



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**Department of the Treasury
Internal Revenue Service**Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation****Note.** The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2011**For calendar year 2011 or tax year beginning , and ending**

Name of foundation Homer A Jr & Janet Scott Family Foundation		A Employer identification number 91-1693889
Number and street (or P O box number if mail is not delivered to street address)	Room/suite	B Telephone number (see instructions) 307-672-1445
First Interstate Bank, P O Box 2007		C If exemption application is pending, check here <input type="checkbox"/>
City or town, state, and ZIP code Sheridan WY 82801		D 1 Foreign organizations, check here <input type="checkbox"/>
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
I. Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 65,145	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)				
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments		0		
	4 Dividends and interest from securities	1,546	1,546		
	5 a Gross rents		0		
	b Net rental income or (loss)	0			
	6 a Net gain or (loss) from sale of assets not on line 10	-4,131			
	b Gross sales price for all assets on line 6a	33,863			
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10 a Gross sales less returns and allowances	0			
b Less Cost of goods sold	0				
c Gross profit or (loss) (attach schedule)	0				
11 Other income (attach schedule)	0	0	0		
12 Total. Add lines 1 through 11	-2,585	1,546	0		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	977			
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16 a Legal fees (attach schedule)	0		0	0
	b Accounting fees (attach schedule)	90		0	45
	c Other professional fees (attach schedule)	0		0	0
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	4		0	0
	19 Depreciation (attach schedule) and depletion	0	0	0	
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	20	20	0	0
	24 Total operating and administrative expenses. Add lines 13 through 23	1,091	558	0	45
	25 Contributions, gifts, grants paid	27,195			27,195
26 Total expenses and disbursements. Add lines 24 and 25	28,286	558	0	27,240	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	-30,871				
b Net investment income (if negative, enter -0-)		988			
c Adjusted net income (if negative, enter -0-)			0		

For Paperwork Reduction Act Notice, see instructions.

(HTA)

Form **990-PF** (2011)

614 9

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	1,489	796	796
	3 Accounts receivable <input type="checkbox"/>			
	Less allowance for doubtful accounts <input type="checkbox"/>	0	0	0
	4 Pledges receivable <input type="checkbox"/>			
	Less allowance for doubtful accounts <input type="checkbox"/>	0	0	0
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)	0	0	0
	7 Other notes and loans receivable (attach schedule) <input type="checkbox"/>			
	Less allowance for doubtful accounts <input type="checkbox"/>	0	0	0
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10 a Investments—U S and state government obligations (attach schedule)	0	0	0
	b Investments—corporate stock (attach schedule)	0	0	0
	c Investments—corporate bonds (attach schedule)	0	0	0
	11 Investments—land, buildings, and equipment basis <input type="checkbox"/>			
Less accumulated depreciation (attach schedule) <input type="checkbox"/>	0	0	0	
12 Investments—mortgage loans				
13 Investments—other (attach schedule)	105,102	74,857	64,349	
14 Land, buildings, and equipment basis <input type="checkbox"/>				
Less accumulated depreciation (attach schedule) <input type="checkbox"/>	0	0	0	
15 Other assets (describe <input type="checkbox"/> Income Receivable)	0	0	0	
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	106,591	75,653	65,145	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons	0	0	
	21 Mortgages and other notes payable (attach schedule)	0	0	
	22 Other liabilities (describe <input type="checkbox"/>)	0	0	
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. <input type="checkbox"/>			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. <input checked="" type="checkbox"/>			
	27 Capital stock, trust principal, or current funds	106,591	75,653	
	28 Paid-in or capital surplus, or land, bldg, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
30 Total net assets or fund balances (see instructions)	106,591	75,653		
31 Total liabilities and net assets/fund balances (see instructions)	106,591	75,653		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	106,591
2 Enter amount from Part I, line 27a	2	-30,871
3 Other increases not included in line 2 (itemize) <input type="checkbox"/> Unreconciled Differences	3	-67
4 Add lines 1, 2, and 3	4	75,653
5 Decreases not included in line 2 (itemize) <input type="checkbox"/>	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	75,653

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a See attached list				
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a 33,400	0	37,994	-4,594	
b 0	0	0	0	
c 0	0	0	0	
d 0	0	0	0	
e 0	0	0	0	
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69				
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
a 0	0	0	-4,594	
b 0	0	0	0	
c 0	0	0	0	
d 0	0	0	0	
e 0	0	0	0	
2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }			2	-4,131
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 }			3	51

