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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

Interna	tment al Rev	enue Service Note The foundation may t	be able to use a copy of this	return to satisfy state repo	rting requirements	Open to public Inspection
For c	aleni	dar year 2012 or tax year beginning OCT	1, 2012	, and ending	SEP 30, 201	3
Nan	ne of	foundation			A Employer identification	on number
\mathbf{T}	ΗE	GOOD WORKS INSTITUTE,	INC.	_	82-051803	5
Num	ber ar	nd street (or PO box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
P	.0	BOX 1811			208-726-4	421
-		wn, state, and ZIP code VALLEY, ID 83353	*		C If exemption application is	pending, check here
		all that apply Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizatio	ns, check here
		Final return	Amended return			
		Address change	Name change		2 Foreign organizations r check here and attach	neeting the 85% test, computation
H C	heck	type of organization X Section 501(c)(3) ex	empt private foundation		E If private foundation s	tatus was terminated
] Sec	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation	under section 507(b)(_ 1 1
I Fa	r ma	rket value of all assets at end of year J Accounting	ng method 🔀 Cash	Accrual	F If the foundation is in	a 60-month termination
(fr	om F		her (specify)		under section 507(b)(1)(B), check here
_	\$	176967 . (Part I, colu	mn (d) must be on cash t	basis)		
Pa	rt I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for chantable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	554974.		N/A	
		Check ▶ if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	632.	632.		Statement 1
l	5a	Gross rents				
	b	Net rental income or (loss)				, , , , , , , , , , , , , , , , , , , ,
a	6a	Net gain or (loss) from sale of assets not on line 10	-12830.			
ň	b	Gross sales price for all assets on line 6a 445467.				
Revenue	7	Capital gain net income (from Part IV, line 2)	`	0.		
Œ	8	Net short-term capital gain				
	9 10a	Income modifications Gross sales less than CEIVED and allowances				
		Less Cost of goods sold				
	C	Gross perfit or (IDSSN 17 2014 8				
	11	Other reforme	540556	632		
	12	Total. Add lines, through (1) Compensation of officers, directors, trustees, etc.	542776.	632.		0.
	13	W	30000.	0.		<u> </u>
		Other employee salaries and wages				
Ś		Pension plans, employee benefits				
ıse		Legal fees Accounting fees Stmt 2	1815.	908.		907.
ē			1015.	700.		
n Li		Other professional fees				
।∤ए, Administrative Expenses		Interest		-		
stra		Taxes				1
Ë	19	Depreciation and depletion				
Ş. du	20 21	Occupancy Travel, conferences, and meetings				
[] } }	22	Printing and publications				
g g	23	Other expenses Stmt 3	52.	4 .		48.
ŹĘ		Total operating and administrative				
JAN とう 仏形 Operating and Adı		expenses Add lines 13 through 23	31867.	912.	,	955.
₹ö	25	Contributions, gifts, grants paid	404934.			404934.
		Total expenses and disbursements.				
<u>u</u>	-	Add lines 24 and 25	436801.	912		405889.
SCANNED	27	Subtract line 26 from line 12				1
%	1	Excess of revenue over expenses and disbursements	105975.			
)	b	Net investment Income (if negative, enter -0-)		0 .		
	C	Adjusted net income (if negative, enter -0-)		<u> </u>	N/A	7 000 DE (0040)

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

1 Cash - non-interest-bearing

3 Accounts receivable

2 Savings and temporary cash investments

		Less allowance for doubtful accounts			
	4	Pledges receivable ►			
ı		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	-	disqualified persons			
	7	Other notes and loans receivable			
ļ	•	Less allowance for doubtful accounts	Ī		
,	8	Inventories for sale or use	-		
ssets		Prepaid expenses and deferred charges			
¥ÿ		Investments - U.S. and state government obligations			
		Investments - corporate stock			
ļ		Investments - corporate bonds	W-7 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		-
- 1	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
		Investments - mortgage loans	33322.		
	13	Investments - other	33322.		
ļ	14	Land, buildings, and equipment basis	!		
- 1		Less accumulated depreciation			
	15	Other assets (describe			
			70000	176067	176067
	16	Total assets (to be completed by all filers)	70992.	176967.	176967.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
iab	21	Mortgages and other notes payable			
	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
, n		and complete lines 24 through 26 and lines 30 and 31.			
Fund Balances	24	Unrestricted			
lau	25	Temporarily restricted			
æ	26	Permanently restricted			
ב		Foundations that do not follow SFAS 117, check here			
		and complete lines 27 through 31.		_	
S OF	27	Capital stock, trust principal, or current funds	0.	0.	
set	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	70992.	176967.	
Net Assets	30	Total net assets or fund balances	70992.	176967.	
_				176067	
	31	Total liabilities and net assets/fund balances	70992.	176967.	
		Analysis of Changes in Net Assets or Fund Bal	ances		
		net assets or fund balances at beginning of year - Part II, column (a), line 30			70002
		st agree with end-of-year figure reported on prior year's return)		1	70992.
		r amount from Part I, line 27a		2	105975.
		r increases not included in line 2 (itemize)		3	176067
		lines 1, 2, and 3		4	176967.
		eases not included in line 2 (itemize)		5	176967
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	mn (b), line 30	6_	176967.

