS WASHINGTON FOUNDATION

36-3606913

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	rt 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
		 \$	
(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
		Cahadula B (Form 00	0 000 E7 a-000 DE\/0011\

Name of organization Employer identification number DENNIS & PHYLLIS WASHINGTON FOUNDATION 36-3606913 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter Part III the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (d) Description of how gift is held (c) Use of gift (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (d) Description of how gift is held (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Form 990-PF, Part VII-B, Line 5c - Expenditure Responsibility Statement

Recipient's Name and Address	NO. 1	Grant Amount	Date of Grant	Amount Expended	Verification Date
	-				
BUTTE CHAMBER OF COMMERCE					
1000 GEORGE STREET					
витте, мт 59701-3692		750.	12/15/11		
Purpose of Grant					
•					
FUNDS TO SUPPORT THE CHAMBER OF COM	MERCE 100TH ANNIVERSARY				
					
Date of Reports by Grantee	Diversions by Gra	antee			
NOT YET RECEIVED		OF OUR KNOWLEDG	E, NO PORTI	ON OF THE GRANT	?
	FUNDS WERE	DIVERTED			
Results of Verification					
					i
					ľ
					ſ
					ļ
					i

Form 990-PF, Part VII-B, Line 5c - Expenditure Responsibility Statement

Recipient's Name and Address N	0. 2	Grant Amount	Date of Grant	Amount Expended	Verification Date
HOS BROS. CONSTRUCTION, INC.					
PO BOX 1788					
WOODINVILLE, WA 98072		10,000.	12/02/11		
Purpose of Grant					
FUNDS TO PROVIDE HOLIDAY FOOD FOR MAL	TBY FOOD BANK.				
Date of Reports by Grantee	Diversions by Gra	antee			
NOT YET RECEIVED	TO THE BEST	OF OUR KNOWLEDG	E, NO PORTI	ON OF THE GRANT	
	FUNDS WERE	DIVERTED			
·					
Results of Verification					
					i
					ſ

Form 990-PF, Part VII-B, Line 5c - Expenditure Responsibility Statement

Recipient's Name and Address	NO. 3	Grant Amount	Date of Grant	Amount Expended	Verification Date
MONTANA PRIMARY CARE ASSOCIATION					
1805 EUCLID AVENUE					
HELENA, MT 59601		240,000	11/14/11	80,000.	
Purpose of Grant					

Purpose of Grant

DENTAL SCREENING TO LOW INCOME CHILDREN ACROSS THE STATE OF MONTANA.

THROUGH MONTANA PRIMARY CARE ASSOCIATION, THE FOUNDATION'S GRANT MONEY WAS
DISTRIBUTED TO HEALTH CLINICS IN MISSOULA, BOZEMAN, BILLINGS, GREAT FALLS,
LIBBY, BUTTE AND HELENA.

Date of Reports by Grantee	Diversions by Grantee
QTRLY REPORTS ON THE GRANTEE'S	TO THE BEST OF OUR KNOWLEDGE, NO PORTION OF THE GRANT
PROGRESS ARE RECEIVED (LAST REPORT	FUNDS WERE DIVERTED
12/29/11)	

Results of Verification

DENNIS & PHYLLIS WASHINGTON FOUNDATION

Form 990-PF, Part VII-B, Line 5c - Expenditure Responsibility Statement

Recipient's Name and Address NO. 4		Grant Amount	Date of Grant	Amount Expended	Verification Date
HOS BROS. CONSTRUCTION, INC SANTO HOS					
7733 W. BOSTIAN ROAD					
WOODINVILLE, WA 98072		10,000.	12/31/10	10,000.	
Purpose of Grant					
FUNDS TO PROVIDE FOOD, THROUGH MALTBY FOOD B		ENCY SHELTER,			
THROUGH SNOHOMISH COUNTY, TO FAMILIES IN CRI	SIS.				
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Date of Banaria by Cranton	Duamiene by Cre			·	
Date of Reports by Grantee	Diversions by Gra	OF OUR KNOWLEDGE	NO DODUT	ON OF MUR CRANIM	
11,0,2011	FUNDS WERE		, NO PORTI	ON OF THE GRANT	
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Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor 501(C)(3) 2011 HOLIDAY GIVING ACTION FOR EASTERN MONTANA, INC. NONE GIFT PO BOX 498 CIRCLE, MT 59215 500. 170(B)(1)(A)(VIBUY CPR ANYTIME KITS AMERICAN HEART ASSOCIATION NONE PO BOX 4002030 DES MOINES, IA 50340-2030 2,500. AMERICAN INDIAN BUSINESS LEADERS NONE 170(B)(1)(A)(VISTUDENT BASED AIBL U OF M GALLAGHER BUSINESS BLDG STE 366 CHAPTER'S MISSOULA, MT 59812 10,000. 170(B)(1)(A)(VITRIBAL COLL. SCHOLAR. AMERICAN INDIAN COLLEGE FUND NONE PROGRAM 8333 GREENWOOD BLVD. DENVER, CO 80221 10,000. 170(B)(1)(A)(VIJAPAN EARTHQUAKE AMERICAN NATIONAL RED CROSS & ITS NONE CONSTITUENT CHAPTERS AND BRANCHES RELIEF FUND 1300 28TH ST. SOUTH, 3RD FLOOR GREAT FALLS, MT 59405 10,000. AMERICAN RED CROSS NONE 170(B)(1)(A)(VI2011 DISASTER RELIEF 1300 28TH ST. SOUTH, 3RD FLOOR GREAT FALLS, MT 59405 10,000. ANACONDA MINISTERIAL PROJECT CARE NONE 170(B)(1)(A)(VI2011 HOLIDAY GIVING 709 EAST 3RD ST. GIFT 3,000. ANACONDA, MT 59711 ARLEE CDC THEATER PROJECT NONE 509(A)(2) MOON OVER MISSION DAM PO BOX 452 ARLEE, MT 59821 500. NONE ARLEE COMMUNITY DEVELOPMENT 170(B)(1)(A)(VIASSIST TO BUY SCHOOL CORPORATION SUPPLIES PO BOX 7436 HELENA, MT 59604 3,000. AWARE INC NONE 170(B)(1)(A)(VIHEAD START EARLY START 616 HELENA AVE. STE. 305 PROGRAM HELENA, MT 59601 4,500. 20,367,292. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient 170(B)(1)(A)(VIHOLIDAY GIVING BEARTOOTH HUMANE ALLIANCE NONE PO BOX 3223 RED LODGE, MT 59068 1,000. BEAVERHEAD COUNTY FOOD PANTRY INC NONE 170(B)(1)(A)(VIFOOD DISTRIBUTION 131 E. HELENA STREET DILLON, MT 59725 5,000. BELGRADE COMMUNITY LIBRARY FOUNDATION 170(B)(1)(A)(VIGRANT MATCH 106 N. BROADWAY STREET BELGRADE MT 59714 1,000. BIG BROTHERS SISTERS OF FLATHEAD NONE 170(B)(1)(A)(VIPROGRAM SALARY COUNTY ASSISTANCE 137 MAIN STREET KALISPELL, MT 59901 2,500. BIG BROTHERS & SISTERS OF BUTTE NONE 170(B)(1)(A)(VIGENERAL SUPPORT GRANT SILVER BOW INC. 605 WEST PARK BUTTE MT 59703 2,500. BIG BROTHERS & SISTERS OF MISSOULA NONE 170(B)(1)(A)(VIGENERAL SUPPORT TNC MISSOULA CO. 1520 SOUTH RUSSELL MISSOULA, MT 59801 2,500. BIG BROTHERS BIG SISTERS OF GALLATIN NONE 170(B)(1)(A)(VIGENERAL SUPPORT GRANT COUNTY 15 S. 8TH AVE. BOZEMAN, MT 59715 2,500. BIG BROTHERS BIG SISTERS OF HELENA NONE 170(B)(1)(A)(VIANNUAL SUPPORT GRANT INC. 34 WEST 6TH AVE., STE 1-C HELENA, MT 59601 2,500. BIG BROTHERS BIG SISTERS OF PARK CO NONE 170(B)(1)(A)(VIGENERAL SUPPORT GRANT 120 E. PARK ST. LIVINGSTON, MT 59047 2,500. BIG BROTHERS BIG SISTERS OF NONE 170(B)(1)(A)(VIVOLUNTEER SUPPLIES. YELLOWSTON COUNTY INC TRAINING 504 B NORTH 20TH ST. BILLINGS, MT 59101 2,500. Total from continuation sheets