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2010	28,851	102,773	0.280725
2009	39,968	96,907	0.412437
2008	145,235	210,843	0.688830
2007	49,313	211,335	0.233340
2006	71,357	128,757	0.554199
2 Total of line 1, column (d)			2 2.169531
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			3 0.433906
4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5			4 88,119
5 Multiply line 4 by line 3			5 38,235
6 Enter 1% of net investment income (1% of Part I, line 27b)			6 10
7 Add lines 5 and 6			7 38,245
8 Enter qualifying distributions from Part XII, line 4			8 27,240

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

1 **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)

b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b

c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)

2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

3 Add lines 1 and 2

4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

5 **Tax based on investment income.** Subtract line 4 from line 3. If zero or less, enter -0-

6 Credits/Payments

a 2011 estimated tax payments and 2010 overpayment credited to 2011

b Exempt foreign organizations—tax withheld at source

c Tax paid with application for extension of time to file (Form 8868)

d Backup withholding erroneously withheld

7 Total credits and payments. Add lines 6a through 6d

8 Enter any **penalty** for underpayment of estimated tax. Check here ☐ if Form 2220 is attached

9 **Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed**

10 **Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid**

11 Enter the amount of line 10 to be **Credited to 2012 estimated tax** ☐ **Refunded** ☐

Part VII-A Statements Regarding Activities

1 **a** During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?

b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?

If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities

c Did the foundation file Form 1120-POL for this year?

d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year
(1) On the foundation ☐ \$ _____ (2) On foundation managers ☐ \$ _____

e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ _____

2 Has the foundation engaged in any activities that have not previously been reported to the IRS?

If "Yes," attach a detailed description of the activities.

3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes

4 **a** Did the foundation have unrelated business gross income of \$1,000 or more during the year?

b If "Yes," has it filed a tax return on Form 990-T for this year?

5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?

If "Yes," attach the statement required by General Instruction T

6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either

• By language in the governing instrument, or

• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?

7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV

8 **a** Enter the states to which the foundation reports or with which it is registered (see instructions) ☐

WY

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

Part 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 section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	

Website address **► Not Applicable**

14 The books are in care of **► Cora Lee Davis** Telephone no **► 307-673-4800**
 Located at **► c/o The Powder Horn, 23 Country Club Lane Sheridan WY** ZIP+4 **► 82801**

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year **► 15**

16 At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?

	Yes	No
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 country **►**

Part VII-B 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.

	Yes	No
1a During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here ►	1b	N/A
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 before the first day of the tax year beginning in 2011?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
If "Yes," list the years ► 20 , 20 , 20 , 20		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions)	2b	N/A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20 , 20 , 20 , 20		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
b If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011)	3b	N/A
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b	X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No**b** If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b N/A

Organizations relying on a current notice regarding disaster assistance check here

☒**c** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945–5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes ☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**b** If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Attached Statement	.00	0	0	0
	.00	0	0	0
	.00	0	0	0
	.00	0	0	0

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

Total number of other employees paid over \$50,000

▶

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE."**

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		0
		0
		0
		0
		0
		0

Total number of others receiving over \$50,000 for professional services

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 Not Applicable	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 Not Applicable	
2	
All other program-related investments. See instructions	
3	0
Total. Add lines 1 through 3	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	88,167
b	Average of monthly cash balances	1b	1,294
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	89,461
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	89,461
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see instructions)	4	1,342
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	88,119
6	Minimum investment return. Enter 5% of line 5	6	4,406

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	4,406
2a	Tax on investment income for 2011 from Part VI, line 5	2a	20
b	Income tax for 2011 (This does not include the tax from Part VI)	2b	0
c	Add lines 2a and 2b	2c	20
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4,386
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	4,386
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	4,386

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	27,240
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	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	27,240
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	27,240

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 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
1 Distributable amount for 2011 from Part XI, line 7				4,386
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2011				
a From 2006	64,068			
b From 2007	41,476			
c From 2008	134,729			
d From 2009	35,194			
e From 2010	23,745			
f Total of lines 3a through e	299,212			
4 Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ 27,240				
a Applied to 2010, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions)		0		
c Treated as distributions out of corpus (Election required—see instructions)	0			
d Applied to 2011 distributable amount				4,386
e Remaining amount distributed out of corpus	22,854			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	322,066			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2010 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2012				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)				
8 Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions)	64,068			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	257,998			
10 Analysis of line 9				
a Excess from 2007	41,476			
b Excess from 2008	134,729			
c Excess from 2009	35,194			
d Excess from 2010	23,745			
e Excess from 2011	22,854			