Beginning of year

(a) Book Value

37670.

1035 Page 3		Page 3
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• 2-story brick v	scribe the kind(s) of property sold (e g warehouse, or common stock, 200 sha	, real estate, s MLC Co)		`P-	ow acquired Purchase Donation	(c) Date (mo , d		(d) Date sold (mo , day, yr)
1a Coo Attacha	d Chahamanh							
b See Attache	d Statement		 					
		 		+				
e				+				
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale		 _		ain or (loss) s (f) minus (
a		-						
b								
<u> </u>								
<u>d</u>						-		
e 445467			45829	7.				-12830.
Complete only for assets show	ring gain in column (h) and owned by	the foundation	on 12/31/69				ol (h) gain	
(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (i) col (j), if any			Losses	not less than (from col. (l	n -u-) or n))
a								
<u>b</u>				-+				
<u>C</u>								
<u>d</u>								12020
<u> </u>	<u></u>			_				-12830.
2 Capital gain net income or (net	capital loss) { If gain, also enter capital loss)	r in Part I, line ' - in Part I, line	7 7	}	2			-12830.
3 Net short-term capital gain or (I	oss) as defined in sections 1222(5) an	ıd (6)		$\langle \cdot $				
If gain, also enter in Part I, line i)			/ -	
If (loss), enter -0- in Part I, line	8				3		N/A	
	Under Section 4940(e) for				stment in	come		
For optional use by domestic priva	ite foundations subject to the section 4	1940(a) tax on	net investment in	ncome)				
f section 4940(d)(2) applies, leave	this part blank							
	·							
	ection 4942 tax on the distributable am		•	riod2				Yes X No
	<u>alify under section 4940(e). Do not co</u> n each column for each year, see the ir			ntriac				
(a)		istructions bei	ore making any e		·- <u>-</u>			(d)
Base periód years	(b) Adjusted qualifying dis	tributions	Net value of no	(c) oncharit	able-use assets		Distrib	ution ratio ided by col. (c))
Calendar year (or tax year begin	illig iii)	70506.			16293	1	(COI (D) GIVI	2.273922
2011		$\frac{70300.}{72754.}$			306716			.889272
2010 2009		02021.			260672			1.158625
2008		41702.			368198			1.199632
2007		10209.			81634			.502495
		10203.		,				
2 Total of line 1, column (d)						2		6.023946
	e 5-year base period - divide the total (on line 2 hy 5	or by the number	r of vear	¢			
the foundation has been in exist		on mic z by o,	or by the marrison	or your	•	3		1.204789
the foundation has been in exis	terior il 1035 than 5 yours							
Enter the net value of noncharit	able-use assets for 2012 from Part X,	line 5				4		134758.
Multiply line 4 by line 3						5		162355.
Enter 1% of net investment inco	ome (1% of Part I, line 27b)					6		0.
Add lines 5 and 6						7		162355.
								405000
B Enter qualifying distributions fro						8	·	405889.
If line 8 is equal to or greater the See the Part VI instructions	an line 7, check the box in Part VI, line	1b, and comp	lete that part usin	ıg a 1%	tax rate			

