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

OMB No 1545-0052

2012

Department of the Treasury  
Internal Revenue Service

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

For calendar year 2012, or tax year beginning Jul 1, 2012, and ending Jun 30, 2013

|                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                      |                                                                                                                                                                                   |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name of foundation<br><b>VERDAD FOUNDATION</b>                                                                                                                                                                                                                                                                        |                                                                                                                                                                                                      | <b>A</b> Employer identification number<br><b>27-6382632</b>                                                                                                                      |
| Number and street (or P.O. box number if mail is not delivered to street address)<br><b>P.O. BOX 2360</b>                                                                                                                                                                                                             |                                                                                                                                                                                                      | <b>B</b> Telephone number (see the instructions)<br><b>(307) 237-9301</b>                                                                                                         |
| City or town<br><b>CASPER</b>                                                                                                                                                                                                                                                                                         | State ZIP code<br><b>WY 82602</b>                                                                                                                                                                    | <b>C</b> If exemption application is pending, check here <input type="checkbox"/>                                                                                                 |
| <b>G</b> Check all that apply<br><input type="checkbox"/> Initial return<br><input type="checkbox"/> Final return<br><input type="checkbox"/> Address change<br><input type="checkbox"/> Initial Return of a former public charity<br><input type="checkbox"/> Amended return<br><input type="checkbox"/> Name change |                                                                                                                                                                                                      | <b>D</b> 1 Foreign organizations, check here <input type="checkbox"/><br>2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> |
| <b>H</b> Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation                                                               |                                                                                                                                                                                                      | <b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>                                                              |
| <b>I</b> Fair market value of all assets at end of year (from Part II, column (c), line 16)<br>\$ <b>3,882,950.</b>                                                                                                                                                                                                   | <b>J</b> Accounting method <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) _____<br>(Part I, column (d) must be on cash basis) | <b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>                                                           |

| <b>Part I Analysis of Revenue and Expenses</b> (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) |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------------|---------------------------|-------------------------|-------------------------------------------------------------|
| <b>REVENUE</b>                                                                                                                                                            | <b>1</b> Contributions, gifts, grants, etc., received (att sch)            | 1,000,000.                         |                           |                         |                                                             |
|                                                                                                                                                                           | <b>2</b> Ck <input type="checkbox"/> if the foundn is not req to att Sch B |                                    |                           |                         |                                                             |
|                                                                                                                                                                           | <b>3</b> Interest on savings and temporary cash investments                |                                    |                           |                         |                                                             |
|                                                                                                                                                                           | <b>4</b> Dividends and interest from securities                            | 10,872.                            | 10,872.                   |                         |                                                             |
|                                                                                                                                                                           | <b>5a</b> Gross rents                                                      |                                    |                           |                         |                                                             |
|                                                                                                                                                                           | <b>b</b> Net rental income or (loss)                                       |                                    |                           |                         |                                                             |
|                                                                                                                                                                           | <b>6a</b> Net gain/(loss) from sale of assets not on line 10               | 8,060.                             | L-6a Stmt                 |                         |                                                             |
|                                                                                                                                                                           | <b>b</b> Gross sales price for all assets on line 6a                       | 8,060.                             |                           |                         |                                                             |
|                                                                                                                                                                           | <b>7</b> Capital gain net income (from Part IV, line 2)                    |                                    | 8,060.                    |                         |                                                             |
|                                                                                                                                                                           | <b>8</b> Net short-term capital gain                                       |                                    |                           |                         |                                                             |
|                                                                                                                                                                           | <b>9</b> Income modifications                                              |                                    |                           |                         |                                                             |
| <b>10a</b> Gross sales less returns and allowances                                                                                                                        |                                                                            |                                    |                           |                         |                                                             |
| <b>b</b> Less: Cost of goods sold                                                                                                                                         |                                                                            |                                    |                           |                         |                                                             |
| <b>c</b> Gross profit/(loss) (att sch)                                                                                                                                    |                                                                            |                                    |                           |                         |                                                             |
| <b>11</b> Other income (attach schedule)                                                                                                                                  |                                                                            |                                    |                           |                         |                                                             |
| <b>12</b> Total. Add lines 1 through 11                                                                                                                                   | 1,018,932.                                                                 | 18,932.                            |                           |                         |                                                             |
| <b>13</b> Compensation of officers, directors, trustees, etc                                                                                                              |                                                                            |                                    |                           |                         |                                                             |
| <b>14</b> Other employee salaries and wages                                                                                                                               |                                                                            |                                    |                           |                         |                                                             |
| <b>15</b> Pension plans, employee benefits                                                                                                                                |                                                                            |                                    |                           |                         |                                                             |
| <b>16a</b> Legal fees (attach schedule)                                                                                                                                   |                                                                            |                                    |                           |                         |                                                             |
| <b>b</b> Accounting fees (attach sch)                                                                                                                                     |                                                                            |                                    |                           |                         |                                                             |
| <b>c</b> Other prof fees (attach sch) L-16c Stmt                                                                                                                          | 7,597.                                                                     | 7,597.                             |                           |                         |                                                             |
| <b>17</b> Interest                                                                                                                                                        |                                                                            |                                    |                           |                         |                                                             |
| <b>18</b> Taxes (attach schedule) (see instr)                                                                                                                             | 112.                                                                       |                                    |                           |                         |                                                             |
| <b>19</b> Depreciation (attach sch) and depletion                                                                                                                         |                                                                            |                                    |                           |                         |                                                             |
| <b>20</b> Occupancy                                                                                                                                                       |                                                                            |                                    |                           |                         |                                                             |
| <b>21</b> Travel, conferences, and meetings                                                                                                                               |                                                                            |                                    |                           |                         |                                                             |
| <b>22</b> Printing and publications                                                                                                                                       |                                                                            |                                    |                           |                         |                                                             |
| <b>23</b> Other expenses (attach schedule)                                                                                                                                |                                                                            |                                    |                           |                         |                                                             |
| <b>24</b> Total operating and administrative expenses. Add lines 13 through 23                                                                                            | 7,709.                                                                     | 7,597.                             |                           |                         |                                                             |
| <b>25</b> Contributions, gifts, grants paid                                                                                                                               | 108,400.                                                                   |                                    |                           | 108,400.                |                                                             |
| <b>26</b> Total expenses and disbursements. Add lines 24 and 25                                                                                                           | 116,109.                                                                   | 7,597.                             |                           | 108,400.                |                                                             |
| <b>27</b> Subtract line 26 from line 12:                                                                                                                                  |                                                                            |                                    |                           |                         |                                                             |
| <b>a</b> Excess of revenue over expenses and disbursements                                                                                                                | 902,823.                                                                   |                                    |                           |                         |                                                             |
| <b>b</b> Net investment income (if negative, enter -0-)                                                                                                                   |                                                                            | 11,335.                            |                           |                         |                                                             |
| <b>c</b> Adjusted net income (if negative, enter -0-)                                                                                                                     |                                                                            |                                    |                           |                         |                                                             |