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

N/A

- 1 a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling ▶
- b** Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(i)(3) or ☐ 4942(i)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2011	(b) 2010	(c) 2009	(d) 2008	
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	0	0	0	0	0
b 85% of line 2a	0	0	0	0	0
c Qualifying distributions from Part XII, line 4 for each year listed	0	0	0	0	0
d Amounts included in line 2c not used directly for active conduct of exempt activities					0
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	0	0	0	0	0
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets					0
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed	0	0	0	0	0
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)					0
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0
(3) Largest amount of support from an exempt organization					0
(4) Gross investment income					0

Part XV **Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

- a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

Homer & Janet Scott

- b** List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

- a The name, address, and telephone number of the person to whom applications should be addressed

See attached

- b The form in which applications should be submitted and information and materials they should include

See attached

- c. Any submission deadlines

None

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

See attached

Part XV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a <i>Paid during the year</i>				
Children's Center		501(c)(3)	Youth Development	8,920
Sheridan WY University of Wyoming		501(c)(3)	Operating Expense	4,000
Laramie WY Wyoming Theater		501(c)(3)	Operating Expense	2,800
Sheridan WY Special Olympics Montana		501(c)(3)	Operating Expense	50
Great Falls MT Edward Redle Foundation		501(c)(3)	Operating Expense	500
Sheridan WY Tongue River Child's Place		501(c)(3)	Operating Expense	600
Sheridan WY CASA		501(c)(3)	Operating Expense	100
Sheridan WY Big Horn Education Fund		501(c)(3)	Operating Expense	100
Sheridan WY Sheridan Senior Center Endowment		501(c)(3)	Operating Expense	500
Sheridan WY Dog & Cat Shelter		501(c)(3)	Operating Expense	125
Sheridan WY Joey's Fly Fishing Adventures		501(c)(3)	Operating Expense	200
Sheridan WY				
Total See Attached Statement			▶ 3a	27,195
b <i>Approved for future payment</i>				
Total			▶ 3b	0

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

Center for a Vital Community

Street

City	State	Zip Code	Foreign Country
Sheridan	WY		
Relationship	Foundation Status		
	501(c)(3)		
Purpose of grant/contribution			Amount
Operating Expense			1,000

Name

Institute for Shipbound Education

Street

City	State	Zip Code	Foreign Country
Charlottesville	VA		
Relationship	Foundation Status		
	501(c)(3)		
Purpose of grant/contribution			Amount
Operating Expense			250

Name

University of Sioux Falls

Street

City	State	Zip Code	Foreign Country
Sheridan	WY		
Relationship	Foundation Status		
	501(c)(3)		
Purpose of grant/contribution			Amount
Operating Expense			2,500

Name

The Salvation Army

Street

City	State	Zip Code	Foreign Country
Sheridan	WY		
Relationship	Foundation Status		
	501(c)(3)		
Purpose of grant/contribution			Amount
Operating Expense			500

Name

Friends of the Y

Street

City	State	Zip Code	Foreign Country
Sheridan	WY		
Relationship	Foundation Status		
	501(c)(3)		
Purpose of grant/contribution			Amount
Operating Expense			100

Name

Sheridan County Memorial Hospital

Street

City	State	Zip Code	Foreign Country
Sheridan	WY		
Relationship	Foundation Status		
	501(c)(3)		
Purpose of grant/contribution			Amount
Operating Expense			1,000

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year

Recipient(s) paid during the year

Name

Big Sky Little League

Street

City	State	Zip Code	Foreign Country
Billings	MT		
Relationship	Foundation Status		
	501(c)(3)		
Purpose of grant/contribution			Amount
Operating Expense			450

Name

National American Indian, Alaskan & Hawaiian

Street

City	State	Zip Code	Foreign Country
Sheridan	WY		
Relationship	Foundation Status		
	501(c)(3)		
Purpose of grant/contribution			Amount
Operating Expense			2,500

Name

People's Assistance FoodBank

Street

City	State	Zip Code	Foreign Country
Sheridan	WY		
Relationship	Foundation Status		
	501(c)(3)		
Purpose of grant/contribution			Amount
Operating Expense			1,000