orm 99	0-PF(2012) THE GOOD WORKS INSTITUTE, INC.		82-051			Page 4
Part			or 4948 - see	instru	ction	<u>15)</u>
1a Ex	empt operating foundations described in section 4940(d)(2), check here 🕨 🔲 and er	nter "N/A" on line 1				
Da	te of ruling or determination letter (attach copy of letter if nec	essary-see instructions)				_
b Do	mestic foundations that meet the section 4940(e) requirements in Part V, check here	X and enter 1%	1			0.
	Part I, line 27b					
	other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%					_
2 Ta:	x under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Ot	hers enter -0-)	2			0.
	d lines 1 and 2		3			0.
4 Տս	btitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Of	thers enter -0-)	4			0.
5 Ta	x based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5			0.
	edits/Payments	1 1 00				
a 20	12 estimated tax payments and 2011 overpayment credited to 2012	6a 82	41.			
b Ex	empt foreign organizations - tax withheld at source	_6b				
c Ta	x paid with application for extension of time to file (Form 8868)	6c				
d Ba	ckup withholding erroneously withheld				00	4 1
	tal credits and payments. Add lines 6a through 6d		7		82	<u>41.</u>
8 En	ter any penalty for underpayment of estimated tax. Check here if Form 2220 is attac	ched	8			
	x due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9		0.0	4.1
	erpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	0041	▶ 10		82	41.
	ter the amount of line 10 to be Credited to 2013 estimated tax	8241 . Refunde	d ▶ 11	_		0.
	VII-A Statements Regarding Activities				Yes	Na
	ring the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or did it participate or inte	ervene in		res	X
	y political campaign?		10	1a		$\frac{\Lambda}{X}$
	d-it spend more than \$100 during the year (either directly or indirectly) for political purpos			1b	, ,	Λ_
	the answer is "Yes" to 1aor 1b, attach a detailed description of the activities and	a copies of any materials pu	blished or			
	stributed by the foundation in connection with the activities.					Х
-	the foundation file Form 1120-POL for this year?			10		Λ_
d En	ter the amount (if any) of tax on political expenditures (section 4955) imposed during the	year	0.			
(1)	On the foundation \$ 0. (2) On foundation managers	- 3				
	ter the reimbursement (if any) paid by the foundation during the year for political expendit	ture tax imposed on loundation				
	anagers ▶\$ 0.	202		2		Х
	s the foundation engaged in any activities that have not previously been reported to the IF	10'				
	"Yes," attach a detailed description of the activities.	netrument articles of incorners	tion or			
	s the foundation made any changes, not previously reported to the IRS, in its governing in laws, or other similar instruments? If "Yes," attach a conformed copy of the change		ition, or	3		Х
,	laws, or other similar instruments? If Yes, attach a comorned copy of the change If the foundation have unrelated business gross income of \$1,000 or more during the year			4a		X
	Yes," has it filed a tax return on Form 990-T for this year?	,	N/A	4b		
	as there a liquidation, termination, dissolution, or substantial contraction during the year?	1		5		X
	"Yes," attach the statement required by General Instruction T					
	e the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied ef	ther				
	By language in the governing instrument, or	••••				
•	By state legislation that effectively amends the governing instrument so that no mandator	v directions that conflict with th	e state law			
	remain in the governing instrument?	,		6		Х
	d the foundation have at least \$5,000 in assets at any time during the year?			7	X	
	"Yes," complete Part II, col (c), and Part XV.					
	ter the states to which the foundation reports or with which it is registered (see instruction	ns) ►	_		{	
	ID					
	the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Ai	ttorney General (or designate)				
	each state as required by General Instruction G? If "No," attach explanation	, , , ,		8b	Х	
g le	the foundation claiming status as a private operating foundation within the meaning of se	ction 4942(j)(3) or 4942(j)(5) f	or calendar			
	ar 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," c			9		_X_
10 Di	d any persons become substantial contributors during the tax year? If "Yes," attach a schedu	ile listing their names and addresses		10		X
			E o	rm 000	DE	20121