SCANNED DEC 05 2013

ADMINISTRATIVE EXPENSES

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| Part II Balance Sheets |                                                                                                                           | Beginning of year | End of year    |                |
|------------------------|---------------------------------------------------------------------------------------------------------------------------|-------------------|----------------|----------------|
|                        |                                                                                                                           |                   | (a) Book Value | (b) Book Value |
| ASSETS                 | 1 Cash – non-interest-bearing                                                                                             | 3,967.            | 5,455.         | 5,455.         |
|                        | 2 Savings and temporary cash investments                                                                                  |                   | 2,914,726.     | 2,914,726.     |
|                        | 3 Accounts receivable                                                                                                     |                   |                |                |
|                        | Less: allowance for doubtful accounts                                                                                     | 22.               | 25.            | 25.            |
|                        | 4 Pledges receivable                                                                                                      |                   |                |                |
|                        | Less: allowance for doubtful accounts                                                                                     |                   |                |                |
|                        | 5 Grants receivable                                                                                                       |                   |                |                |
|                        | 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) |                   |                |                |
|                        | 7 Other notes and loans receivable (attach sch)                                                                           |                   |                |                |
|                        | Less: allowance for doubtful accounts                                                                                     |                   |                |                |
|                        | 8 Inventories for sale or use                                                                                             |                   |                |                |
|                        | 9 Prepaid expenses and deferred charges                                                                                   |                   |                |                |
|                        | 10a Investments – U S and state government obligations (attach schedule) L-10a Stmt                                       | 2,422,779.        | 397,016.       | 409,470.       |
|                        | b Investments – corporate stock (attach schedule) L-10b Stmt                                                              | 461,141.          | 473,510.       | 553,274.       |
|                        | c Investments – corporate bonds (attach schedule)                                                                         |                   |                |                |
|                        | 11 Investments – land, buildings, and equipment basis                                                                     |                   |                |                |
| LIABILITIES            | Less: accumulated depreciation (attach schedule)                                                                          |                   |                |                |
|                        | 12 Investments – mortgage loans                                                                                           |                   |                |                |
|                        | 13 Investments – other (attach schedule)                                                                                  |                   |                |                |
|                        | 14 Land, buildings, and equipment basis                                                                                   |                   |                |                |
|                        | Less: accumulated depreciation (attach schedule)                                                                          |                   |                |                |
|                        | 15 Other assets (describe )                                                                                               |                   |                |                |
|                        | 16 Total assets (to be completed by all filers – see the instructions. Also, see page 1, item I)                          | 2,887,909.        | 3,790,732.     | 3,882,950.     |
|                        | 17 Accounts payable and accrued expenses                                                                                  |                   |                |                |
|                        | 18 Grants payable                                                                                                         |                   |                |                |
|                        | 19 Deferred revenue                                                                                                       |                   |                |                |
| NET ASSET BALANCES     | 20 Loans from officers, directors, trustees, & other disqualified persons                                                 |                   |                |                |
|                        | 21 Mortgages and other notes payable (attach schedule)                                                                    |                   |                |                |
|                        | 22 Other liabilities (describe )                                                                                          |                   |                |                |
|                        | 23 Total liabilities (add lines 17 through 22)                                                                            |                   |                |                |
|                        | Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.                        |                   |                |                |
|                        | 24 Unrestricted                                                                                                           |                   |                |                |
|                        | 25 Temporarily restricted                                                                                                 |                   |                |                |
|                        | 26 Permanently restricted                                                                                                 |                   |                |                |
|                        | Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. X                                   |                   |                |                |
|                        | 27 Capital stock, trust principal, or current funds                                                                       | 2,887,909.        | 3,790,732.     |                |
|                        | 28 Paid-in or capital surplus, or land, building, and equipment fund                                                      |                   |                |                |
|                        | 29 Retained earnings, accumulated income, endowment, or other funds                                                       |                   |                |                |
|                        | 30 Total net assets or fund balances (see instructions)                                                                   | 2,887,909.        | 3,790,732.     |                |
|                        | 31 Total liabilities and net assets/fund balances (see instructions)                                                      | 2,887,909.        | 3,790,732.     |                |

## 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 | 2,887,909. |
| 2 | Enter amount from Part I, line 27a                                                                                                                         | 2 | 902,823.   |
| 3 | Other increases not included in line 2 (itemize)                                                                                                           | 3 |            |
| 4 | Add lines 1, 2, and 3                                                                                                                                      | 4 | 3,790,732. |
| 5 | Decreases not included in line 2 (itemize)                                                                                                                 | 5 |            |
| 6 | Total net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b), line 30                                                      | 6 | 3,790,732. |

**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 shares MLC Company) |  | (b) How acquired<br>P — Purchase<br>D — Donation | (c) Date acquired<br>(month, day, year) | (d) Date sold<br>(month, day, year) |
|------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------|-----------------------------------------|-------------------------------------|
| 1 a SEE ATTACHED STMT FOR PART I, LINE 6A                                                                                                |  | P                                                | Various                                 | Various                             |
| b                                                                                                                                        |  |                                                  |                                         |                                     |
| c                                                                                                                                        |  |                                                  |                                         |                                     |
| d                                                                                                                                        |  |                                                  |                                         |                                     |
| e                                                                                                                                        |  |                                                  |                                         |                                     |

| (e) Gross sales price                                                                       | (f) Depreciation allowed<br>(or allowable) | (g) Cost or other basis<br>plus expense of sale     | (h) Gain or (loss)<br>(e) plus (f) minus (g)                                                          |
|---------------------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| a 8,060.                                                                                    |                                            | 0.                                                  | 8,060.                                                                                                |
| b                                                                                           |                                            |                                                     |                                                                                                       |
| c                                                                                           |                                            |                                                     |                                                                                                       |
| d                                                                                           |                                            |                                                     |                                                                                                       |
| e                                                                                           |                                            |                                                     |                                                                                                       |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 |                                            |                                                     |                                                                                                       |
| (i) Fair Market Value<br>as of 12/31/69                                                     | (j) Adjusted basis<br>as of 12/31/69       | (k) Excess of column (i)<br>over column (j), if any | (l) Gains (Column (h)<br>gain minus column (k), but not less<br>than -0-) or Losses (from column (h)) |
| a 0.                                                                                        | 0.                                         | 0.                                                  | 8,060.                                                                                                |
| b                                                                                           |                                            |                                                     |                                                                                                       |
| c                                                                                           |                                            |                                                     |                                                                                                       |
| d                                                                                           |                                            |                                                     |                                                                                                       |
| e                                                                                           |                                            |                                                     |                                                                                                       |

|                                                                                |                                                                                                                      |   |        |
|--------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|---|--------|
| 2 Capital gain net income or (net capital loss)                                | — [ If gain, also enter in Part I, line 7<br>If (loss), enter -0- in Part I, line 7 ]                                | 2 | 8,060. |
| 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-<br>in Part I, line 8 ] | 3 | 0.     |

**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.

| 1 Enter the appropriate amount in each column for each year, see the instructions before making any entries |                                       |                                              |                                                              |
|-------------------------------------------------------------------------------------------------------------|---------------------------------------|----------------------------------------------|--------------------------------------------------------------|
| (a) Base period years<br>Calendar year (or tax year<br>beginning in)                                        | (b) Adjusted qualifying distributions | (c) Net value of<br>noncharitable-use assets | (d) Distribution ratio<br>(column (b) divided by column (c)) |
| 2011                                                                                                        | 123,548.                              | 2,720,039.                                   | 0.045421                                                     |
| 2010                                                                                                        | 21,350.                               | 1,969,004.                                   | 0.010843                                                     |
| 2009                                                                                                        | 2,850.                                | 983,302.                                     | 0.002898                                                     |
| 2008                                                                                                        |                                       |                                              |                                                              |
| 2007                                                                                                        |                                       |                                              |                                                              |

|                                                                                                                                                                                |   |            |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|------------|
| 2 Total of line 1, column (d)                                                                                                                                                  | 2 | 0.059162   |
| 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 | 0.019721   |
| 4 Enter the net value of noncharitable-use assets for 2012 from Part X, line 5                                                                                                 | 4 | 3,411,750. |
| 5 Multiply line 4 by line 3                                                                                                                                                    | 5 | 67,283.    |
| 6 Enter 1% of net investment income (1% of Part I, line 27b)                                                                                                                   | 6 | 113.       |
| 7 Add lines 5 and 6                                                                                                                                                            | 7 | 67,396.    |
| 8 Enter qualifying distributions from Part XII, line 4                                                                                                                         | 8 | 108,400.   |