Name

Street

City	State	Zip Code	Foreign Country
Relationship	Foundation Status		
Purpose of grant/contribution			Amount
			0

Name

Street

City	State	Zip Code	Foreign Country
Relationship	Foundation Status		
Purpose of grant/contribution			Amount
			0

Name

Street

City	State	Zip Code	Foreign Country
Relationship	Foundation Status		
Purpose of grant/contribution			Amount
			0

Line 16b (990-PF) - Accounting Fees

		90	45	0	45
	Name of Organization or Person Providing Service	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes (Cash Basis Only)
1	Scott Family Services, Inc	90	45		45
2					
3					
4					
5					
6					
7					
8					
9					
10					

Part II, Line 13 (990-PF) - Investments - Other

	Item or Category	Basis of Valuation	Book Value Beg. of Year	Book Value End of Year	FMV End of Year
1	High-Yield Bond Funds		4,688	7,438	7,150
2	International Bond Funds		3,200	8,200	7,548
3	US Large Cap Equity Funds		56,153	36,307	30,935
4	US Small & Mid Cap Equity Funds		10,032	6,112	5,836
5	International Developed Funds		31,029	11,917	8,487
6	International Emerging Funds		0	4,883	4,393
7					
8					
9					
10					

Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

	Long Term CG Distributions Short Term CG Distributions	Amount		CUSIP #	How Acquired	Date Acquired	Date Sold	Totals	Gross Sales Price	Depreciation Allowed	Cost or Other Basis Plus Expense of Sale	Gain or Loss	F M V as of 12/31/69	Adjusted Basis as of 12/31/69	Excess of FMV Over Adj Basis	Gains Minus Excess of FMV Over Adjusted Basis or Losses
		412	51													
1	Kind(s) of Property Sold															
2	See attached list								33,400	0	37,994	-4,594			0	-4,594
3									0	0	0	0			0	0
4									0	0	0	0			0	0
5									0	0	0	0			0	0
6									0	0	0	0			0	0
7									0	0	0	0			0	0
8									0	0	0	0			0	0
9									0	0	0	0			0	0
10									0	0	0	0			0	0

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

	Name	Check "X" if Business	Street	City	State	Zip Code	Foreign Country	Title	Average Hours
1	First Interstate Bank	X	PO Box 2007	Sheridan	MT	82801		Trustee	.
2	Homer A. Scott Jr		PO Box 2007	Sheridan	MT	82801		Trustee	1.00
3	Janet E. Scott		PO Box 2007	Sheridan	MT	82801		Trustee	1.00
4	Susan E. Scott Baker		PO Box 2007	Sheridan	MT	82801		Trustee	1.00
5	James M. Scott		PO Box 2007	Sheridan	MT	82801		Trustee	1.00
6	Homer R. Scott		PO Box 2007	Sheridan	MT	82801		Trustee	1.00
7	Terrill R. Moore		PO Box 30918	Billings	MT	59116		Trustee	1.00
8	Cora Lee Davis		PO Box 2007	Sheridan	WY	82801		Trustee	1.00
9									
10									

Part

977 0 0				
	Compensation	Benefits	Expense Account	Explanation
1	977			
2				
3				
4				
5				
6				
7				
8				
9				
10				

Homer A. Scott Jr. and Janet Scott Family Foundation

EIN: 91-1693889

Tax Year Ended: December 31, 2011

Form 990PF

Form 990PF, Part XV, Line 2a

Homer A. Scott Jr.

P.O. Box 2007

Sheridan, WY 82801

Phone: 307-673-4800

Form 990PF, Part XV, Line 2b

The application should be in written form and include the following:

- a) Name, address, and tax identification number of Charity.
- b) Documentary proof of the tax-exempt status of the Charity under Section 501(c)(3) of the IRC of 1954, or as amended.
- c) Copy of the most recent annual report of the Charity in the form required of it by applicable section of the Internal Revenue Code.
- d) Description of the charitable purpose, or purposes, to which the funds for which application is being made shall be put.