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient 170(B)(1)(A)(VIONE WORLD, MANY BIG HORN COUNTY PUBLIC LIBRARY NONE STORIES 419 N CUSTER AVE HARDIN, MT 59034 2,000. BIG SKY INSTITUTE ADVANCE, OF NONE 509(A)(2) EARLY CARE & EDUCATION NONPROFITS STUDY PO BOX 1514 HELENA, MT 59624 10,000. BILLINGS FAMILY YMCA INC BILLINGS NONE 509(A)(2) YMCA FINAN, ASSISTANCE 402 N 32ND ST. FOR KIDS BILLINGS MT 59101-1273 5,000. NONE 170(B)(1)(A)(VIHOLIDAY GIVING BILLINGS FOOD BANK INC 2112 4TH AVE. N BILLINGS, MT 59103 10,000. BILLINGS YOUTH ORCHESTRA NONE 509(A)(2) CONDUCTORS EXP. PO BOX 80842 2,500. BILLINGS, MT 59108 BITTERROOT HUMANE ASSOCIATION NONE 509(A)(3) HOLIDAY GIVING 262 FAIRGROUNDS ROAD HAMILTON, MT 59840 1,000. BITTERROOT THERAPEUTIC RIDING NONE 170(B)(1)(A)(VISCHOLARSHIPS OLSON FARMS 599 POPHAM LANE CORVALLIS, MT 59828 2,500. BITTERROOT VALLEY CALVARY CHAPEL NONE CHURCH 2011 HOLTDAY GIVING 700 NORTH 4TH ST. GIFT HAMILTON, MT 59840 1,000. BOISE PHILHARMONIC ASSOC. INC. NONE 509(A)(2) ENSEMBLES OF THE 516 S. 9TH ST. SCHOOLS BOISE, ID 83702 10,000. BOX ELDER SCHOOL DISTRICT 13 & G NONE 170(B)(1)(A)(II21ST CENTURY BOX 205 MAIN STREET AFTERSCHOOL PROG BOX ELDER MT 59501 10,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to status of Amount any foundation manager Name and address (home or business) recipient or substantial contributor BOY SCOUTS OF AMERICA NONE 170(B)(1)(A)(VICAMPOREE SCOUTING 2011 1006 SADDLE DR. 3,500. HELENA, MT 59601 BOYS & GIRLS CLUB OF MISSOULA COUNTY NONE 170(B)(1)(A)(VIMCT CHRISTMAS PROG. 617 S. HIGGINS AVENUE GRANT MISSOULA, MT 59801 1,050. BOYS & GIRLS CLUB OF MISSOULA COUNTY NONE 509(A)(1) OR CHRISTMAS PROG. MCT 617 S HIGGINS (A)(2) 1,700. MISSOULA, MT 59801 BOYS & GIRLS CLUB OF MISSOULA COUNTY NONE 509(A)(1) OR AFTERSCHOOL PROGRAMS (A)(2) 617 S HIGGINS MISSOULA, MT 59801 10,000. BOYS & GIRLS CLUB OF RED LODGE & THE NONE 509(A)(2) SGPM PROGRAM FINAL BEARTOOTH FRONT CHECK PO BOX 11 RED LODGE, MT 59068 6,000. BOYS & GIRLS CLUB OF YELLOWSTONE NONE 170(B)(1)(A)(VIMEALS FOR STUDENTS COUNTY 505 ORCHARD LANE BILLINGS, MT 59101 10,000. BOYS AND GIRLS CLUB OF LEWISTOWN NONE 170(B)(1)(A)(VI PROJECT LEARN' 624 W WASHINGTON LEWISTOWN, MT 59457 7,192. BOZEMAN PUBLIC SHOOLS FOUNDATION INC NONE 509(A)(2) THE SPARK GRANT PO BOX 1803 PROGRAM BOZEMAN, MT 59771 2,500. BRADLEY ANGEL HOUSE 170(B)(1)(A)(VIEMERG. SHELTER YOUTH NONE 4548 N. ALBINA AVE, #101 SVCS PROG PORTLAND, OR 97217 5,000. BREAD BASKET INC NONE 501(C)(3) 2011 HOLIDAY GIVING PO BOX 346 GIFT RONAN, MT 59864 1,500. Total from continuation sheets

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Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient BUTTE CATHOLIC BOARD OF EDUCATION NONE 170 (B) (1) (A)ASSIST REFURBISHING GYM BUTTE CENTRAL HIGH SCHOOL (I) 3440 ANNE'S STREET BUTTE, MT 59701 10,000. BUTTE CHAMBER OF COMMERCE NONE 501(C)(6) C OF C 100TH 1000 GEORGE STREET ANNIVERSARY BUTTE, MT 59701-3692 750. BUTTE EMERGENCY FOOD BANK NONE 170(B)(1)(A)(VIHOLIDAY GIVING 1019 EAST 2ND STREET BUTTE, MT 59701 10,000. NONE BUTTE FAMILY YMCA 509(A)(2) MEMBERSHIP GRANTS TO 2975 WASHOE ST. FAMILIES BUTTE, MT 59701 25,000. BUTTE FAMILY YMCA NONE 509(A)(2) YOUTH FUNDS FOR YMCA 2975 WASHOE STREET PROGRAMS BUTTE, MT 59701 5,000. BUTTE FOOD BANK NONE 170(B)(1)(A)(VIFOOD BANK GRANT 602 E. ALUMINUM BUTTE, MT 59701 8,000. BUTTE RESCUE MISSION NONE 170(B)(1)(A)(VI2011 HOLIDAY GIVING 1204 E. SECOND ST. GIFT BUTTE, MT 59701 3,000. BUTTE RESCUE MISSION NONE 170(B)(1)(A)(VIMEALS FOR HOMELESS 1204 E. SECOND ST. PEOPLE BUTTE, MT 59701 5,000. BUTTE SYMPHONY ASSOCIATION NONE 509(A)(2) CHILDREN'S CONCERTS PO BOX 725 BUTTE, MT 59703 9,405. CAREER TRAINING INSTITUTE NONE 170(B)(1)(A)(VIINSPIRING YOUNG MINDS 347 N. LAST CHANCE GULCH CAMP HELENA, MT 59601 2,500. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution any foundation manager status of Name and address (home or business) or substantial contributor recipient 170(B)(1)(A)(IISCHOLARSHIPS CARROLL COLLEGE NONE 1601 NORTH BENTON AVE HELENA, MT 59625 5,000. NONE 170(B)(1)(A)(VI2011 HOLIDAY GIVING CARTER COUNTY FOOD PANTRY GIFT PO BOX 504 EKALAKA, MT 59324 500. CELEBRITY FIGHT NIGHT FOUNDATION INC. NONE 509(A)(2) CELEBRITY NIGHT FIGHT 2111 E. HIGHLAND AVE, STE 135 PHOENIX, AZ 85016 25,000. CHILD ABUSE PREVENT. CHILD & FAMILY RESOURCE COUNCIL, INC. NONE 509(A)(2) PROGRAM PO BOX 3805 MISSOULA, MT 59806 5,000. CHILDREN'S ONCOLOGY CAMP FOUNDATION NONE 170(B)(1)(A)(VICAMP FOR KIDS WITH CANCER PO BOX 1450 MISSOULA, MT 59806 15,000. 170(B)(1)(A)(VI2011 HOLIDAY GIVING CHINOOK FOOD PANTRY INC NONE GIFT PO BOX 262 CHINOOK, MT 59523 500. NONE CHOUTEAU COUNTY SEARCH AND RESCUE 509(A)(1) OR 2011 HOLIDAY GIVING PO BOX 459 (A)(2) GIFT FT. BENTON, MT 59442 500. CITY OF CUT BANK NONE 501(C)(3) HOLIDAY GIVING 113 EAST MAIN CUT BANK, MT 59427 500. CITY OF THOMPSON FALLS NONE GOV'T PLAYGROUND IMPROVEMENT PO BOX 99 THOMPSON FALLS, MT 59873 10,000. CLARK FORK COALITION NONE 509(A)(2) 2011 CLARK FORK RIVER PO BOX 7593 CLEANUP MISSOULA, MT 59807 750. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or Foundation show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor COLSTRIP FOOD BANK NONE 509(A)(1) 2011 HOLIDAY GIVING GIFT PO BOX 543 COLSTRIP, MT 59323 500. COLUMBIA FALLS FOOD BANK NONE 170(B)(1)(A)(VI2011 HOLIDAY GIVING GIFT PO BOX 1081 COLUMBIA FALLS, MT 59912 1,500. COMMITTEE FOR SAFE SWIMMING NONE 509(A)(1) OR PLAINS SWIM TEAM 501 CLAYTON ST (A)(2) ASSISTANCE PLAINS, MT 59859 10,000. COMMUNITY CUPBOARD NONE 509(A)(2) 2011 HOLIDAY GIVING 203 4TH AVENUE NORTH GIFT LEWISTOWN, MT 59457 3,000. 2011 HOLIDAY GIVING COMMUNITY FOOD BANK OF MINERAL COUNTY NONE 509(A)(1) PO BOX 46 GIFT SUPERIOR, MT 59872 1,000. COMMUNITY HARVEST INC NONE 501(C)(3) 2011 HOLIDAY GIVING GIFT PO BOX 314 THOMPSON FALLS, MT 59873 1,000. COMMUNITY HOPE, INC. NONE 170(B)(1)(A)(VI2011 HOLIDAY GIVING PO BOX 524 GIFT LAUREL, MT 59044 3,000. COMMUNITY SERVICES FELLOWSHIP NONE 509(A)(1) OR 2011 HOLIDAY GIVING 1419 MONTANA HWY 200 (A)(2) GIFT NOXON, MT 59853 500. COUNTY OF WIBAUX NONE 170(C)(1) 2011 HOLIDAY GIVING 102 MINGUS ROAD GIFT WIBAUX, MT 59353 500. CUSTER COUNTY FOOD BANK INC. NONE 501(C)(3) 2011 HOLIDAY GIVING 210 SOUTH WINCHESTER GIFT MILES CITY, MT 59301 3,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor DAVID FOSTER FOUNDATION, THE NONE 509(A)(2) FOR GENERAL SUPPORT 10960 WILSHIRE BLVD, SUITE 2150 LOS ANGELES, CA 90024 100,000. DEDMAN FOUNDATION NONE 170(B)(1)(A)(VIHOLIDAY GIVING 2400 HIGH STREET FORT BENTON, MT 59442 1,000. EAGLE MOUNT NONE 170(B)(1)(A)(VISUMMER CAMP SUPPORT 6901 GOLDENSTEIN LANE BOZEMAN, MT 59715 5,000. EDUCATION FOUNDATION FOR BILLINGS NONE 509(A)(2) READING ROCKS PROGRAM PUBLIC SCHOOLS 415 N. 30TH ST. BILLINGS, MT 59101 5,500. EQUINOX THEATRE COMPANY NONE 509(A)(2) SALARY ASSIST THEATER DIRECTOR 2304 N. 7TH AVE. BOZEMAN, MT 59715 10,000. EUREKA FOURSQUARE CHURCH NONE 170 (B) (1) (A)2011 HOLIDAY GIVING (I) GIFT PO BOX 1696 500. EUREKA, MT 59917 EVANGELICAL LUTHERAN CHURCH OF NONE 501(C)(3) 2011 HOLIDAY GIVING AMERICA GIFT PO BOX 574 CULBERTSON, MT 59218 500. EVERGREEN KIDS CORNER, INC. NONE 170(B)(1)(A)(VIPRESCHOOL PROGRAMS 201 S. 8TH ST. HAMILTON, MT 59840 1,500. FACE TO FACE CHRISTIAN MINISTRIES INC NONE 501(C)(3) 2011 HOLIDAY GIVING 11 MAXVILLE ROAD GIFT MAXVILLE, MT 59858 1,000. FAMILY PROMISE, INC. NONE 170(B)(1)(A)(VINTERFAITH HOSPITAL NETWORK 71 SUMMIT AVENUE SUMMIT, NJ 07901 10,000. Total from continuation sheets