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)**

|                                                                                                                                                                                                                                           |  |            |      |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------|------|
| <b>1 a</b> Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter 'N/A' on line 1<br>Date of ruling or determination letter: _____ (attach copy of letter if necessary – see instrs) |  |            |      |
| <b>b</b> Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b                                                                       |  | <b>1</b>   | 113. |
| <b>c</b> All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)                                                                                                        |  |            |      |
| <b>2</b> Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                                                                                                        |  | <b>2</b>   | 0.   |
| <b>3</b> Add lines 1 and 2                                                                                                                                                                                                                |  | <b>3</b>   | 113. |
| <b>4</b> Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)                                                                                                                      |  | <b>4</b>   | 0.   |
| <b>5</b> Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-                                                                                                                                          |  | <b>5</b>   | 113. |
| <b>6</b> Credits/Payments                                                                                                                                                                                                                 |  |            |      |
| <b>a</b> 2012 estimated tax pmts and 2011 overpayment credited to 2012                                                                                                                                                                    |  | <b>6 a</b> |      |
| <b>b</b> Exempt foreign organizations – tax withheld at source                                                                                                                                                                            |  | <b>6 b</b> |      |
| <b>c</b> Tax paid with application for extension of time to file (Form 8868)                                                                                                                                                              |  | <b>6 c</b> |      |
| <b>d</b> Backup withholding erroneously withheld                                                                                                                                                                                          |  | <b>6 d</b> |      |
| <b>7</b> Total credits and payments. Add lines 6a through 6d                                                                                                                                                                              |  | <b>7</b>   |      |
| <b>8</b> Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached                                                                                                                |  | <b>8</b>   |      |
| <b>9</b> Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed                                                                                                                                                    |  | <b>9</b>   | 113. |
| <b>10</b> Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid                                                                                                                                       |  | <b>10</b>  | 0.   |
| <b>11</b> Enter the amount of line 10 to be Credited to 2013 estimated tax <input type="checkbox"/> Refunded <input type="checkbox"/>                                                                                                     |  | <b>11</b>  |      |

**Part VII-A Statements Regarding Activities**

|                                                                                                                                                                                                                                                                                                                                                              | Yes | No |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| <b>1 a</b> 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?                                                                                                                                                                              |     | X  |
| <b>1 b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?<br><i>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</i> |     | X  |
| <b>1 c</b> Did the foundation file Form 1120-POL for this year?                                                                                                                                                                                                                                                                                              |     | X  |
| <b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br>(1) On the foundation \$ _____ (2) On foundation managers \$ _____                                                                                                                                                                            |     |    |
| <b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ _____                                                                                                                                                                                                       |     |    |
| <b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS?<br><i>If 'Yes,' attach a detailed description of the activities</i>                                                                                                                                                                                 |     | X  |
| <b>3</b> 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? <i>If 'Yes,' attach a conformed copy of the changes</i>                                                                                                                   |     | X  |
| <b>4 a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?                                                                                                                                                                                                                                                       |     | X  |
| <b>4 b</b> If 'Yes,' has it filed a tax return on Form 990-T for this year?                                                                                                                                                                                                                                                                                  |     | X  |
| <b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year?<br><i>If 'Yes,' attach the statement required by General Instruction T</i>                                                                                                                                                                           |     | X  |
| <b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• 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?                  | X   |    |
| <b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If 'Yes,' complete Part II, column (c), and Part XV</i>                                                                                                                                                                                                          | X   |    |
| <b>8 a</b> Enter the states to which the foundation reports or with which it is registered (see instructions)<br><u>WY - Wyoming</u>                                                                                                                                                                                                                         |     |    |
| <b>8 b</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? <i>If 'No,' attach explanation</i>                                                                                                                                | X   |    |
| <b>9</b> 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 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? <i>If 'Yes,' complete Part XIV</i>                                                                                         |     | X  |
| <b>10</b> Did any persons become substantial contributors during the tax year? <i>If 'Yes,' attach a schedule listing their names and addresses</i>                                                                                                                                                                                                          | X   |    |

BAA

Form 990-PF (2012)

**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?<br>Website address <u>N/A</u>                                             | 13 | X |   |
| 14                                                                                                                                  | The books are in care of <u>H. A. TRUE, III &amp; KAREN S. TRUE</u> Telephone no <u>(307) 237-9301</u><br>Located at <u>455 N. POPLAR</u> <u>CASPER</u> <u>WY</u> ZIP + 4 <u>82601</u>        |    |   |   |
| 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 <u>15</u> |    |   |   |
| 16                                                                                                                                  | At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?     | 16 |   | 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 |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|----|
| <b>1 a</b> 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>b</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)?<br>Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>                                                                                                                                                             | 1 b                                                                 |    |
| <b>c</b> 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 2012?                                                                                                                                                                                                                                                                                                         | 1 c                                                                 | X  |
| <b>2</b> 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))                                                                                                                                                                                                                                                                                                                   |                                                                     |    |
| <b>a</b> At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2012?<br>If 'Yes,' list the years <u>20 11</u> , 20 __, 20 __, 20 __                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |    |
| <b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement - see instructions)                                                                                                                                                                                 | 2 b                                                                 | X  |
| <b>c</b> If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.<br><u>20 __</u> , 20 __, 20 __, 20 __                                                                                                                                                                                                                                                                                                                                          |                                                                     |    |
| <b>3 a</b> 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>b</b> If 'Yes,' did it have excess business holdings in 2012 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 2012.) | 3 b                                                                 |    |
| <b>4 a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?                                                                                                                                                                                                                                                                                                                                                                               | 4 a                                                                 | X  |
| <b>b</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 2012?                                                                                                                                                                                                                                                               | 4 b                                                                 | X  |

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**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)****5 a** 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)?**5 b**

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)

**6 a** 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?**6 b**

If 'Yes' to 6b, file Form 8870

X

**7 a** At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes ☒ No**7 b****b** If 'Yes,' did the foundation receive any proceeds or have any net income attributable to the transaction?**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 |
|-----------------------------------------------------|-----------------------------------------------------------|-------------------------------------------|-----------------------------------------------------------------------|---------------------------------------|
| H. A. TRUE, III<br>P.O. BOX 2360<br>CASPER WY 82602 | TRUSTEE<br>0.00                                           | 0.                                        | 0.                                                                    | 0.                                    |
| KAREN S. TRUE<br>P.O. BOX 2360<br>CASPER WY 82602   | TRUSTEE<br>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

▶

None

**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                                                                     |                     |                  |
|                                                                          |                     |                  |
|                                                                          |                     |                  |
|                                                                          |                     |                  |
|                                                                          |                     |                  |
|                                                                          |                     |                  |
|                                                                          |                     |                  |
|                                                                          |                     |                  |
| Total number of others receiving over \$50,000 for professional services |                     | None             |