12-05-12

223541 12-05-12

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Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		
 5a During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section) 'Influence the outcome of any specific public election (see section 4955). 			es X No		
any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purpose	es?	Y6	es X No		
 (4) Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary 		es X No			
the prevention of cruelty to children or animals? b if any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify u		Ye	es X No		
section 53 4945 or in a current notice regarding disaster assistance (see inst	ructions)?		N/A	ib	
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? N/A Yes No If "Yes," attach the statement required by Regulations section 53 4945-5(d)					
 6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a 	o pay premiums on	Y6	es X No	Sb X	
If "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax	Y _E	es X No N/A	76		
Part VIII Paid Employees, and Contractors		nagers, Highly		<u>, n </u>	
1 List all officers, directors, trustees, foundation managers and their	r compensation.				
(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	
ANN M. DOWN	PRES				
P.O. BOX 3216 SUN VALLEY, ID 83353	0.50	0.	0.	0.	
SANDRA CLAPP	TRES	· ·	Ŭ.		
P.O. BOX 2660					
EAGLE, ID 83616	0.50	10000.	0.	0.	
DOUGLAS I. AANESTAD	SEC				
P.O. BOX 987					
KETCHUM, ID 83340	0.50	10000.	0.	0.	
PHYLIS HOCKETT	DIR				
5872 MOUNTAIN RANCH DRIVE				_	
PARK CITY, UT 84098	0.50	10000.	0.	0.	
2 Compensation of five highest-paid employees (other than those in		enter "NONE."	(d) Contributions to	(e) Expense	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	account, other allowances	
NONE	_				
	_				
	 				
	 				
	-				
		 			
Total number of other employees paid over \$50,000				0	

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations mu	st complete this part. Foreign four	ndations, see	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable,	etc , purposes		
а	Average monthly fair market value of securities	7,50	1a	2810.
	Average of monthly cash balances		1b	134000.
	Fair market value of all other assets		10	
d	Total (add lines 1a, b, and c)		1d	136810.
	Reduction claimed for blockage or other factors reported on lines 1a and			
	· · · · · · · · · · · · · · · · · · ·	e 0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	136810.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, si	ee instructions)	4	2052.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on P	art V, line 4	5	134758.
6	Minimum investment return Enter 5% of line 5		6	6738.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and foreign organizations check here and do not complete this part)	(j)(5) private operating foundations an	d certain	
1	Minimum investment return from Part X, line 6		1	6738.
	· · · · · · · · · · · · · · · · · · ·	a		
b	· · · · · · · · · · · · · · · · · · ·	?b		
C	Add lines 2a and 2b		2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1		3	6738.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	6738.
6	Deduction from distributable amount (see instructions)		6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XI	II, line 1	7	6738.
P	art XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purpos	ses		105000
	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26		1a	405889.
b	Program-related investments - total from Part IX-B		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable	, etc , purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the			
а	Suitability test (prior IRS approval required)	}	3a	
b	Cash distribution test (attach the required schedule)		3b	405000
4	$\textbf{Qualifying distributions}. \ \textbf{Add lines 1a through 3b } \ \textbf{Enter here and on Part V, line 8, and}$		4	405889.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investr	nent		0
	Income Enter 1% of Part I, line 27b		5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	l	6	405889.
	Nate. The amount on line 6 will be used in Part V, column (b), in subsequent years whe 4940(e) reduction of tax in those years	en calculating whether the foundation q	ualifies for the	esection

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THE GOOD WORKS INSTITUTE, INC.

Part XIII Undistributed Income (s	ee instructions)			
•	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2011	2011	2012
1 Distributable amount for 2012 from Part XI,				6500
line 7	·····		<u> </u>	6738.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			0.	
b Total for prior years		0.		
2 Francisco distribution and analysis of any to 2010	i,i,i,i,i,i,i,			- 1 '41- 11-1
3 Excess distributions carryover, if any, to 2012 a From 2007 369850.				
400010				
000041				
055400				
260205				
	1702020.			
f Total of lines 3a through e 4 Qualifying distributions for 2012 from	1702020.		······	
Part XII, line 4 ► \$ 405889 •				
a Applied to 2011, but not more than line 2a			0.	
b Applied to undistributed income of prior		1		·
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2012 distributable amount				6738.
e Remaining amount distributed out of corpus	399151.			
5 Excess distributions carryover applied to 2012	0.			0.
(If an amount appears in column (d), the same amount				······
must be shown in column (a)) 6 Enter the net total of each column as				
indicated below.				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	2101171.			
b Prior years' undistributed income Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2011 Subtract line				
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2012 Subtract				
lines 4d and 5 from line 1. This amount must				0
be distributed in 2013		,, , , , , , , , , , , , , , , , , , ,	-,	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007	260050			
not applied on line 5 or line 7	369850.			
9 Excess distributions carryover to 2013	1731321.			
Subtract lines 7 and 8 from line 6a	1/31321.			
10 Analysis of line 9 a Excess from 2008 423312.				
000041				
055400	1			
c Excess from 2010 25 / 4 32 . d Excess from 2011 362385 .	1			
e Excess from 2012 399151.	1			
E LAUGSS HUHI EUTE	r1	<u>`</u>		