Part-XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount contribution status of Name and address (home or business) or substantial contributor recipient NONE FLAGSHIP PROGRAM 509(A)(1) OR FLAGSHIP ACTIVITY 1325 WYOMING (A)(2) GRANT MISSOULA, MT 59801 45,000. FLATHEAD CO. AGENCY ON AGING NONE GOV'T BUY LABOR/MAT'LS-HOME REPATRS 160 KELLY ROAD KALISPELL, MT 59901 10,000. FLATHEAD FOOD BANK INC. NONE 501(C)(3) BUY STORE EQUIPMENT 105 6TH AVE. WEST KALISPELL, MT 59901 5,000. NONE FLATHEAD FOOD BANK INC. 501(C)(3) 2011 HOLIDAY GIVING GIFT 105 6TH AVE. WEST KALISPELL, MT 59901 7,500. FLATHEAD LUTHERAN BIBLE CAMP NONE 170 (B) (1) (A)FLATHEAD LUTHERAN (I) BIBLE CAMP 603 MAIN ST. KALISPELL, MT 59901 2,500. NONE 170(B)(1)(A)(VI5 STUDENT SCHOLARSHIPS FLATHEAD VALLEY COMMUNITY COLLEGE FOUNDATION INC. 777 GRANVIEW DR KALISPELL, MT 59901 5,000. NONE FLORENCE CRITTENTON HOME AND SERVICES 509(A)(2) TEEN MOM ASSISTANCE 901 NORTH HARRIS PROGRAM HELENA, MT 59601 10,000. FRIENDS TO YOUTH INC. NONE 170(B)(1)(A)(VIMENTAL HEALTH SVCS 2801 S. RUSSELL ST, STE 32 PROGRAM MISSOULA, MT 59801 10,000. FRIENDSHIP HOUSE OF CHRISTIAN SERVICE 501(C)(3) AFTERSCHOOL ENRICHMENT 3123 8TH AVENUE SOUTH PROGRAM BILLINGS, MT 59101 20,000. GALLATIN HISTORICAL SOCIETY NONE 509(A)(2) PIONEER MUSEUM 37 W MAIN OPERATIONS BOZEMAN, MT 59715 10,000. Total from continuation sheets

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to any foundation manager Amount status of contribution Name and address (home or business) recipient or substantial contributor GARDEN CITY HARVEST NONE 170(B)(1)(A)(VIYOUTH HARVEST PROJECT PO BOX 205 MISSOULA, MT 59806 10,000. GARDEN CITY TENNIS ASSOCIATION NONE 509(A)(1) OR YOUTH TENNIS PROGRAM PO BOX 5081 (A)(2) MISSOULA, MT 59806 1,000. GENERAL COUNCIL OF THE ASSEMBLIES OF NONE 501(C)(3) 2011 HOLIDAY GIVING STET. GOD PO BOX 767 PLAINS, MT 59859 1,500. 170(B)(1)(A)(VIASSISTANCE TO GREAT FALLS CHILDREN'S RECEIVING HOME NONE PO BOX 1061 NEGLECTED CHILDR GREAT FALLS, MT 59403 6,000. 501(C)(3) 2011 HOLIDAY GIVING GREAT FALLS COMMUNITY FOOD BANK INC NONE 1620 12TH AVENUE NORTH GIFT GREAT FALLS, MT 59401 7,500. 170(B)(1)(A)(VI2011 HOLIDAY GIVING GREAT FALLS RESCUE MISSION NONE GIFT 317 2ND AVE. SOUTH GREAT FALLS, MT 59103 1,500. GREAT FALLS SYMPHONY ASSOC INC. NONE 170(B)(1)(A)(VIPROVIDE PO BOX 1078 RESOURCES-GTFALLS SYMP GREAT FALLS, MT 59403 5,000. GREATER GALLATIN UNITED WAY INC NONE 170(B)(1)(A)(VIHEALTH SERVICE 1516 WEST BABCOCK #2 PROGRAMS BOZEMAN, MT 59715 3,000. GREATER MISSOULA FAMILY WMCA NONE 170(B)(1)(A)(VIPARTNERS FOR YOUTH 3000 S. RUSSELL STREET GRANT MISSOULA, MT 59801 10,000. HABITAT FOR HUMANITY MID YELLOWSTONE 170(B)(1)(A)(VIBUILD HOME FOR LOW INC NONE MATY VALLEY 201 N. 15TH ST. BILLINGS, MT 59101 5,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to status of Amount any foundation manager Name and address (home or business) recipient or substantial contributor HABITAT FOR HUMANITY MISSOULA INC NONE 170(B)(1)(A)(VIGRANT FOR 725 W. ALDER ST. #19 MATERIALS/SERVICES MISSOULA MT 59802-4099 10,000. HABITAT FOR HUMANITY OF RAVALLI CTY NONE 170(B)(1)(A)(VIBUILDING 5TH HOME IN COUNTY PO BOX 2221 HAMILTON, MT 59840 5,000. HANDS ACROSS THE SADDLE NONE 509(A)(2) SADDLE BROCK COMPETITION PO BOX 552 GREYBULL, WY 82426 5,000. 509(A)(2) HEART OF THE VALLY INC NONE HOLIDAY GIVING 1549 EAST CAMERON BRIDGE ROAD BOZEMAN MT 59718 1,000. HELENA EDUCATION FOUNDATION NONE 509(A)(2) GREAT IDEAS GRANTS P.O. BOX 792 HELEANA, MT 59624 3,000. HELENA FOOD SHARE INC NONE 501(C)(3) FOOD DISTRIBUTION 1616 LEWIS ST. HELENA, MT 59601 3,000. HELENA FOOD SHARE INC NONE 501(C)(3) 2011 HOLIDAY GIVING GIFT PO BOX 943 HELENA MT 59624 7,500. HELPING HANDS IN HARDIN INC NONE 509(A)(2) 2011 HOLIDAY GIVING GIFT PO BOX 125 HARDIN, MT 59034 1,000. HOLTER MUSEUM OF ART NONE 170(B)(1)(A)(VIHOLTER RAILROAD 12 EAST LAWRENCE EXHIBIT HELENA, MT 59601 2,000. HOLTER MUSEUM OF ART NONE 170(B)(1)(A)(VITRANSP FOR KIDS TO MUSEUM 12 EAST LAWRENCE 7,000. HELENA, MT 59601 Total from continuation sheets