**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 |          |
| 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                                                                                                                |        |
| 2                                                                                                                |        |
| All other program-related investments. See instructions.                                                         |        |
| 3                                                                                                                |        |
| Total. Add lines 1 through 3                                                                                     |        |

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

|                                                                                                                      |            |            |
|----------------------------------------------------------------------------------------------------------------------|------------|------------|
| <b>1</b> Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes. |            |            |
| <b>a</b> Average monthly fair market value of securities                                                             | <b>1 a</b> | 3,459,855. |
| <b>b</b> Average of monthly cash balances                                                                            | <b>1 b</b> | 3,826.     |
| <b>c</b> Fair market value of all other assets (see instructions)                                                    | <b>1 c</b> | 25.        |
| <b>d</b> Total (add lines 1a, b, and c)                                                                              | <b>1 d</b> | 3,463,706. |
| <b>e</b> Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)   | <b>1 e</b> |            |
| <b>2</b> Acquisition indebtedness applicable to line 1 assets                                                        | <b>2</b>   |            |
| <b>3</b> Subtract line 2 from line 1d                                                                                | <b>3</b>   | 3,463,706. |
| <b>4</b> Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)   | <b>4</b>   | 51,956.    |
| <b>5</b> Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4        | <b>5</b>   | 3,411,750. |
| <b>6</b> Minimum investment return. Enter 5% of line 5                                                               | <b>6</b>   | 170,588.   |

**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.)

|                                                                                                             |            |          |
|-------------------------------------------------------------------------------------------------------------|------------|----------|
| <b>1</b> Minimum investment return from Part X, line 6                                                      | <b>1</b>   | 170,588. |
| <b>2 a</b> Tax on investment income for 2012 from Part VI, line 5                                           | <b>2 a</b> | 113.     |
| <b>b</b> Income tax for 2012 (This does not include the tax from Part VI)                                   | <b>2 b</b> |          |
| <b>c</b> Add lines 2a and 2b                                                                                | <b>2 c</b> | 113.     |
| <b>3</b> Distributable amount before adjustments. Subtract line 2c from line 1                              | <b>3</b>   | 170,475. |
| <b>4</b> Recoveries of amounts treated as qualifying distributions                                          | <b>4</b>   |          |
| <b>5</b> Add lines 3 and 4                                                                                  | <b>5</b>   | 170,475. |
| <b>6</b> Deduction from distributable amount (see instructions)                                             | <b>6</b>   |          |
| <b>7</b> Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 | <b>7</b>   | 170,475. |

**Part XII Qualifying Distributions** (see instructions)

|                                                                                                                                                               |            |          |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|----------|
| <b>1</b> Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes                                                            |            |          |
| <b>a</b> Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26                                                                        | <b>1 a</b> | 108,400. |
| <b>b</b> Program-related investments — total from Part IX-B                                                                                                   | <b>1 b</b> |          |
| <b>2</b> Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes                                            | <b>2</b>   |          |
| <b>3</b> Amounts set aside for specific charitable projects that satisfy the                                                                                  |            |          |
| <b>a</b> Suitability test (prior IRS approval required)                                                                                                       | <b>3 a</b> |          |
| <b>b</b> Cash distribution test (attach the required schedule)                                                                                                | <b>3 b</b> |          |
| <b>4</b> Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4                                           | <b>4</b>   | 108,400. |
| <b>5</b> 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) | <b>5</b>   | 113.     |
| <b>6</b> Adjusted qualifying distributions. Subtract line 5 from line 4                                                                                       | <b>6</b>   | 108,287. |

**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)<br>Corpus | (b)<br>Years prior to 2011 | (c)<br>2011 | (d)<br>2012 |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------------------------|-------------|-------------|
| <b>1</b> Distributable amount for 2012 from Part XI, line 7                                                                                                                       |               |                            |             | 170,475.    |
| <b>2</b> Undistributed income, if any, as of the end of 2012                                                                                                                      |               |                            |             |             |
| <b>a</b> Enter amount for 2011 only                                                                                                                                               |               |                            | 115,036.    |             |
| <b>b</b> Total for prior years. 20 __, 20 __, 20 __                                                                                                                               |               |                            |             |             |
| <b>3</b> Excess distributions carryover, if any, to 2012                                                                                                                          |               |                            |             |             |
| <b>a</b> From 2007                                                                                                                                                                | 0.            |                            |             |             |
| <b>b</b> From 2008                                                                                                                                                                | 0.            |                            |             |             |
| <b>c</b> From 2009                                                                                                                                                                | 0.            |                            |             |             |
| <b>d</b> From 2010                                                                                                                                                                | 0.            |                            |             |             |
| <b>e</b> From 2011                                                                                                                                                                | 0.            |                            |             |             |
| <b>f</b> Total of lines 3a through e                                                                                                                                              | 0.            |                            |             |             |
| <b>4</b> Qualifying distributions for 2012 from Part XII, line 4 ▶ \$ 108,400.                                                                                                    |               |                            |             |             |
| <b>a</b> Applied to 2011, but not more than line 2a                                                                                                                               |               |                            | 108,400.    |             |
| <b>b</b> Applied to undistributed income of prior years (Election required — see instructions)                                                                                    |               |                            |             |             |
| <b>c</b> Treated as distributions out of corpus (Election required — see instructions)                                                                                            |               |                            |             |             |
| <b>d</b> Applied to 2012 distributable amount                                                                                                                                     |               |                            |             |             |
| <b>e</b> Remaining amount distributed out of corpus                                                                                                                               | 0.            |                            |             |             |
| <b>5</b> Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a) )                                        |               |                            |             |             |
| <b>6</b> Enter the net total of each column as indicated below:                                                                                                                   |               |                            |             |             |
| <b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5                                                                                                                          | 0.            |                            |             |             |
| <b>b</b> Prior years' undistributed income Subtract line 4b from line 2b                                                                                                          |               | 0.                         |             |             |
| <b>c</b> 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 |               |                            |             |             |
| <b>d</b> Subtract line 6c from line 6b. Taxable amount — see instructions                                                                                                         |               | 0.                         |             |             |
| <b>e</b> Undistributed income for 2011. Subtract line 4a from line 2a Taxable amount — see instructions                                                                           |               |                            | 6,636.      |             |
| <b>f</b> Undistributed income for 2012 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2013                                                               |               |                            |             | 170,475.    |
| <b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions)                                  |               |                            |             |             |
| <b>8</b> Excess distributions carryover from 2007 not applied on line 5 or line 7 (see instructions)                                                                              | 0.            |                            |             |             |
| <b>9</b> Excess distributions carryover to 2013. Subtract lines 7 and 8 from line 6a                                                                                              | 0.            |                            |             |             |
| <b>10</b> Analysis of line 9                                                                                                                                                      |               |                            |             |             |
| <b>a</b> Excess from 2008                                                                                                                                                         | 0.            |                            |             |             |
| <b>b</b> Excess from 2009                                                                                                                                                         | 0.            |                            |             |             |
| <b>c</b> Excess from 2010                                                                                                                                                         | 0.            |                            |             |             |
| <b>d</b> Excess from 2011                                                                                                                                                         | 0.            |                            |             |             |
| <b>e</b> Excess from 2012                                                                                                                                                         | 0.            |                            |             |             |

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**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 2012, enter the date of the ruling ▶