	D WORKS INS			82-05	18035 Page 10
Part XIV Private Operating F	oundations (see in:	structions and Part VII	-A, question 9)	N/A	
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo	r 2012, enter the date of t	he ruling	>		
b Check box to indicate whether the found	dation is a private operatir	ng foundation described i	n section	4942(j)(3) or 49	142(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not			į		
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c 3 Complete 3a, b, or c for the					
alternative test relied upon					
a "Assets" alternative test - enter					
(1) Value of all assets	ļ				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter					
(1) Total support other than gross					
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(III)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income	1			1 105 000	
Part XV Supplementary Info			if the foundation	n had \$5,000 or mo	ore in assets
at any time during t	···	uctions.)			
1 Information Regarding Foundation	_	00/ af the tatal again	ubutana manusad bu th	na farradabras bafara tha alar	
a List any managers of the foundation where year (but only if they have contributed n			ributions received by ti	ne toundation before the clos	se of any tax
ANN M. DOWN	1010 111411 40,000, (0000				
b List any managers of the foundation wh	o own 10% or more of th	e stock of a corporation (or an equally large por	tion of the ownership of a pa	artnership or
other entity) of which the foundation has					•
None					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pro	ograms:		
Check here Lifthe foundation of the foundation makes gifts, grants, etc.	•	•	•	•	
<u></u>				Complete items za, b, c, and	<u> </u>
a The name, address, and telephone num ANN DOWN, $208-726-44$		ii to wiioiii applications s	iloulu de audiesseu		
P.O. BOX 1811, SUN V		3353			
b The form in which applications should b			ould include		
SEE ATTACHED GRANT A					
c Any submission deadlines NONE					
d Any restrictions or limitations on awards	s, such as by geographica	l areas, charitable fields,	kinds of institutions, o	r other factors	
NONE					
					- 000 PE
223601 12-05-12					Form 990-PF (2012)

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient a Paid during the year ADVOCATES FOR SURVIVORS OF DOMESTIC N/A PUBLIC GENERAL 10000. VIOLENCE N/A PUBLIC GENERAL AMERICAN HERITAGE WILDLIFE 1000. PUBLIC GENERAL N/A AMISTAD INT'L 35556. GENERAL PUBLIC N/A BOISE URBAN GARDEN SCHOOL 6000. PUBLIC GENERAL BUTTE COUNTY SCHOOL DISTRICT N/A 7500. See continuation sheet(s) ➤ 3a 404934. Total **b** Approved for future payment None **≥** 3b ٥. Total

Part XVI-A	Analysis of	Income-Producing	Activities
I SHILL VALUE A	Allalysis Ul	III COILLE-FI OUUCIII II	ACHVILLES

Enter gross amounts unless otherwise indicated	Unrelated t	ousiness income	Excluded	by section 512, 513, or 514	(a)
	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	(e) Related or exempt function income
1 Program service revenue	code		code	7 mount	Tanction income
a	i		+		
· -			-		
			 		
e			 		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					632.
5 Net rental income or (loss) from real estate					
a Debt-financed property			 		
b Not debt-financed property			 		
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			1 1		-12830.
9 Net Income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a					
b	1 1				
C					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		0	•	0.	-12198.
13 Total Add line 12, columns (b), (d), and (e)				13	-12198.
Part XVI-B Relationship of Activitie Line No. Explain below how each activity for which	s to the Accom				plishment of
▼ the foundation's exempt purposes (other t					·
NONE					
					
					
					