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Y				-
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
HOMECOMING CLUB OF PONY	NONE	509(A)(1) OR	TENNIS/BB COURT	
РО ВОХ 654		(A)(2)	CONSTRUCTION	
PONY, MT 59747				5,500
HOPA MOUNTAIN	NONE	170(B)(1)(A)(VI	STORYMAKER'S PROJECT	
234 E. BABCOCK, SUITE E			GRANT	
BOZEMAN, MT 59715				7,500
HORATIO ALGER ASSOCIATION	NONE	170(B)(1)(A)(VT	FELLOWSHIP SUPPORT	
99 CANAL CENTER PLAZA	10112			
ALEXANDRIA, VA 22314				50,000.
WORLD 1440071 WAY		170/71/41/11/11	TEO DIGITALIO IMINAG	
HORATIO ALGER ASSOCIATION 99 CANAL CENTER PLAZA	NONE	1 /0(B)(1)(A)(VI	LEO DICAPRIO AWARDS 2011	
ALEXANDRIA, VA 22314				250,000.
NODATA ALGORIANIAN	YOME	170/70/11/11/31/77	DROCDAN EUROLING	
HORATIO ALGER ASSOCIATION 99 CANAL CENTER PLAZA	NONE	1/0(B)(1)(A)(VI	PROGRAM FUNDING	
ALEXANDRIA, VA 22314			_	287,500.
HORATIO ALGER ASSOCIATION	NONE	170(B)(1)(A)(VI	DRW ACHIEVEMENT	
99 CANAL CENTER PLAZA			SCHOLARSHIP	40.000.000
ALEXANDRIA, VA 22314				10,000,000.
HOS BROS. CONSTRUCTION, INC.	NONE	NON EXEMPT	FUNDS TO PROVIDE	
PO BOX 1788		ENTITY	HOLIDAY FOOD FOR	
WOODINVILLE, WA 98072		1	MALTBY FOOD BANK	10,000.
HUMAN RESOURCE COUNCIL - DISTRICT XII	NONE	509(A)(2)	BUTTE XMAS BENEFIT	
PO BOX 3486	10.11	[]	DOLLE MAND DENERTI	
BUTTE, MT 59701				15,000.
HUMAN RESOURCES DEVELOPMENT COUNCIL	NONE	501(C)(3)	2-11 HOLIDAY GIVING	
OF DISTRICT IX INC		1	GIFT	
602 BOND STREET				
BOZEMAN, MT 59715				7,500.
HUMAN RESOURCES DEVELOPMENT COUNCIL	NONE	501(C)(3)	2011 HOLIDAY GIVING	
OF DISTRICT IX INC			GIFT	
PO BOX 836				1 500
THREE FORKS, MT 59752 Total from continuation sheets		L		1,500.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient HUMAN RESOURCES DEVELOPMENT COUNCIL NONE 170(B)(1)(A)(VI2011 HOLIDAY GIVING OF DISTRICT IX INC GIFT 32 SOUTH TRACY BOZEMAN, MT 59715 2,500. HUMANE SOCIETY OF BEAVERHEAD COUNTY NONE 509(A)(1) OR HOLIDAY GIVING 80 LAGOON LANE (A)(2) DILLON, MT 59725 1,000. HUMANE SOCIETY OF NORTHWEST MONTANA NONE 509(A)(2) HOLTDAY GIVING PO BOX 221 KALISPELL, MT 59903 1,000. 170(B)(1)(A)(VIFOSTER/ADOPTIVE PARENT INTER-MOUNTAIN DEACONESS HOME FOR NONE PROGRAM CHILDREN 500 S. LAMBORN HELENA, MT 59601 10,000. IRWIN & FLORENCE ROSTEN FOUNDATION NONE 509(A)(2) STUDENT SCHOLARSHIPS INC. PO BOX 750 DARBY, MT 59829 5,000. 170(B)(1)(A)(IIKEVIN WASHINGTON JOHN WAYNE CANCER INSTITUTE NONE 1250 FOURTH STREET SPONSOR SANTA MONICA, CA 90401 20,000. JOLIET COMMUNITY CENTER INC NONE 501(C)(3) 2011 HOLIDAY GIVING PO BOX 230 GIFT JOLIET, MT 59041 500. KEEPING OUR KIDS FIRST NONE OUT OF SCHOOL CARE 509(A)(1) OR PROGRAM 2815 WILSON (A)(2) MILES CITY, MT 59301 10,000. KITTY KEEPERS INC. NONE 509(A)(2) HOLIDAY GIVING 600 23RD AVENUE WEST HAVRE, MT 59501 1,000. KOOTENAI PETS FOR LIFE NONE 509(A)(2) HOLIDAY GIVING PO BOX 1454 LIBBY, MT 59935 1,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) or substantial contributor recipient NONE 509(A)(2) TRANSP TO LAUREL ELEMENTARY PTA, INC. 410 COLORADO AVE TECH/AVIATION EVENT LAUREL, MT 59044 10,000. LEWIS & CLARK PLAYGROUND FUND NONE GOV'T HELP WITH PLAYGROUND 2901 PARK STREET RENOVAT. MISSOULA, MT 59801 5,000. LIBBY FOOD PANTRY INC. NONE 501(C)(3) 2011 HOLIDAY GIVING GIFT PO BOX 311 LIBBY, MT 59923 3,000. LILAC SERVICES FOR THE BLIND NONE 509(A)(2) INDEP. LIVING INSTR. PROGRAM 1212 N. HOWARD ST. SPOKANE, WA 99201 5,000. LIVING WATER OF THE EVANGELICAL NONE 501(C) (3) ALL-CITY BIKE CLINIC CHURCH OF NORTH AMERICA 4220 STATE AVENUE #4 BILLINGS, MT 59101 5,000. 170(B)(1)(A)(VI2011 HOLIDAY GIVING LIVINGSTON FOOD PANTRY OF PARK COUNTY NONE PO BOX 1646 GIFT LIVINGSTON, MT 59047 3,000. GOV'T LODGE GRASS HIGH SCHOOL JROTC NONE YOUNG LIFE/WYLD LIFE CAMPS 214 N. GEORGE STREET LODGE GRASS, MT 59050 7,500. MAIN STREET UPTOWN BUTTE INC NONE 509(A)(2) MT FOLK FESTIVAL 2011 PO BOX 696 BUTTE, MT 59703 50,000. MAIN STREET UPTOWN BUTTE INC NONE 509(A)(2) 2011 MT FOLK FESTIVAL PO BOX 696 BUTTE, MT 59703 50,000. NONE MATHCOUNTS FOUNDATION 509(A)(1) OR MATH RESOURCE MATERIAL PO BOX 20996 (A)(2) BILLINGS MT 59104-0996 2,500. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to status of Amount any foundation manager Name and address (home or business) recipient or substantial contributor MCT, INC. NONE 170(B)(1)(A)(VIMCT PERFORMANCE SUPPORT 200 N ADAMS STREET MISSOULA, MT 59802 53,750. MCT, INC. NONE 170(B)(1)(A)(VINEXTSTEP PREP ENDOWMENT 200 N ADAMS STREET MISSOULA, MT 59802 100,000. MEAGHER COUNTY NUTRITION COALITION NONE 501(C)(3) 2011 HOLIDAY GIVING GIFT PO BOX 34 WHITE SULPHER SPRINGS, MT 59645 500. MILE HIGH LITTLE LEAGUE(?) NONE 509(A)(2) LITTLE LEAGUE UNDRAISER 1741 CLEVELAND AVE. BUTTE, MT 59701 500. MISSION VALLEY FOOD PANTRY INC NONE 501(C)(3) 2011 HOLIDAY GIVING PO BOX 644 GIFT ST, IGNATIUS, MT 59865 1,000. MISSOULA 316 RESCUE MISSION NONE 170(B)(1)(A)(VI2011 HOLIDAY GIVING GIFT P.O. BOX 16833 3,000. MISSOULA, MT 59808 MISSOULA CIVIC SYMPHONY NONE 509(A)(2) YOUTH CONCERT SCHOLARSHIP 320 EAST MAIN MISSOULA, MT 59802 5,000. MISSOULA COUNTY LAW ENFORCEMENT YOUTH NONE 170(B)(1)(A)(V)MSLA LAW ENFORCE YOUTH CAMP CAMP 2340 MULLAN ROAD MISSOULA, MT 59808 10,000. MISSOULA EDUCATION FOUNDATION NONE 170(B)(1)(A)(VICREATIVE CLASSROOM PO BOX 1775 GRANTS PROG MISSOULA, MT 59806 2,500. MISSOULA EDUCATION FOUNDATION NONE 170(B)(1)(A)(VIGLOVES & HATS-MRL PO BOX 1775 MISSOULA, MT 59806 5,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) Recipient If recipient is an individual, Foundation Purpose of grant or show any relationship to status of contribution Amount any foundation manager Name and address (home or business) recipient or substantial contributor NONE 509(A)(1) OR ACTIVE 6 PROGRAM MISSOULA FAMILY YMCA 3000 RUSSELL STREET (A)(2) MISSOULA, MT 59801 17,000. MISSOULA FOOD BANK NONE 170(B)(1)(A)(VI2011 HOLIDAY GIVING 219 SOUTH 3RD WEST GIFT MISSOULA, MT 59801 7,500. MISSOULA FOOD BANK NONE 170(B)(1)(A)(VI2011 HOLIDAY GIVING GIFT 219 S 3RD STREET W MISSOULA, MT 59801 10,000. MISSOULA SCHOOL DISTRICT #1 NONE GOV'T GRADUATION MATTERS' DONATION 215 SOUTH SIXTH WEST MISSOULA MT 59801 50,000. MISSOULA URBAN DEMONSTRATION PROJECT NONE 509(A)(2) EDUCATIONAL DIRECTOR 629 PHILLIPS ST. FUNDS MISSOULA, MT 59802 2,500. MISSOULA YOUNG LIFE NONE 170(B)(1)(A)(I)WILD HORSE CANYON CAMP 7455 ROSEWOOD CT. GIFT 10,000. MISSOULA, MT 59808 MISSOULA'S CHALLENGE, INC. NONE 509(A)(1) OR START UP EXPENSES ASSISTANCE 1720 BROOKS ST. (A)(2) MISSOULA, MT 59801 2,500. MONDAK HUMANE SOCIETY INC NONE 170(B)(1)(A)(VIHOLIDAY GIVING PO BOX 1572 WILLISTON, ND 58802 1,000. MONTANA AMATEUR SPORTS INC NONE 509(A)(2) HEART & SOLE RACE BOX 1736 SPONSORSHIP BILLINGS, MT 59104 10,000. MONTANA BALLET COMPANY NONE 509(A)(2) CHILDREN'S MATINEE 521 EAST PEACH ST. SUPPORT BOZEMAN, MT 59715 5,000. Total from continuation sheets