Homer A. Scott Jr. and Janet Scott Family Foundation

EIN: 91-1693889

Tax Year Ended: December 31, 2011

Form 990PF

Form 990PF, Part XV, Line 2d

In determining contributions, etc., trustees will follow the wishes expressed by Homer A. and Janet E. Scott in Article 2.00 of the Trust Instrument. The instrument states the Foundation will operate exclusively for charitable objectives, uses and purposes for which Trustors created this Foundation Trust. Trustors urge Trustees to give due consideration to the criteria by which Trustors historically have guided and directed their separate charitable giving, outside the context of this Foundation Trust. Trustors generally believe in concentrating their charitable giving among those charities that operate and provide substantial benefit within Trustors' own community, or those charities which Trustors are familiar with through longtime association and mutual involvement in shared charitable objectives. Trustors also believe generally that there should be an emphasis in this Foundation Trust upon helping those public charities that are directed toward the welfare and well-being of children and young adults. Trustors believe specifically in the charitable objectives of religious, educational, or other training that will build responsible character and instill industrious and faithful work habits in young people.

Trustors hope that Trustees will always give preferential consideration to the applications for distributions that are received from charitable organizations that do not derive a substantial part of their financial support from federal or state government sources.

Trustors direct Trustees to accord the first, and greatest priority preference to those charitable organizations that will use and apply the charitable distributions from this Foundation Trust within Sheridan County, Wyoming. If possible, and a sufficient number of qualified organizations make application, Trustors urge Trustees devote at least 60% of the charitable distributions made from this Foundation Trust to charitable organizations that will use and apply funds in said Sheridan County, up to 20% of the charitable distributions to organizations that will use and apply funds in the State of Wyoming and up to 20% of distributions to charitable organizations outside of Sheridan County and the State of Wyoming.

Tax Worksheet

(01/01/2011 To 12/31/2011)

Tax ID : 91-1693889

Account Name: Homer Jr & Janet Scott Family Fndn T

Account Number : 32-3213

State of Domicile : Wyoming

Generation Skipping : N/A

Administrator : Linda W. Thompson

Accountant : Scott Family Services

490 N. 31st Suite #300

Billings MT 59101

* * Schedule D * *

Shares/PV	Asset Sold	Date Acquired	How Acq	Date Sold	Holding Period	Sales Proceeds	Original Cost	Realized Gain/ Loss
39.840	American Europacific Growth Fund - F2	01/06/2003	P	08/04/2011	Long	1,545.46	951.55	593.91
3.010	American Europacific Growth Fund - F2	11/20/2003	P	09/09/2011	Long	108.02	85.00	23.02
5.270	American Europacific Growth Fund - F2	11/20/2003	P	08/04/2011	Long	204.54	149.00	55.54
27.110	American Europacific Growth Fund - F2	11/20/2003	P	08/18/2011	Long	1,000.00	766.00	234.00
11.070	T Rowe Price Mid Cap Growth Fund	12/17/2004	P	11/25/2011	Long	600.00	542.89	57.11
27.120	T Rowe Price Mid Cap Growth Fund	12/17/2004	P	10/11/2011	Long	1,500.00	1,329.99	170.01
58.910	American Europacific Growth Fund - F2	05/21/2007	P	11/25/2011	Long	2,000.00	2,997.33	-997.33
24.840	American Europacific Growth Fund - F2	05/21/2007	P	09/09/2011	Long	891.98	1,263.78	-371.80
21.990	Eaton Vance Parametric Tax Mgd Emerging Markt	05/21/2007	P	08/18/2011	Long	1,000.00	1,008.37	-8.37
26.350	Harbor International Fund	05/21/2007	P	08/04/2011	Long	1,500.00	1,816.43	-316.43
26.780	Harbor International Fund	05/21/2007	P	09/09/2011	Long	1,400.04	1,846.21	-446.17
36.600	Harbor International Fund	05/21/2007	P	08/18/2011	Long	2,000.00	2,523.40	-523.40
11.480	Harbor International Fund	05/01/2008	P	09/09/2011	Long	599.96	821.57	-221.61
9.220	Mrgn Stnly Inst Mid Cap Grwth-Adv clsd to new	05/21/2007	P	11/25/2011	Long	300.00	280.01	19.99
58.140	Mrgn Stnly Inst Mid Cap Grwth-Adv clsd to new	05/21/2007	P	08/18/2011	Long	2,000.00	1,766.29	233.71
7.020	T Rowe Price Equity Income Fund	11/17/2006	P	08/18/2011	Long	147.44	209.58	-62.14
88.220	T Rowe Price Equity Income Fund	05/21/2007	P	08/18/2011	Long	1,852.56	2,811.48	-958.92
1.120	Vanguard 500 Index Fund - Signal	05/21/2007	P	12/07/2011	Long	107.82	130.13	-22.31
30.410	Vanguard 500 Index Fund - Signal	05/21/2007	P	06/28/2011	Long	3,000.00	3,536.64	-536.64
14.450	Vanguard 500 Index Fund - Signal	01/22/2008	P	12/07/2011	Long	1,392.18	1,440.90	-48.72
8.450	Vanguard Index Trust Fund 500 PT (40)	05/21/2007	P	01/21/2011	Long	1,000.00	1,189.98	-189.98
43.780	Vanguard Morgan Growth Fund	05/21/2007	P	11/25/2011	Long	2,250.00	2,807.36	-557.36
102.510	Vanguard Morgan Growth Fund	05/21/2007	P	06/28/2011	Long	6,000.00	6,573.07	-573.07
17.890	Vanguard Morgan Growth Fund	05/21/2007	P	12/07/2011	Long	1,000.00	1,147.23	-147.23
						33,400.00		-4,594.19
							37,994.19	