**b** Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

**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

| Tax year                                                                                                                                                 | Prior 3 years |          |          | (e) Total |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|----------|----------|-----------|
| (a) 2012                                                                                                                                                 | (b) 2011      | (c) 2010 | (d) 2009 |           |
| <b>b</b> 85% of line 2a                                                                                                                                  |               |          |          |           |
| <b>c</b> Qualifying distributions from Part XII, line 4 for each year listed                                                                             |               |          |          |           |
| <b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities                                                           |               |          |          |           |
| <b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c                                   |               |          |          |           |
| <b>3</b> Complete 3a, b, or c for the alternative test relied upon                                                                                       |               |          |          |           |
| <b>a</b> 'Assets' alternative test – enter                                                                                                               |               |          |          |           |
| <b>(1)</b> Value of all assets                                                                                                                           |               |          |          |           |
| <b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)                                                                                     |               |          |          |           |
| <b>b</b> 'Endowment' alternative test – enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed                              |               |          |          |           |
| <b>c</b> 'Support' alternative test – enter                                                                                                              |               |          |          |           |
| <b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) |               |          |          |           |
| <b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)                                      |               |          |          |           |
| <b>(3)</b> Largest amount of support from an exempt organization                                                                                         |               |          |          |           |
| <b>(4)</b> Gross investment income                                                                                                                       |               |          |          |           |

**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) )

H. A. TRUE III  
KAREN S. TRUE

**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 or e-mail of the person to whom applications should be addressed

H.A. TRUE, III & KAREN S. TRUE  
P.O. BOX 2360  
CASPER WY 82602 (307) 237-9301

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

IN WRITING WITH SUFFICIENT INFORMATION INCLUDED TO SUPPORT THAT THE APPLICANT MEETS RESTRICTIONS SET OUT IN (d) BELOW

**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 SCHEDULE I

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

| Recipient<br>Name and address (home or business)                                                   | If recipient is an individual,<br>show any relationship to any<br>foundation manager or<br>substantial contributor | Foundation<br>status of<br>recipient | Purpose of grant or<br>contribution                                           | Amount          |
|----------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------------------------------------------------|-----------------|
| <b>a Paid during the year</b>                                                                      |                                                                                                                    |                                      |                                                                               |                 |
| 12-24 CLUB INC<br>500 S. WOLCOTT, STE 200<br>CASPER WY 82601                                       | N/A                                                                                                                | PUBLIC<br>CHARITY                    | HELP SUPPORT<br>RECOVERY PROGRAMS                                             | 500.            |
| AMYOTROPHIC LATERAL SCLEROSIS SOCIETY OF AMERICA<br>1275 K ST, NW, STE 1050<br>WASHINGTON DC 20005 | N/A                                                                                                                | PUBLIC<br>CHARITY                    | SUPPORT<br>RESEARCH TO<br>FIND A CURE                                         | 200.            |
| ARIZONA SONORA DESERT MUSEUM<br>2021 N. KINNEY RD<br>TUCSON AZ 85743                               | N/A                                                                                                                | PUBLIC<br>CHARITY                    | SUPPORT RESEARCH,<br>EXHIBITS, EDUCATION AND<br>CONSERVATION EFFORTS          | 1,500.          |
| BLUE ENVELOPE HEALTH FUND INC<br>PO BOX 2177<br>CASPER WY 82602                                    | N/A                                                                                                                | PUBLIC<br>CHARITY                    | PROMOTE WELLNESS<br>IN THE<br>COMMUNITY                                       | 1,000.          |
| BOYS AND GIRLS CLUB OF CENTRAL WYOMING<br>1701 EAST K ST<br>CASPER WY 82601                        | N/A                                                                                                                | PUBLIC<br>CHARITY                    | SUPPORT SECURITY<br>AND EDUCATION FOR<br>OUR YOUNG PEOPLE                     | 2,000.          |
| CASPER COLLEGE FOUNDATION<br>125 COLLEGE DR<br>CASPER WY 82601                                     | N/A                                                                                                                | PUBLIC<br>CHARITY                    | ENHANCE EDUCATIONAL<br>OPPORTUNITIES AND<br>ENVIRONMENT AT CC                 | 5,000.          |
| CASPER FAMILY YMCA<br>315 E 15TH ST<br>CASPER WY 82601                                             | N/A                                                                                                                | PUBLIC<br>CHARITY                    | PROMOTE YOUTH<br>DEVELOPMENT AND<br>HEALTHY LIVING                            | 5,000.          |
| CENTRAL WYOMING HOSPICE PROGRAM<br>319 S WASHINGTON ST<br>CASPER WY 82601                          | N/A                                                                                                                | PUBLIC<br>CHARITY                    | PROVIDE END OF LIFE<br>CARE FOR INDIVIDUALS,<br>THEIR FAMILIES AND CAREGIVERS | 7,500.          |
| CHILD DEVELOPMENT CENTER OF NATRONA COUNTY<br>2020 E 12TH ST<br>CASPER WY 82601                    | N/A                                                                                                                | PUBLIC<br>CHARITY                    | PROVIDE EARLY<br>INTERVENTION<br>SERVICES FOR CHLDREN                         | 5,500.          |
| See Line 3a statement                                                                              |                                                                                                                    |                                      |                                                                               | 80,200.         |
| <b>Total</b>                                                                                       |                                                                                                                    |                                      | <b>3 a</b>                                                                    | <b>108,400.</b> |
| <b>b Approved for future payment</b>                                                               |                                                                                                                    |                                      |                                                                               |                 |
| <b>Total</b>                                                                                       |                                                                                                                    |                                      | <b>3 b</b>                                                                    |                 |





**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

**2012**

Name of the organization

VERDAD FOUNDATION

Employer identification number

27-6382632

**Organization type** (check one).

**Filers of:**

Form 990 or 990-EZ

**Section:**

- ☐ 501(c)( \_\_\_\_ ) (enter number) organization  
☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation  
☐ 527 political organization

Form 990-PF

- ☒ 501(c)(3) exempt private foundation  
☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation  
☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**

**Note.** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions

**General Rule**

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II)

**Special Rules**

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, 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
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ► \$ \_\_\_\_\_

**Caution:** An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

**BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990EZ, or 990-PF.**

Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

Name of organization

Employer identification number

VERDAD FOUNDATION

27-6382632

**Part I Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed.

| (a)<br>Number | (b)<br>Name, address, and ZIP + 4                                  | (c)<br>Total<br>contributions | (d)<br>Type of contribution                                                                                                                                                 |
|---------------|--------------------------------------------------------------------|-------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1             | H.A. TRUE, III & KAREN S. TRUE<br>P.O. BOX 2360<br>CASPER WY 82602 | \$ 1,000,000                  | Person <input checked="" type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution) |
|               |                                                                    |                               | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)            |
|               |                                                                    |                               | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)            |
|               |                                                                    |                               | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)            |
|               |                                                                    |                               | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)            |
|               |                                                                    |                               | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)            |
|               |                                                                    |                               | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution)            |

**Form 990-PF  
Part I, Line 6a****Net Gain or Loss From Sale of Assets****2012**

|                                  |                                                     |
|----------------------------------|-----------------------------------------------------|
| Name<br><b>VERDAD FOUNDATION</b> | Employer Identification Number<br><b>27-6382632</b> |
|----------------------------------|-----------------------------------------------------|