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor MONTANA CHILDREN'S HOME & HOSPITAL 170(B)(1)(A)(IISMART BOARD NONE INTERACTIVE SYSTEM INC. PO BOX 5539 HELENA, MT 59604 10,000. 170(B)(1)(A)(VI2011 MT FESTIVAL OF MONTANA COMMITTEE FOR THE HUMANITIES NONE BOOKS 311 BRANTLY 5,000. MISSOULA, MT 59812 MONTANA CONSERVATION CORPS INC NONE 170(B)(1)(A)(VIFUNDING FOR MT YES 206 NORTH GRAND AVE EXPEDITION BOZEMAN, MT 59715 10,000. MT COUNCIL ON ECON. MONTANA COUNCIL OF ECONOMIC EDUCTION NONE 509(A)(2) 409 LINFIELD HALL EDUC BOZEMAN, MT 59717-2920 2,500. 170(B)(1)(A)(VIANNUAL CHEF'S GALA MONTANA FOOD BANK NETWORK, INC. NONE 5625 EXPRESSWAY SPONSORSHIP MISSOULA, MT 59808 2,000. 170(B)(1)(A)(VIFOOD BANK MONTANA FOOD BANK NETWORK, INC. NONE 5625 EXPRESSWAY 5,000. MISSOULA, MT 59808 MONTANA FOOD BANK NETWORK, INC. NONE 170(B)(1)(A)(VI2011 HOLIDAY GIVING GIFT 5625 EXPRESSWAY MISSOULA MT 59808 15,000. 501(C)(3) MONTANA FOODBANK NETWORK LETTER FROM NONE 2011 HOLIDAY GIVING SECRETARY OF STATE FROM 2006 GIFT PO BOX 459 GARDINER, MT 59030 500. MONTANA GAELIC CULTURAL SOCIETY NONE 509(A)(1) OR RI RAI MT IRISH PO BOX 3612 (A)(2) FESTIVAL BUTTE, MT 59702 500. MONTANA HISTORY FOUNDATION NONE 170(B)(1)(A)(VIMT RESEARCH STUDENT 225 NORTH ROBERTS ST. PRESENTERS HELENA, MT 59620 5,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient NONE 170(B)(1)(A)(VIGRANTING DREAMS FOR MONTANA HOPE PROJECT TLL KIDS PO BOX 5927 HELENA, MT 59604 5,000. MONTANA NON PROFIT ASSOCIATION NONE 509(A)(2) EXPENSE ASSISTANCE PO BOX 1744 HELENA, MT 59624 10,000. 509(A)(2) MONTANA NONPROFIT ASSOCIATION NONE SILVER SPONSOR PO BOX 1744 HELENA, MT 59624 1,000. GOV'T NONE DENTAL FAB'S FEES FOR MONTANA ORAL HEALTH FOUNDATION INC PATIENTS PO BOX 1154 HELENA, MT 59624 2,000. MONTANA OUTDOOR SCIENCE SCHOOL NONE 509(A)(2) PROGRAM COORDINATION PO BOX 502 BOZEMAN, MT 59771 10,000. MONTANA PRIMARY CARE ASSOCIATION NONE 501(C)(3) 3 YR GRANT FOR DENTAL 1805 EUCLID AVE HEALTH HELENA, MT 59601 80,000. MONTANA RESCUE MISSION, INC. NONE 170(B)(1)(A)(I)2011 HOLIDAY GIVING GIFT PO BOX 3232 BILLINGS, MT 59103 3,000. MONTANA RESCUE MISSION, INC. NONE 170(B)(1)(A)(I)REACH OUT PROGRAM PO BOX 3232 BILLINGS, MT 59103 5,000. MONTANA STATE LIBRARY NONE GOV'T PARENT/CHILD WORKSHOP PO BOX 201800 HELENA, MT 59620 10,000. NONE 170(B)(1)(A)(VI2011-2012 SCHOLARSHIPS MONTANA STATE UNIVERSITY BILLINGS FOUNDATION 1500 UNIVERSITY DRIVE BILLINGS, MT 59101 10,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient Foundation Purpose of grant or show any relationship to any foundation manager Amount contribution status of Name and address (home or business) or substantial contributor recipient MONTANA STATE UNIVERSITY FOUNDATION 170(B)(1)(A)(IV2011-2012 SCHOLARSHIPS NONE PO BOX 172750 BOZEMAN, MT 59717 10,000. MONTANA STATE UNIVERSITY FOUNDATION NONE 170(B)(1)(A)(IVMSIP SUMMER TOUR INC FUNDING PO BOX 172750 BOZEMAN, MT 59717 10,000. MONTANA STATE UNIVERSITY FOUNDATION NONE 170(B)(1)(A)(IVMSIP SUMMER TOUR FUND INC PO BOX 172750 BOZEMAN, MT 59717 10,000. MONTANA STATE UNIVERSITY FOUNDATION NONE 170(B)(1)(A)(IVPEOPLE'S WAY PROJECT INC PO BOX 174120 BOZEMAN, MT 59717-4120 10,000. MONTANA STATE UNIVERSITY FOUNDATION NONE 170(B)(1)(A)(IVGRANDPARENTS RAISING INC GRANDCHILDREN P.O. BOX 172750 BOZEMAN, MT 59717-4120 10,000. MONTANA STATE UNIVERSITY-NORTHERN NONE 170(B)(1)(A)(IV2011-2012 SCHOLARSHIPS FOUNDATION PO BOX 7751 HAVRE, MT 59501 10,000. MONTANA TECH FOUNDATION NONE GOV'T SEND KIDS TO SCIENCE 1300 W. PARK ST. FAIR BUTTE, MT 59701 5,000. MONTANA TECH FOUNDATION NONE 170(B)(1)(A)(IVKEVIN SHANNON 1300 WEST PARK ST. SCHOLARSHIP CLUB BUTTE, MT 59701-5997 1,950. MONTANA TECH FOUNDATION NONE 170(B)(1)(A)(IVFRANK & ANN GILMORE 1300 WEST PARK ST. RELAT. CENT. BUTTE, MT 59701 100,000. MONTANA TECH FOUNDATION NONE 170(B)(1)(A)(IV2011-2012 SCHOLARSHIPS 1300 WEST PARK ST. BUTTE, MT 59701 10,000. Total from continuation sheets