' denotes Asset may qualify for Five-Year Gain Rule

How Acquired: F - Free Receipt, B - Beginning Inventory, C - Call, G - Gift,

L - Payment Made (Liability), P - Purchase, R - Reinvestment, S - Spinoff, U - Undetermined

Tax Worksheet

(01/01/2011 To 12/31/2011)

Tax ID : 91-1693889

Account Name: Homer Jr & Janet Scott Family Fndn T

Account Number : 32-3213

State of Domicile : Wyoming

Generation Skipping : N/A

Administrator : Linda W. Thompson

Accountant : Scott Family Services

490 N. 31st Suite #300

Billings MT 59101

Gain/Loss Summary :

Short Term GL

Gains From Sales :	0.00
Losses From Sales :	0.00
Common Funds :	0.00
Short Term Gains :	0.00
Short Term Losses :	0.00
Net Short Term G/L :	0.00
Capital Gain Dist :	50.66

Long Term GL

Gains From Sales :	1,387.29
Losses From Sales :	-5,981.48
Common Funds :	0.00
Long Term Gain :	1,387.29
Long Term Losses :	-5,981.48
Net Long Term G/L :	-4,594.19
Capital Gain Dist :	411.65

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

► File a separate application for each return.

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒
 - If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form)
- Do not complete Part II unless** you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)

A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns

Type or print	Name of exempt organization or other filer, see instructions	Enter filer's identifying number, see instructions
File by the due date for filing your return. See instructions	Homer A. Jr. & Janet Scott Family Foundation	<input checked="" type="checkbox"/> Employer identification number (EIN) or 91-1693889
	Number, street, and room or suite no. If a P.O. box, see instructions	<input type="checkbox"/> Social security number (SSN)
	First Interstate Bank, P.O. Box 2007	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	Sheridan	WY 82801

Enter the Return code for the return that this application is for (file a separate application for each return)

04

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

- The books are in the care of ► Cora Lee Davis

Telephone No. ► 307-673-4800

FAX No. ►

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 8/15/2012, to file the exempt organization return for the organization named above. The extension is for the organization's return for ☒ calendar year 2011 or

► ☐ tax year beginning _____, and ending _____

2 If the tax year entered in line 1 is for less than 12 months, check reason ☐ Initial return ☐ Final return ☐ Change in accounting period

3a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$
c	Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$ 0

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

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form **8868** (Rev. 1-2012)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization	Employer identification number (EIN) or
	Homer A. Jr. & Janet Scott Family Foundation	<input checked="" type="checkbox"/> 91-1693889
	Number, street, and room or suite no. If a P.O. box, see instructions	Social security number (SSN)
	First Interstate Bank, P.O. Box 2007	<input type="checkbox"/>
	City, town or post office, state, and ZIP code. For a foreign address, see instructions	
	Sheridan WY	82801

Enter the Return code for the return that this application is for (file a separate application for each return).

04

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in the care of ☒ Cora Lee Davis
Telephone No. ☒ 307-673-4800 FAX No. ☐
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ If this is for the whole group, check this box ☐ If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for

- I request an additional 3-month extension of time until 11/15/2012.
- For calendar year 2011, or other tax year beginning _____, and ending _____.
- If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period
- State in detail why you need the extension: Additional time is required to acquire all information necessary to complete and file an accurate return.

8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	20
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	20
c	Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ☐Title ☐Date ☐