**Asset Information:**

|                         |                 |                                                        |                  |
|-------------------------|-----------------|--------------------------------------------------------|------------------|
| Description of Property |                 | <u>EATON VANCE ATLANTA CAPITAL SMID-CAP A LTCG DIV</u> |                  |
| Date Acquired           | <u>Various</u>  | How Acquired                                           | <u>Purchased</u> |
| Date Sold               | <u>12/14/12</u> | Name of Buyer                                          |                  |
| Sales Price             | <u>186.</u>     | Cost or other basis (do not reduce by depreciation)    |                  |
| Sales Expense           |                 | Valuation Method                                       |                  |
| Total Gain (Loss)       | <u>186.-</u>    | Accumulation Depreciation                              |                  |

|                         |                 |                                                     |                  |
|-------------------------|-----------------|-----------------------------------------------------|------------------|
| Description of Property |                 | <u>FIDELITY LOW PRICED STOCK FUND #316 LTCG DIV</u> |                  |
| Date Acquired           | <u>Various</u>  | How Acquired                                        | <u>Purchased</u> |
| Date Sold               | <u>09/10/12</u> | Name of Buyer                                       |                  |
| Sales Price             | <u>2,133.</u>   | Cost or other basis (do not reduce by depreciation) |                  |
| Sales Expense           |                 | Valuation Method                                    |                  |
| Total Gain (Loss)       | <u>2,133.-</u>  | Accumulation Depreciation                           |                  |

|                         |                 |                                                     |                  |
|-------------------------|-----------------|-----------------------------------------------------|------------------|
| Description of Property |                 | <u>FIDELITY LOW PRICED STOCK FUND #316 LTCG DIV</u> |                  |
| Date Acquired           | <u>Various</u>  | How Acquired                                        | <u>Purchased</u> |
| Date Sold               | <u>12/17/12</u> | Name of Buyer                                       |                  |
| Sales Price             | <u>884.</u>     | Cost or other basis (do not reduce by depreciation) |                  |
| Sales Expense           |                 | Valuation Method                                    |                  |
| Total Gain (Loss)       | <u>884.-</u>    | Accumulation Depreciation                           |                  |

|                         |                 |                                                     |                  |
|-------------------------|-----------------|-----------------------------------------------------|------------------|
| Description of Property |                 | <u>HEARTLAND VALUE PLUS LTCG DIV</u>                |                  |
| Date Acquired           | <u>Various</u>  | How Acquired                                        | <u>Purchased</u> |
| Date Sold               | <u>12/31/12</u> | Name of Buyer                                       |                  |
| Sales Price             | <u>516.</u>     | Cost or other basis (do not reduce by depreciation) |                  |
| Sales Expense           |                 | Valuation Method                                    |                  |
| Total Gain (Loss)       | <u>516.-</u>    | Accumulation Depreciation                           |                  |

|                         |                 |                                                     |                  |
|-------------------------|-----------------|-----------------------------------------------------|------------------|
| Description of Property |                 | <u>YACKTMAN FUND SERVICE CLASS LTCG DIV</u>         |                  |
| Date Acquired           | <u>Various</u>  | How Acquired                                        | <u>Purchased</u> |
| Date Sold               | <u>12/27/12</u> | Name of Buyer                                       |                  |
| Sales Price             | <u>33.</u>      | Cost or other basis (do not reduce by depreciation) |                  |
| Sales Expense           |                 | Valuation Method                                    |                  |
| Total Gain (Loss)       | <u>33.-</u>     | Accumulation Depreciation                           |                  |

|                         |                 |                                                          |                  |
|-------------------------|-----------------|----------------------------------------------------------|------------------|
| Description of Property |                 | <u>MANNING &amp; NAPIER TAX MANAGED CLASS A LTCG DIV</u> |                  |
| Date Acquired           | <u>Various</u>  | How Acquired                                             | <u>Purchased</u> |
| Date Sold               | <u>12/18/12</u> | Name of Buyer                                            |                  |
| Sales Price             | <u>2,288.</u>   | Cost or other basis (do not reduce by depreciation)      |                  |
| Sales Expense           |                 | Valuation Method                                         |                  |
| Total Gain (Loss)       | <u>2,288.-</u>  | Accumulation Depreciation                                |                  |

|                         |                 |                                                     |                  |
|-------------------------|-----------------|-----------------------------------------------------|------------------|
| Description of Property |                 | <u>T ROWE PRICE NEW HORIZONS LTCG DIV</u>           |                  |
| Date Acquired           | <u>Various</u>  | How Acquired                                        | <u>Purchased</u> |
| Date Sold               | <u>12/18/12</u> | Name of Buyer                                       |                  |
| Sales Price             | <u>2,020.</u>   | Cost or other basis (do not reduce by depreciation) |                  |
| Sales Expense           |                 | Valuation Method                                    |                  |
| Total Gain (Loss)       | <u>2,020.-</u>  | Accumulation Depreciation                           |                  |

|                         |  |                                                     |  |
|-------------------------|--|-----------------------------------------------------|--|
| Description of Property |  |                                                     |  |
| Date Acquired           |  | How Acquired                                        |  |
| Date Sold               |  | Name of Buyer                                       |  |
| Sales Price             |  | Cost or other basis (do not reduce by depreciation) |  |
| Sales Expense           |  | Valuation Method                                    |  |
| Total Gain (Loss)       |  | Accumulation Depreciation                           |  |

**VERDAD FOUNDATION  
EIN 27-6382632  
2012 FORM 990-PF ATTACHMENT  
SCHEDULE I**

**Part XV: Supplemental Information**

**Line 2 (d) : Restrictions**

**The purpose of the Foundation is to utilize income and such portions of the principal as the Trustees deem appropriate exclusively for religious, charitable, scientific, literary and educational purposes, and to foster amateur sports competition (but not to provide facilities or equipment), as set forth in Section 501(c)(3) of the Internal Revenue Code including, for these purposes, the making of distributions to organizations that qualify as exempt organizations under Section 501(c)(3) of the Code**