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Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or contribution show any relationship to status of Amount any foundation manager Name and address (home or business) recipient or substantial contributor MT DEPT OF PUBLIC HEALTH & HUMAN NONE GOV'T WOMENS HEALTH SVCS SCREENING GRANT 1400 BROADWAY HELENA, MT 59620-2951 10,000. MUSEUM OF THE ROCKIES 501(C)(3) MUSEUM PASSES-LOW INC NONE 600 W. KAGY BLVD. FAM BOZEMAN, MT 59717 4,000. MUSSELSHELL COUNTY FOOD BANK NONE 501(C)(3) 2011 HOLIDAY GIVING GIFT PO BOX 233 ROUNDUP, MT 59072 1,500. 170(B)(1)(A)(VIBURNS ST. SQUARE NORTH MISSOULA COMMUNITY DEVELOPMENT NONE CORPORATION BOXCAR KITCH. 819 STODDARD MISSOULA, MT 59802 5,000. NORTH VALLEY FOOD BANK 509(A)(3) FOOD BANK ASSISTANCE NONE 311 E. 3RD ST. WHITEFISH, MT 59937 5,000. NORTHWEST BURN FOUNDATION NONE 170(B)(1)(A)(VICAMP COST SUPPORT 1515 NW 52ND ST STE A SEATTLE, WA 98107 2,000. NORTHWEST MONTANA VETERANS STAND DOWN NONE 170(B)(1)(A)(IVHOLIDAY GIVING 1349 HIGHWAY 2 EAST KALISPELL, MT 59901 1,500. NURTURING CENTER, THE NONE 170(B)(1)(A)(VIEXPANSION OF PROGRAMS 146 THIRD AVENUE WEST KALISPELL, MT 59807 30,000. OREGON FOOD BANK INC NONE 509(A)(1) OR FOOD STUFFS 718 WEST BURNSIDE (A)(2) PORTLAND, OR 97209 5,000. OVERCOMERS CHURCH OF WOLF POINT NONE 509(A)(1) 2011 HOLIDAY GIVING MONTANA INCORPORATED GIFT PO BOX 1092 WOLFPOINT, MT 59201 1,500. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient 509(A)(1) OR HOLIDAY GIVING NONE PARTNERSHIP FOR ANIMAL WELFARE HUMANE (A)(2) 226 VIGILANTE DRIVE DEER LODGE, MT 59722 1,000. PAUL CLARK FAMILY PLACE FOUNDATION NONE 170(B)(1)(A)(VIUPGRADE HANDICAP ACCESS ROOM 201 S EXCELSIOR BUTTE, MT 59701 4,887. 501(C)(3) 2011 HOLIDAY GIVING PONDERA FOOD PANTRY INC. NONE 220 SOUTH FRONT CONRAD, MT 59425 1,500. NONE 509(A)(2) 2011 HOLIDAY GIVING POVERELLO CENTER INC GIFT PO BOX 7644 MISSOULA, MT 59802-4205 7,500. NONE 509(A)(2) BED BUG INFESTATION POVERELLO CENTER INC 535 RYMAN STREET 2,000. MISSOULA, MT 59802 PROJECT HOPE NONE 509(A)(2) 2011 HOLIDAY GIVING GIFT PO BOX 1443 COLUMBUS, MT 59019 1,000. 170(B)(1)(A)(VIRESTORE THEATRE FUNDS RIALTO COMMUNITY THEATER INC NONE PO BOX 874 DEER LODGE, MT 59722 10,000. RIMROCK HUMANE SOCIETY INC. NONE 509(A)(2) HOLIDAY GIVING PO BOX 834 ROUNDUP, MT 59072 1,000. RIVER DISCOVERY INCORPORATED NONE 170(B)(1)(A)(VISALMON RIVER TEEN PO BOX 712 ADVENT. PROG SALMON, ID 83467 3,000. ROCKY MOUNTAIN COLLEGE NONE 170(B)(1)(A)(II2011-2012 SCHOLARSHIPS 1511 POLY DRIVE BILLINGS, MT 59102 5,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) recipient or substantial contributor SALVATION ARMY MISSOULA RESIDENCES 509(A)(2) CLOTHES AND SHOES NONE 339 WEST BROADWAY STREET MISSOULA, MT 59807 10,000. SALVATION ARMY OF BUTTE NONE 509(A)(2) BACK TO SCHOOL CLOTHING ASSIST 121 E BROADWAY MISSOULA, MT 59701 2,000. SANDERS COUNTY ENVIRONMENTAL HEALTH NONE 509(A)(1) OR BACKPACK PROGRAM PO BOX 519 (A)(2) THOMPSON FALLS, MT 59873 10,000. SAVING AMERICA'S MUSTANGS NONE 170(B)(1)(A)(VISAVE AMERICA'S 2683 VIA DE LA VALLE #G313 MUSTANGS DEL MAR, CA 92014 50,000. 170(B)(1)(A)(IV2011 HOLIDAY GIVING SEELEY-SWAN COMMUNITY FOOD BANK INC NONE PO BOX 549 GIFT SEELEY LAKE, MT 59868 500. SILVER BOW 4-H LIVESTOCK NONE 509(A)(3) PURCHASE HOGS PO BOX 685 BUTTE, MT 59703 1,800. SILVER BOW HUMANE SOCIETY NONE 170(B)(1)(A)(VIHOLIDAY GIVING 699 CENTENNIAL BUTTE, MT 59701 1,000. SITRICT IV HUMAN RESOURCES NONE 501(C)(3) 2011 HOLIDAY GIVING DEVELOPMENT COUNCIL GIFT 2229 5TH AVENUE HAVRE, MT 59501 3,000. SOUTH VALLEY CHILD AND FAMILY CENTER NONE 509(A)(2) FOOD, SUPPLIES, 515 MADISON STREET SUPPORT HAMILTON, MT 59840 5,000. SPECIAL OLYMPICS COLORADO NONE 170(B)(1)(A)(VIPROGRAM SUPPORT PO BOX 2156 DENVER, CO 80201-2156 5,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor NONE 170(B)(1)(A)(VIBASKETBALL TOURN. SPECIAL OLYMPICS MONTANA INC SPONSORSHIP PO BOX 3507 GREAT FALLS, MT 59403 1,000. SPECIAL OLYMPICS MONTANA INC NONE 170(B)(1)(A)(VIANNUAL EVENTS GRANT PO BOX 3507 GREAT FALLS, MT 59403 25,000. 170(B)(1)(A)(VIMT SPORTS LEGENDS SPECIAL OLYMPICS MONTANA INC NONE 710 FIRST AVE. NORTH EVENT GREAT FALLS, MT 59401 2,500. NONE 170(B)(1)(A)(VIEMERG FOOD/CLOTHES LOW SPOKANE VALLEY PARTNERS INCOME P.O. BOX 141360 SPORANE, WA 99214-1360 5,000. SPONSOR - THE LITTLE FLOWER PARRISH NONE 501(C)(3) HOLIDAY GIVING PO BOX 3003 BROWNING, MT 59417 500. NONE ST. LUKE COMMUNITY HEALTHCARE 509(A)(2) MAMMOGRAM SCREENINGS FOUNDATION 107 6TH AVE. S.W. RONAN, MT 59864 5,000. NONE ST. PATRICK HOSPITAL FOUNDATION 170(B)(1)(A)(VITABLE TALK FUNDS 500 W. BROADWAY MISSOULA, MT 59802 10,000. 509(A)(1) OR STEVENS YOUTH CTR STEVENS YOUTH CENTER NONE PO BOX 843 (A)(2) RENOVATION WHITE SULPHER SPRINGS, MT 59645 5,000. TAMARACK GRIEF RESOURCE CENTER INC. NONE 170(B)(1)(A)(VIGRIEF SUPPORT PROGRAMS 516 S. ORANGE ST. MISSOULA, MT 59801 10,000. TETON COUNTY FOOD PANTRY INC NONE 170(B)(1)(A)(IV2011 HOLIDAY GIVING GIFT PO BOX 534 500. CHOTEAU, MT 59422 Total from continuation sheets

Supplementary Information Pärt XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount contribution status of Name and address (home or business) or substantial contributor recipient THE AMERICAN LUTHERAN CHURCH NONE 501(C)(3) 2011 HOLIDAY GIVING GIFT PO BOX 402 HARLEM, MT 59526 500. THE FRIENDSHIP CENTER OF HELENA INC. NONE 170(B)(1)(A)(VISHELTER SUPPORT 1430 SANDERS HELENA, MT 59601 1,000. 170(B)(1)(A)(VIHEALTH DEVELOPMENT THE GIRLS WAY INC NONE 2525 PALMER ST., STE. 1 PROGRAM 5,000. MISSOULA, MT 59808 PRESCRIPTION DRUG THE JADYN FRED FUND NONE 509(A)(2) GRANT P.O. BOX 235 10,000. MISSOULA, MT 59806 NONE 501(C)(3) FUND BACK PACK PROGRAM THE MINERAL COUNTY COMMUNITY FOUNDATION PO BOX 456 2,500. ALBERTON, MT 59820 THE MINERAL COUNTY COMMUNITY NONE 501(C)(3) 2011 HOLIDAY GIVING FOUNDATION GIFT PO BOX 456 1,000. ALBERTON, MT 59820 NONE 170(B)(1)(A)(VIUR VOLUNTEER/DECENT THE WORLD MUSEUM OF MINING РО ВОХ 33 PROGRAM BUTTE, MT 59701 8,847. NONE 170(B)(1)(A)(VIPARENTING SUPPORT THRIVE INC PO BOX 4325 GRANT BOZEMAN, MT 59772 10,000. TOBACCO VALLEY FOOD PANTRY NONE 509(A)(2) 2011 HOLIDAY GIVING GIFT PO BOX 714 EUREKA, MT 59917 500. GOV'T TOWN OF WEST YELLOWSTONE-FOOD BANK NONE 2011 HOLIDAY GIVING GIFT PO BOX 626 WEST YELLOWSTONE, MT 59758 500. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to status of contribution Amount any foundation manager Name and address (home or business) or substantial contributor recipient UNITED STATES FUND FOR UNICEF NONE 170(B)(1)(A)(VIUNICEF BALL 125 MAIDEN LANE NEW YORK, NY 10038 25,000. UNITED WAY OF BUTTE AND ANACONDA NONE 170(B)(1)(A)(VIHEALTH SERVICE PROGRAMS PO BOX 4447 BUTTE, MT 59702-4447 3,000. UNITED WAY OF LEWIS & CLARK AREA INC. NONE 170(B)(1)(A)(VIHEALTH SERVICE PROGRAMS PO BOX 862 HELENA, MT 59624 3,000. UNITED WAY OF MISSOULA COUNTY 170(B)(1)(A)(VIFLOOD RELIEF PLAN FOR NONE MISSOULA PO BOX 7395 MISSOULA, MT 59807-7395 2,500. UNITED WAY OF MISSOULA COUNTY 170(B)(1)(A)(VIHEALTH SERVICE NONE PO BOX 7395 PROGRAMS MISSOULA, MT 59807-7395 5,000. UNITED WAY OF YELLOWSTONE COUNTY NONE 170(B)(1)(A)(VIHEALTH SERVICE 2920 2ND AVE, NORTH PROGRAMS BILLINGS, MT 59101 3,500. UNIVERSITY OF COLORADO DENVER NONE GOV'T COLLEGE OF LIBERAL ARTS SCHOL. 1380 LAWRENCE STREET, SUITE 1325 DENVER, CO 80204 5,000. UNIVERSITY OF GREAT FALLS NONE 170(B)(1)(A)(IIANNUAL SCHOLARSHIP 1301 20TH ST SOUTH GRANT GREAT FALLS, MT 59405 5,000. UNIVERSITY OF MONTANA FOUNDATION NONE 170(B)(1)(A)(IVCHARLES & HELEN MILLER PO BOX 7159 SCHOLAR MISSOULA, MT 59807 8,055. UNIVERSITY OF MONTANA FOUNDATION NONE 170(B)(1)(A)(IVNATIVE AMER. GRADUATE FELLOWSH PO BOX 7159 MISSOULA, MT 59807 10,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient NONE UNIVERSITY OF MONTANA FOUNDATION 170(B)(1)(A)(IV2ND YR INTERNSHIP-AOM PO BOX 7159 MISSOULA, MT 59807 10,000. UNIVERSITY OF MONTANA FOUNDATION NONE 170(B)(1)(A)(IVODYSSEY OF THE STARS EVENT PO BOX 7159 MISSOULA, MT 59812 10,000. 170(B)(1)(A)(IVANNUAL SCHOLARSHIP UNIVERSITY OF MONTANA FOUNDATION NONE PO BOX 7159 GRANT MISSOULA, MT 59807 10,000. NONE 170(B)(1)(A)(IVHANDS ON HEALTH UNIVERSITY OF MONTANA FOUNDATION PO BOX 7159 MISSOULA, MT 59807 10,000. UNIVERSITY OF MONTANA FOUNDATION NONE 170(B)(1)(A)(IVFELLOWSHIPS IN HISTORY PO BOX 7159 ENDOW. MISSOULA, MT 59807 25,000. UNIVERSITY OF MONTANA FOUNDATION NONE 170(B)(1)(A)(IVPRESIDENTIAL PO BOX 7159 SCHOLARSHIP FUND MISSOULA, MT 59807 31,456. UNIVERSITY OF MONTANA WESTERN NONE 170(B)(1)(A)(IVSCHOLARSHIP GRANT FOUNDATION 710 S. ATLANTIC DILLON, MT 59725-3598 5,000. VALLEY COMMUNITY EMERGENCY FOOD BANK NONE 501(C)(3) 2011 HOLIDAY GIVING 501 COURT SQUARE BOX 9 GIFT GLASGOW, MT 59230 1,000. VANESSA BEHAN CRISIS NURSERY NONE 170(B)(1)(A)(VIEMERG RESPITE CARE 1004 E 8TH AVE svcs SPOKANE, WA 99202 5,000. VIGILANTE PLAYERS, INC. NONE 170(B)(1)(A)(VITHEATRICAL 111 S. GRAND AVE. SUITE 222B PERFORMANCES IN MT BOZEMAN, MT 59715 5,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to contribution Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient 509(A)(1) OR CAMP POSTCARD VOLUNTEERS OF AMERICA NONE (A)(2) 2822 3RD AVENUE N. SUITE 206 BILLINGS, MT 59101 5,000. WESTSHORE COMMUNITY ASSISTANCE NONE 509(A)(1) 2011 HOLIDAY GIVING GIFT PROGRAM PO BOX 192 LAKESIDE, MT 59922 1,500. 170(B)(1)(A)(VIFUTURES PROGRAM NONE WOMENS OPPORTUNITY & RESOURCE DEVELOPMENT, INC 2525 PALMER ST., STE 1 10,000. MISSOULA, MT 59808 WORLD AFFAIRS COUNCIL OF MONTANA NONE 170(B)(1)(A)(VIDISTINGUISHED SPEAKERS PROGRAMS 201 W MAIN ST STE 101 10,000. MISSOULA, MT 59802 170(B)(1)(A)(VIACADEMIC WORLD QUEST WORLD AFFAIRS COUNCIL OF MONTANA NONE 201 W. MAIN, SUITE 101 MISSOULA MT 59802 10,000. YAAK FOOD CUPBOARD - THE REMNANT NONE 509(A)(1) 2011 HOLIDAY GIVING GIFT CHURCH 34 RIVERVIEW DRIVE TROY, MT 59935 500. NONE FOOD BANK SUPPLIES YELLOWSTONE FOOD BANK 509(A)(1) OR 2112 FOURTH AVE. N (A)(2) 5,000. BILLINGS, MT 59103 YOUNG FAMILIES EARLY HEAD START NONE 170(B)(1)(A)(VIHEAD START PROGRAM 1020 COOK AVE. ASSISTANCE BILLINGS, MT 59102 25,000. 170(B)(1)(A)(I)PROGRAM SUPPORT YOUNG LIFE NONE PO BOX 547 BOZEMAN, MT 59771 50,000. NONE 170(B)(1)(A)(I)MSLA YOUNG LIFE CAMP YOUNG LIFE SCHOLAR. PO BOX 1413 MISSOULA, MT 59806 15,000. Total from continuation sheets

