

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





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

Schedule of Contributors

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 Form 990 EZ or Form 990 PF

Name of the organization		Employer identification number
Scarlett Family Foundati	ion	83-0323685
Organization type (check one)		1 00 002000
Filers of	Section	
Form 990 or 990 EZ		
	4947(a)(1) nonexempt charitable trust not treated as a private found	Jation
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt chantable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
		
• •	ered by the General Rule or a Special Rule	
Note Only a section 501(c)(7) (instructions	or (10) organization can check boxes for both the General Rule and a S	Special Rule See
General Rule		
	Form 990 990-EZ or 990-PF that received during the year \$5 000 or more (in inhibitor Complete Parts I and II	n money or
Special Rules		
under sections 509(a)(1) a	ganization filing Form 990 or 990 EZ that met the 33 1/3% support test of the re and 170(b)(1)(A)(vI) and received from any one contributor during the year a c or (2) 2% of the amount on (I) Form 990 Part VIII line 1h or (II) Form 990	contribution of
during the year total contr	t) or (10) organization filing Form 990 or 990 EZ that received from any one conductions of more than \$1 000 for use exclusively for religious chantable scient or the prevention of cruelty to children or animals. Complete Parts I. II. and III.	
during the year contribution not total to more than \$1.0 year for an exclusively re-	or (10) organization filing Form 990 or 990 EZ that received from any one coons for use exclusively for religious chantable etc purposes but these contributions that were received eligious charitable etc purpose Do not complete any of the parts unless a because it received nonexclusively religious chantable etc contributions of the contributions of the parts unless and the contributions of the contributio	butions did dunng the the General Rule
990 EZ or 990 PF) but it must a	not covered by the General Rule and/or the Special Rules does not file Sc answer No on Part IV line 2 of its Form 990 or check the box on line H of certify that it does not meet the filing requirements of Schedule B (Form 990)	of ital Form 990 lets of of 2013 O
For Paperwork Reduction Act Notice see th	e instructions for Form 990 990 EZ, or 990 PF	Schedus 8:#50m 290 290 EZ 0#930 PF) (2012)

Name of organization
Scarlett Family Foundation

Employer identification number

83-0323685

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed		
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	W Richard Scarlett III CLAT 1 3490 Clubhouse Drive Suite 25 Wilson WY 83014	\$ 62 440	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
	W Richard Scarlett III CLAT 2 3490 Clubhouse Drive Suite 25 Wilson WY 83014	\$ 62 440	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
3_	W Richard Scarlett III CLAT 3 3490 Clubhouse Drive Suite 25 Wilson WY 83014	\$62 339	Person 🔀 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
		\$	Person
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	RECEIVED SO JUL 11 2013 SO JUL 11 201	\$	Person
(a) No	Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

0425887453 July 03, 2013 LTR 2697C 0 R 83-0323685 201212 44 00028960

SCARLETT FAMILY FDN PO BOX 12139 JACKSON HOLE WY 83002



023348

DECLARATION

Under penalties of perjury, I declare that I have examined the return identified in this letter, including any accompanying schedules and statements, and to the best of my_knowledge and belief, it is true, correct and complete I understand that this declaration will become a permanent part of that return

Signature of Officer or Trustee

President É Digector

Title