Form 990-PF, Page 11, Part XV, line 3a

**Line 3a statement**

| Recipient<br><br>Name and address<br>(home or business)                                         | If recipient is<br>an individual,<br>show any<br>relationship to<br>any foundation<br>manager or<br>substantial<br>contributor | Founda-<br>tion<br>status<br>of re-<br>cipient | Purpose of<br>grant or contribution                                           | Person or<br>Business<br>Checkbox<br><br>Amount                                               |
|-------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| <b>a Paid during the year</b>                                                                   |                                                                                                                                |                                                |                                                                               |                                                                                               |
| CHILDREN'S HOSPITAL COLORADO FOUNDATION<br>13123 E 16TH AVE<br>AURORA CO 80045                  | N/A                                                                                                                            | PUBLIC<br>CHARITY                              | ADVANCING THE MISSION<br>OF CHILDREN'S<br>HOSPITAL COLORADO                   | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>5,000.  |
| COLORADO STATE UNIVERSITY FOUNDATION<br>410 UNIVERSITY SERVICES CENTER<br>FORT COLLINS CO 80523 | N/A                                                                                                                            | PUBLIC<br>CHARITY                              | ASSIST IN THE PROMOTION<br>AND DEVELOPMENT<br>OF COLORADO STATE UNIV          | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>10,000. |
| COURT APPOINTED SPECIAL ADVOCATE OF NATR<br>1701 EAST E ST, MCMURRY BLDG<br>CASPER WY 82601     | N/A                                                                                                                            | PUBLIC<br>CHARITY                              | PROVIDE SUPPORT TO<br>ABUSED AND NEGLECTED<br>CHILDREN IN THE COURTS          | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>2,500.  |
| FORT CASPAR MUSEUM ASSOCIATION<br>4001 FORT CASPAR RD<br>CASPER WY 82604                        | N/A                                                                                                                            | PUBLIC<br>CHARITY                              | SUPPORT THE EDUCATION<br>AND PRESERVATION<br>ACTIVITIES OF THE MUSEUM         | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>500.    |
| HERITAGE FOUNDATION<br>214 MASSACHUSETTS AVE, NE<br>WASHINGTON DC 20002                         | N/A                                                                                                                            | PUBLIC<br>CHARITY                              | PROMOTE<br>CONSERVATIVE<br>PUBLIC POLICIES                                    | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>1,000.  |
| HOLY CROSS CENTER INC<br>1030 N LINCOLN ST<br>CASPER WY 82601                                   | N/A                                                                                                                            | PUBLIC<br>CHARITY                              | PROVIDE MEALS<br>TO THE HOMELESS                                              | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>1,000.  |
| INSTITUTE FOR ENERGY RESEARCH<br>1100 H ST, NW, STE 400<br>WASHINGTON DC 20005                  | N/A                                                                                                                            | PUBLIC<br>CHARITY                              | SUPPORT RESEARCH AND<br>ANALYSIS OF GLOBAL<br>ENERGY MARKETS                  | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>1,000.  |
| MEALS ON WHEELS FOUNDATION<br>1760 EAST 12TH ST<br>CASPER WY 82601                              | N/A                                                                                                                            | PUBLIC<br>CHARITY                              | ASSIST ELDERLY AND<br>HOMEBOUND PEOPLE<br>OF NATRONA COUNTY                   | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>2,500.  |
| MONTESSORI SCHOOL OF CASPER<br>1147 S WOLCOTT ST<br>CASPER WY 82601                             | N/A                                                                                                                            | PUBLIC<br>CHARITY                              | PROVIDE A NUTURING,<br>LEARNING ENVIRONMENT<br>FOR CHILDREN                   | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>8,000.  |
| MOTHER SETON HOUSING INC<br>PO BOX 1557<br>CASPER WY 82602                                      | N/A                                                                                                                            | PUBLIC<br>CHARITY                              | PROVIDE TRANSITIONAL<br>HOUSING TO SINGLE<br>PARENTS AND THEIR KIDS           | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>3,000.  |
| MOUNTAIN STATES LEGAL FOUNDATION<br>2596 S LEWIS WAY<br>LAKEWOOD CO 80227                       | N/A                                                                                                                            | PUBLIC<br>CHARITY                              | PROVIDE LEGAL SERVICES<br>TO THOSE WHO SUPPORT<br>THE FREE ENTERPRISE SYST    | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>3,000.  |
| MULTIPLE SCLEROSIS SOCIETY<br>900 S BROADWAY, STE 250<br>DENVER CO 80209                        | N/A                                                                                                                            | PUBLIC<br>CHARITY                              | PROVIDE RESOURCES<br>TO DRIVE RESEARCH<br>FOR A CURE                          | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>300.    |
| NATIONAL COWBOY & WESTERN HERITAGE MUSEUM<br>1700 NORTHEAST 63RD ST<br>OKLAHOMA CITY OK 73111   | N/A                                                                                                                            | PUBLIC<br>CHARITY                              | PRESERVE THE HISTORY<br>AND CULTURES OF<br>THE AMERICAN WEST                  | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>8,500.  |
| NATIONAL RIGHT TO WORK LEGAL DEFENSE FOU<br>8001 BRADDOCK RD<br>SPRINGFIELD VA 22151            | N/A                                                                                                                            | PUBLIC<br>CHARITY                              | SUPPORT<br>INDIVIDUALS<br>RIGHT TO WORK                                       | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>500.    |
| NATIONAL WESTERN STOCK SHOW ASSOCIATION<br>4655 HUMBOLDT ST<br>DENVER CO 80216                  | N/A                                                                                                                            | PUBLIC<br>CHARITY                              | PRODIVE SCHOLARSHIPS FOR<br>THE PRACTICE OF AG AND<br>MEDICINE IN RURAL AREAS | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>150.    |

Form 990-PF, Page 11, Part XV, line 3a

Continued

**Line 3a statement**

| Recipient<br>Name and address<br>(home or business)                                              | If recipient is<br>an individual,<br>show any<br>relationship to<br>any foundation<br>manager or<br>substantial<br>contributor | Founda-<br>tion<br>status<br>of re-<br>cipient | Purpose of<br>grant or contribution                                                                | Person or<br>Business<br>Checkbox<br><br>Amount                                              |
|--------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------|
| <b>a Paid during the year</b>                                                                    |                                                                                                                                |                                                |                                                                                                    |                                                                                              |
| <u>NATRONA COUNTY MEALS ON WHEELS</u><br><u>1760 EAST 12TH ST</u><br><u>CASPER WY 82601</u>      | <u>N/A</u>                                                                                                                     | <u>PUBLIC</u><br><u>CHARITY</u>                | <u>ASSIST ELDERLY AND</u><br><u>HOMEBOUND PEOPLE</u><br><u>OF NATRONA COUNTY</u>                   | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>2,500. |
| <u>NATRONA COUNTY PUBLIC LIBRARY FOUNDATION</u><br><u>307 E 2ND ST</u><br><u>CASPER WY 82601</u> | <u>N/A</u>                                                                                                                     | <u>PUBLIC</u><br><u>CHARITY</u>                | <u>ASSIST THE</u><br><u>LIBRARY THROUGH</u><br><u>RAISING PRIVATE FUNDS</u>                        | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>5,000. |
| <u>NICOLAYSEN ART MUSEUM</u><br><u>400 E COLLINS DR</u><br><u>CASPER WY 82601</u>                | <u>N/A</u>                                                                                                                     | <u>PUBLIC</u><br><u>CHARITY</u>                | <u>PRESERVE THE WORK</u><br><u>OF CONTEMPORARY</u><br><u>ARTISTS</u>                               | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>7,000. |
| <u>NRA FOUNDATION</u><br><u>11250 WAPLES MILL RD</u><br><u>FAIRFAX VA 22030</u>                  | <u>N/A</u>                                                                                                                     | <u>PUBLIC</u><br><u>CHARITY</u>                | <u>SUPPORT A WIDE RANGE</u><br><u>OF FIREARM-RELATED</u><br><u>PUBLIC INTEREST ACTIVITI</u>        | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>1,000. |
| <u>PLATTE RIVER PARKWAY TRUST</u><br><u>PO BOX 1228</u><br><u>CASPER WY 82602</u>                | <u>N/A</u>                                                                                                                     | <u>PUBLIC</u><br><u>CHARITY</u>                | <u>DEVELOP AND CONSTRUCT</u><br><u>A RIVER CORRIDOR TO</u><br><u>FACILITATE EXERCISE</u>           | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>1,000. |
| <u>SAINT ANTHONY TRI-PARISH SCHOOL</u><br><u>1145 WEST 20TH ST</u><br><u>CASPER WY 82604</u>     | <u>N/A</u>                                                                                                                     | <u>PUBLIC</u><br><u>CHARITY</u>                | <u>PROVIDE STUDENTS</u><br><u>WITH A CHRIST-CENTERED</u><br><u>OUTLOOK ON LIFE</u>                 | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>5,500. |
| <u>SCIENCE ZONE</u><br><u>3960 S POPLAR ST</u><br><u>CASPER WY 82601</u>                         | <u>N/A</u>                                                                                                                     | <u>PUBLIC</u><br><u>CHARITY</u>                | <u>ASSIST THE SCIENCE CENTER</u><br><u>IN OFFERING QUALITY</u><br><u>PROGRAMS AND EXHIBITS</u>     | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>5,000. |
| <u>SOLDIERS ANGELS</u><br><u>1792 E WASHINGTON BLVD</u><br><u>PASADENA CA 91104</u>              | <u>N/A</u>                                                                                                                     | <u>PUBLIC</u><br><u>CHARITY</u>                | <u>PROVIDE AID AND COMFORT</u><br><u>TO THE MEN AND WOMEN</u><br><u>OF THE US ARMED SERVICES</u>   | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>250.   |
| <u>TROOPERS FOUNDATION</u><br><u>302 S DAVID ST, STE 100</u><br><u>CASPER WY 82601</u>           | <u>N/A</u>                                                                                                                     | <u>PRIVATE</u><br><u>FOUNDATIO</u>             | <u>ACQUIRE AND MANAGE ASSETS</u><br><u>AND SUPPORT THE TROOPERS</u><br><u>DRUM AND BUGLE CORPS</u> | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>2,500. |
| <u>UNIVERSITY OF WYOMING FOUNDATION</u><br><u>1200 E IVINSON AVE</u><br><u>LARAMIE WY 82071</u>  | <u>N/A</u>                                                                                                                     | <u>PUBLIC</u><br><u>CHARITY</u>                | <u>SECURING PRIVATE</u><br><u>RESOURCES AND PROVIDING</u><br><u>SUPPORT FOR UNIV. OF WY</u>        | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>1,000. |
| <u>WYOMING COMMUNITY FOUNDATION</u><br><u>313 S 2ND ST</u><br><u>LARAMIE WY 82070</u>            | <u>N/A</u>                                                                                                                     | <u>PUBLIC</u><br><u>CHARITY</u>                | <u>CONNECT PEOPLE WHO</u><br><u>CARE WITH CAUSES THAT</u><br><u>MATTER TO BETTER WY</u>            | Person or <input type="checkbox"/><br>Business <input checked="" type="checkbox"/><br>2,500. |