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or contribution show any relationship to status of Amount any foundation manager Name and address (home or business) or substantial contributor recipient 170(B)(1)(A)(I)PROGRAM SUPPORT NONE YOUNG LIFE WASHINGTON FAMILY RANCH 1750 SW SKYLINE BLVD #25 PORTLAND, OR 97221 350,000. YOUNG LIFE WASHINGTON FAMILY RANCH NONE 170(B)(1)(A)(I)PROGRAM SUPPORT 1750 SW SKYLINE BLVD #25 PORTLAND, OR 97221 500,000. NONE 170(B)(1)(A)(I)PROGRAM SUPPORT YOUNG LIFE WASHINGTON FAMILY RANCH 1750 SW SKYLINE BLVD #25 PORTLAND, OR 97221 660,000. YOUNG LIFE WASHINGTON FAMILY RANCH NONE 170(B)(1)(A)(I)PROGRAM SUPPORT 1750 SW SKYLINE BLVD #25 PORTLAND OR 97221 900,000. 170(B)(1)(A)(I)PROGRAM SUPPORT YOUNG LIFE WASHINGTON FAMILY RANCH NONE 1750 SW SKYLINE BLVD #25 PORTLAND, OR 97221 1,000,000. YOUNG LIFE WASHINGTON FAMILY RANCH NONE 170(B)(1)(A)(I)PROGRAM SUPPORT 1750 SW SKYLINE BLVD #25 PORTLAND, OR 97221 1,100,000. YOUNG LIFE WASHINGTON FAMILY RANCH NONE 170(B)(1)(A)(I)PROGRAM SUPPORT 1750 SW SKYLINE BLVD #25 PORTLAND, OR 97221 1,400,000. YOUNG LIFE WASHINGTON FAMILY RANCH NONE 170(B)(1)(A)(I)PROGRAM SUPPORT 1750 SW SKYLINE BLVD #25 PORTLAND, OR 97221 1,600,000. YOUNG MEN'S CHRISTIAN ASSOCIATION OF NONE 509(A)(2) YOUTH FUNDS FOR YMCA HELENA INC PROGRAMS 1200 N LAST CHANCE GULCH HELENA, MT 59601 5,000. YOUNG MUSICIANS CLUB NONE 509(A)(2) MUSIC EDUCATION GRANT PO BOX 4305 BUTTE, MT 59702 2,500. Total from continuation sheets

Supplementary Information Part XV Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor 170(B)(1)(A)(VIDIRECT SERVICES YOUNG WOMENS CHRISTIAN ASSN OF GREAT NONE ASSISTANCE FALLS 220 2ND ST. N GREAT FALLS, MT 59401 10,000. NONE PATHWAYS PROGRAM YOUNG WOMENS CHRISTIAN ASSOC OF 509(A)(2) MISSOULA 1130 W. BROADWAY MISSOULA, MT 59802 10,000. YOUTH HOMES NONE 170(B)(1)(A)(VIFOSTER FAMILY OUTREACH 550 N. CALIFORNIA MISSOULA, MT 59807 5,000. YOUTH MENTORING PROGRAM NONE 170(B)(1)(A)(VIMENTOR PROGRAM BOX 532 LEWISTOWN MT 59457 1,200. 170(B)(1)(A)(VICHILDCARE FOR 50 KIDS YWCA OF BILLINGS ENDOWMENT FOUNDATION NONE INC 909 WYOMING AVENUE BILLINGS, MT 59101 10,000. NONE 509(A)(2) LITTLE ARTISTS PROGRAM ZOOTOWN ARTS COMMUNITY CENTER 235 N. 1ST STREET WEST MISSOULA, MT 59802 10,000. Total from continuation sheets

Part XV Supplementary Information 3 Grants and Contributions Approved for Fo		· · · · · · · · · · · · · · · · · · ·	 .	
Recipient	If recipient is an individual,	, 	<u>T</u>	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
CASA OF MONTANA PO BOX 1046 HELENA, MT 59624	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	10,000
COMMUNITY HEALTH PARTNERS 126 SOUTH MAIN LIVINGSTON, MT 59047	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	43,000
DAVID FOSTER 10960 WILSHIRE BLVD, SUITE 2150 LOS ANGELES, CA 90024	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	400,000
EDUCATION FOUNDATION FOR BILLINGS PUBLIC SCHOOLS 415 NORTH 30TH STREET BILLINGS, MT 59101	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	7,500
HABITAT FOR HUMANITY OF FLATHEAD VALLEY 307 FIRST AVENUE EAST, SUITE 1 KALISPELL, MT 59901	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	10,000
HORATIO ALGER - MT SCHOLARSHIPS 99 CANAL CENTER PLAZA ALEXANDRIA, VA 22314	NONE	509(A)(1) OR (A)(2)	SCHOLARSHIPS	615,000
INTERMOUNTAIN OPERA ASSOCIATION PO BOX 37 BOZEMAN, MT 59771	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	5,000
JADYN FRED FOUNDATION PO BOX 235 MISSOULA, MT 59806	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	10,000
MASON KANE FOUNDATION, THE 7509 GARDENIA DRIVE MISSOULA, MT 59808	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	5,000
MCEE 409 LINFIELD HALL BOZEMAN, MT 59717-2920	NONE	509(A)(1) OR (A)(2)	PROGRAM SUPPORT	5,000
Total from continuation sheets				1,995,069

Part XV Supplementary Information Grants and Contributions Approved for Future Payment (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient MISSOULA COUNTY BOYS AND GIRLS NONE 509(A)(1) OR PROGRAM SUPPORT 617 S. HIGGINS (A)(2) MISSOULA, MT 59801 10,000. MONTANA AMATEUR SPORTS INC NONE 509(A)(1) OR PROGRAM SUPPORT BOX 7136 (A)(2) BILLINGS, MT 59103 20,000. MONTANA NON PROFIT ASSOCIATION NONE 509(A)(1) OR PROGRAM SUPPORT PO BOX 1744 (A)(2) HELENA, MT 59624 10,000. NONE 501(C)(6) PROGRAM SUPPORT MONTANA PRIMARY CARE ASSOCIATION 1805 EUCLID AVENUE HELENA, MT 59601 160,000. MONTANA RESCUE MISSION NONE 509(A)(1) OR PROGRAM SUPPORT PO BOX 3232 (A)(2) BILLINGS, MT 59103 10,000. PROGRAM SUPPORT NONE 509(A)(1) OR NURTURING CENTER, THE 146 THIRD AVENUE WEST (A)(2) KALISPELL, MT 59807 45,000. NONE PROGRAM SUPPORT OFFICE OF PUBLIC INSTRUCTION 509(A)(1) OR P.O. BOX 202501 (A)(2) HELENA, MT 59620-2501 450,000. PARENTING PLACE NONE 509(A)(1) OR PROGRAM SUPPORT PO BOX 3805 (A)(2) MISSOULA, MT 59806 10,000. ROCKS NONE 509(A)(1) OR PROGRAM SUPPORT 2815 WILSON (A)(2) MILES CITY, MT 59301 10,000. NONE TAMARACK GRIEF RESOURCE CENTER 509(A)(1) OR PROGRAM SUPPORT 516 S. ORANGE STREET (A)(2) MISSOULA, MT 59801 10,000. Total from continuation sheets

Supplementary Information Part XV Grants and Contributions Approved for Future Payment (Continuation) If recipient is an individual, show any relationship to any foundation manager Recipient Foundation Purpose of grant or Amount status of contribution Name and address (home or business) recipient or substantial contributor UNIVERSITY OF MONTANA FOUNDATION NONE 509(A)(1) OR PROGRAM SUPPORT (A)(2) PO BOX 7159 MISSOULA, MT 59807 10,000. WOMEN'S OPPORTUNITY & RESOURCE NONE 509(A)(1) OR PROGRAM SUPPORT 2525 PALMER STREET, SUITE 1 (A)(2) MISSOULA, MT 59808 10,000. WORLD AFFAIRS COUNCIL OF MONTANA NONE 509(A)(1) OR PROGRAM SUPPORT 201 W. MAIN STREET, SUITE 101 (A)(2) MISSOULA, MT 59802 20,000. 509(A)(1) OR PROGRAM SUPPORT YOUNG LIFE WASHINGTON FAMILY RANCH NONE 1750 SW SKYLINE BLVD #25 (A)(2) PORTLAND, OR 97221 109,569. Total from continuation sheets

FORM 990-PF	LEGAL	FEES	S	TATEMENT 1	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LEGAL FEES	3,163.	0.		3,163.	
TO FM 990-PF, PG 1, LN 16A =	3,163.	0.		3,163.	
FORM 990-PF	ACCOUNTI	NG FEES	S	TATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	81,019.	0.		80,199.	
TO FORM 990-PF, PG 1, LN 16B	81,019.	0.		80,199.	
FORM 990-PF C	THER PROFES			TATEMENT 3	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
CONSULTING FEES DATA PROCESSING INVESTMENT MANAGEMENT FEES	2,250. 19,475. 682,590.			2,250. 15,482. 0.	
TO FORM 990-PF, PG 1, LN 16C	704,315.	682,590.		17,732.	
FORM 990-PF	TAXES		STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
EXCISE TAX	22,068.	0.		0.	
TO FORM 990-PF, PG 1, LN 18	22,068.	0.		0.	

FORM 990-PF	OTHER EXPENSES			STATEMENT	NT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC				
PUBLIC RELATIONS	111,033.		0.			,033
SPONSORSHIP	20,619.		0.			,619
DUES AND MEMBERSHIPS	41,700.		0.		4:	,700
FACILITY SERVICES	2,844.		٥.		2	,844
PC/NET COSTS	1,175.		0.			,175
DIRECT PROGRAM EXPENSES	229,819.		0.			,819
MISCELLANEOUS	2,766.		0.		2	,016
TO FORM 990-PF, PG 1, LN 23	409,956.		0.		409	,206
FORM 990-PF U.S. AND S	STATE/CITY G	OAEKUMENI	ОВГТ	GALLONS	STATEMENT	•
	U.S GOV'	• OTHER		K VALUE	FAIR MARKI	
	U.S	• OTHER			FAIR MARK	ET
DESCRIPTION	U.S GOV'	• OTHER		K VALUE	FAIR MARKI VALUE	ET , 984
DESCRIPTION TREASURY SECURITIES	U.S GOV'' x	OTHER GOV'T		K VALUE 150,918,984.	FAIR MARKI VALUE	ET , 984
DESCRIPTION TREASURY SECURITIES TOTAL U.S. GOVERNMENT OBLIGAT	U.S GOV'' x TIONS VERNMENT OBL	OTHER GOV'T		K VALUE 150,918,984.	FAIR MARKI VALUE	ET ,984 ,984
DESCRIPTION TREASURY SECURITIES TOTAL U.S. GOVERNMENT OBLIGAT TOTAL STATE AND MUNICIPAL GOV TOTAL TO FORM 990-PF, PART II	U.S GOV'' x TIONS VERNMENT OBL	OTHER GOV'T GATIONS		150,918,984. 150,918,984.	FAIR MARKI VALUE 150,918	,984 ,984
DESCRIPTION TREASURY SECURITIES TOTAL U.S. GOVERNMENT OBLIGAT TOTAL STATE AND MUNICIPAL GOV TOTAL TO FORM 990-PF, PART II	U.S GOV'' x TIONS VERNMENT OBL	OTHER GOV'T GATIONS	ВОО	150,918,984. 150,918,984.	FAIR MARK VALUE 150,918 150,918	,984 ,984
DESCRIPTION TREASURY SECURITIES TOTAL U.S. GOVERNMENT OBLIGAT	U.S GOV'' x TIONS VERNMENT OBL	OTHER GOV'T GATIONS	ВОО	K VALUE 150,918,984. 150,918,984.	FAIR MARKI VALUE 150,918 150,918 STATEMENT FAIR MARKI	,984 ,984

FORM 990-PF	CORPORATE BONDS		STATEMENT 8
DESCRIPTION FIXED INCOME FUNDS	-	BOOK VALUE 202,111,856.	FAIR MARKET VALUE
TOTAL TO FORM 990-PF, PART II,	LINE 10C	202,111,856.	202,111,856.
FORM 990-PF	OTHER INVESTMENTS		STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
INVESTMENT INTEREST RECEIVABLE	FMV	2,022,576.	2,022,576.
TOTAL TO FORM 990-PF, PART II,	LINE 13	2,022,576.	2,022,576.
FORM 990-PF	OTHER LIABILITIES		STATEMENT 10
DESCRIPTION		BOY AMOUNT	EOY AMOUNT
DEFERRED TAX LIABILITY EXCISE TAXES PAYABLE	-	52,849. 56,883.	12,725.
TOTAL TO FORM 990-PF, PART II,	LINE 22	109,732.	12,725.

FORM 990-PF PART VIII - LIST OF OFFICERS, DIRECTORS

STATEMENT 11

TRUSTEES AN	S AND FOUNDATION MANAGERS					
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE		
PHYLLIS J. WASHINGTON P.O. BOX 16630 MISSOULA, MT 59808-6630	DIRECTOR 0.30	0.	0.	0.		
LAWRENCE R. SIMKINS P.O. BOX 16630 MISSOULA, MT 59808-6630	DIRECTOR/PRESI	DENT 0.	0.	0.		
MIKE HALLIGAN P.O. BOX 16630 MISSOULA, MT 59808-6630	EXECUTIVE DIRE	CTOR/SECRET		0.		
BRIAN T. SHERIDAN P.O. BOX 16630 MISSOULA, MT 59808-6630	DIRECTOR 0.30	0.	0.	0.		
WILLIAM H. BRODSKY P.O. BOX 16630 MISSOULA, MT 59808-6630	DIRECTOR 0.30	0.	0.	0.		
ROLIN ERICKSON P.O. BOX 16630 MISSOULA, MT 59808-6630	DIRECTOR 0.30	0.	0.	0.		
PAUL W. KEIPER P.O. BOX 16630 MISSOULA, MT 59808-6630	VICE PRESIDENT	0.	0.	0.		
TOTALS INCLUDED ON 990-PF, PAGE	6, PART VIII	0.	0.	0.		

FORM 990-PF

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

STATEMENT 12

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

DENNIS & PHYLLIS WASHINGTON FOUNDATION

P.O. BOX 16630

MISSOULA, MT 59808-6630

TELEPHONE NUMBER

406-523-1300

FORM AND CONTENT OF APPLICATIONS

STANDARD APPLICATION FORM IS FOUND ON THE INTERNET AT WWW.DPWFOUNDATION.ORG

ANY SUBMISSION DEADLINES

NONE - THE CONTRIBUTIONS COMMITTEE MEETS QUARTERLY

RESTRICTIONS AND LIMITATIONS ON AWARDS

LIMITED TO 501(C)(3) ORGANIZATIONS WITH AN EMPHASIS ON YOUTH AND EDUCATION IN GEOGRAPHICAL AREAS IN WHICH THE WASHINGTON COMPANIES OPERATE.

990-PF INVOLVEMENT WITH NONCHARITABLE ORGANIZATIONS STATEMENT 13
PART XVII, LINE 1, COLUMN (D)

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

MONTANA PRIMARY CARE ASSOCIATION

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

PROGRAM GRANT PAYMENT

NAME OF NONCHARITABLE EXEMPT ORGANIZATION

BUTTE CHAMBER OF COMMERCE

DESCRIPTION OF TRANSFERS, TRANSACTIONS, AND SHARING ARRANGEMENTS

PROGRAM GRANT PAYMENT