Total

80,200.

Form 990-PF, Page 1, Part I

**Line 16c - Other Professional Fees**

| Name of Provider  | Type of Service Provided | Amount Paid Per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|-------------------|--------------------------|-----------------------|-----------------------|---------------------|---------------------------------------|
| MIDHILL-HNB TRUST | TRUST DEPT FEE           | 7,597.                | 7,597.                |                     |                                       |
| Total             |                          | <u>7,597.</u>         | <u>7,597.</u>         |                     |                                       |

Form 990-PF, Page 2, Part II, Line 10a

**L-10a Stmt**

| Line 10a - Investments -<br>US and State Government<br>Obligations: | End of Year                                  |                                       | End of Year                                |                                     |
|---------------------------------------------------------------------|----------------------------------------------|---------------------------------------|--------------------------------------------|-------------------------------------|
|                                                                     | State and Local<br>Obligations<br>Book Value | State and Local<br>Obligations<br>FMV | US Government<br>Obligations<br>Book Value | US Government<br>Obligations<br>FMV |
| US TREASURY NOTES 1.25%                                             |                                              |                                       | 199,469.                                   | 203,688.                            |
| US TREASURY NOTES 1.875%                                            |                                              |                                       | 197,547.                                   | 205,782.                            |
| Total                                                               |                                              |                                       | <u>397,016.</u>                            | <u>409,470.</u>                     |

Form 990-PF, Page 2, Part II, Line 10b

**L-10b Stmt**

| Line 10b - Investments - Corporate Stock: | End of Year     |                   |
|-------------------------------------------|-----------------|-------------------|
|                                           | Book Value      | Fair Market Value |
| HARBOR CAPITAL APPRECIATION FUND #12      | 50,278.         | 61,219.           |
| YACHTMAN FUND SERVICE CLASS               | 52,264.         | 66,315.           |
| MANNING & NAPIER TAX MANAGED CLASS A      | 52,525.         | 58,567.           |
| SEI S&P 500 INDEX #179                    | 51,992.         | 65,162.           |
| EATON VANCE ATLANTA CAPITAL SMID-CAP A    | 50,478.         | 66,018.           |
| FIDELITY LOW PRICED STOCK FUND #316       | 56,779.         | 64,425.           |
| HEARTLAND VALUE PLUS                      | 26,415.         | 28,797.           |
| T ROWE PRICE NEW HORIZONS #42             | 30,463.         | 34,682.           |
| ROYCE VALUE PLUS FUND SERVICE CLASS       | 50,293.         | 57,389.           |
| HARBOR INTERNATIONAL FUND #011            | 52,023.         | 50,700.           |
| Total                                     | <u>473,510.</u> | <u>553,274.</u>   |

**Supporting Statement of:**

Form 990-PF, p1/Line 1(a)

| Description                    | Amount            |
|--------------------------------|-------------------|
| H.A. TRUE, III & KAREN S. TRUE | 1,000,000.        |
| Total                          | <u>1,000,000.</u> |

**Supporting Statement of:**

Form 990-PF, p1/Line 4(b)

| Description     | Amount         |
|-----------------|----------------|
| INTEREST INCOME | 6,250.         |
| DIVIDEND INCOME | 4,622.         |
| Total           | <u>10,872.</u> |

**Supporting Statement of:**

Form 990-PF, p1/Line 18(a)-1

| Description | Amount      |
|-------------|-------------|
| EXCISE TAX  | 112.        |
| Total       | <u>112.</u> |

**Supporting Statement of:**

Form 990-PF, p2/Line 2(b)

| Description                                          | Amount            |
|------------------------------------------------------|-------------------|
| FEDERATED GOVERNMENT OBLIGATIONS #5 CASH EQUIVALENTS | 2,914,726.        |
| Total                                                | <u>2,914,726.</u> |

**Supporting Statement of:**

Form 990-PF, p2/Line 2(c)

| Description                                          | Amount     |
|------------------------------------------------------|------------|
| FEDERATED GOVERNMENT OBLIGATIONS #5 CASH EQUIVALENTS | 2,914,726. |

Continued

**Supporting Statement of:**

Form 990-PF, p2/Line 2(c)

| Description | Amount            |
|-------------|-------------------|
| Total       | <u>2,914,726.</u> |

**Supporting Statement of:**

Form 990-PF, p2/Line 3 Accounts Rec.

| Description         | Amount     |
|---------------------|------------|
| INTEREST RECEIVABLE | 25.        |
| Total               | <u>25.</u> |

**Supporting Statement of:**

Form 990-PF, p2/Line 3(c)

| Description         | Amount     |
|---------------------|------------|
| INTEREST RECEIVABLE | 25.        |
| Total               | <u>25.</u> |

**Supporting Statement of:**

Form 990-PF, p2/Line 27(b)

| Description | Amount            |
|-------------|-------------------|
| NET ASSETS  | 3,790,732.        |
| Total       | <u>3,790,732.</u> |

**Supporting Statement of:**

Form 990-PF, p12/Line 4 Column (d)

| Description     | Amount         |
|-----------------|----------------|
| INTEREST INCOME | 6,250.         |
| DIVIDEND INCOME | 4,622.         |
| Total           | <u>10,872.</u> |