	· · · · · · · · · · · · · ·				
					
				·	
		<u> </u>			
					
223621 12-05-12					Form 990-PF (2012)
12-05-12					

Part	Information Regarding Transfers Exempt Organizations	To and Transactions ar	nd Relationships With Nonch	aritable)	
1 Die	id the organization directly or indirectly engage in any of the f	ollowing with any other organization	n described in section 501(c) of		Yes	No
	e Code (other than section 501(c)(3) organizations) or in sec					
	ransfers from the reporting foundation to a noncharitable exe					
) Cash	•		1a(1)	1	Х
(2	?) Other assets			1a(2)		Х
b Ot	ther transactions					
(1)) Sales of assets to a noncharitable exempt organization			1b(1)		Х
(2	Purchases of assets from a noncharitable exempt organization	ition		1b(2)		X
(3	Rental of facilities, equipment, or other assets			1b(3)		X
(4	Reimbursement arrangements			1b(4)		Х
(5	b) Loans or loan guarantees			1b(5)		Х
(6)	i) Performance of services or membership or fundraising so	licitations		1b(6)		X
c Sh	haring of facilities, equipment, mailing lists, other assets, or p	aid employees		10		Х
	the answer to any of the above is "Yes," complete the following services given by the reporting foundation. If the foundation		· ·		ets,	
	olumn (d) the value of the goods, other assets, or services rec		(d) p			<u></u>
(a) Line		aritable exempt organization / A	(0) Description of transfers, transactions, an	nd sharing arm	angeme	nts
	_ IN	/ A				
0- 1-	All for add to a discount of the second of t		ations described			
	the foundation directly or indirectly affiliated with, or related to section 501(c) of the Code (other than section 501(c)(3)) or		ations described	Yes	X	7 No
	"Yes," complete the following schedule	in section 327		103		טאונ
יו ע	(a) Name of organization	(b) Type of organization	(c) Description of relation	nship		
	N/A	(4)		<u> </u>		
	Under penalties of perjury, I declare that I have examined this return, and belief, it is true, correct, and complete. Declaration of preparer (o		tion of which account has any branched as	lay the IRS d		
Sign		1 /	s	eturn with the hown below (see inst	ir)?
Here	00000	1/14/19	PRESIDENT	X Yes	L	. No
	Signature of officer or trustee	Date /	Title Date Check If PTIN			
	Print/Type preparer's name Prepa	rer's signature	Date Check I If PTIN	•		
Paid	Donald Buttonhora	reld fattoties 1	I I	00145	7 3 2	
Prep			Firm's EIN ▶ 94-3	309576	50	
-	Only	no a con cra b	Timis Live Da			
	Firm's address ▶ 433 AIRPORT BL	VD., SUITE 130				
		94010	Phone no 650-	-342-5	5272	2
				Form 990 -		

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

2012

Т	HE GOOD WORKS INSTITUTE, INC.	82-0518035			
Organization type (check of	one):				
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation				
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					
Form 990 or 990-EZ					
contributions for u If this box is check purpose. Do not c	se <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not tot ced, enter here the total contributions that were received during the year for an <i>exclusive</i>	al to more than \$1,000. <i>ly</i> religious, charitable, etc.,			

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

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 II, 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).

Employer identification number

THE GOOD WORKS INSTITUTE, INC.

Part I	Contributors	see instructions). Use dup	licate copies of Part 1	if additional space is needed
--------	--------------	----------------------------	-------------------------	-------------------------------

Part I	Contributors (see instructions). Use duplicate copies of Part I	if additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ANN M. DOWN P.O. BOX 3216 SUN VALLEY, ID 83353	\$\$	Person X Payroll X Noncash X (Complete Part II if there Is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	ANN M. DOWN P.O. BOX 3216 SUN VALLEY, ID 83353	\$	Person X Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	ANN M. DOWN P.O. BOX 3216 SUN VALLEY, ID 83353	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	ANN M. DOWN P.O. BOX 3216 SUN VALLEY, ID 83353	\$	Person X Payroll X Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	ANN M. DOWN P.O. BOX 3216 SUN VALLEY, ID 83353	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	ANN M. DOWN P.O. BOX 3216	\$	Person X Payroll X Noncash X (Complete Part II if there
222452 12 2	SUN VALLEY, ID 83353	Schadula R (Form	990 990-F7 or 990-PF) (2012)

Employer identification number

THE G	OOD WORKS INSTITUTE, INC.		82-0518035
Part I	Contributors (see instructions). Use duplicate copies of Part	I if additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	ANN M. DOWN		Person X
	P.O. BOX 3216	\$	Payroll X
	SUN VALLEY, ID 83353		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	ANN M. DOWN		Person X
	P.O. BOX 3216	\$	Payroll X
	SUN VALLEY, ID 83353		(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	ANN M. DOWN		Person X
	P.O. BOX 3216		Payroll Noncash X
	SUN VALLEY, ID 83353		(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	ANN M. DOWN		Person X
	P.O. BOX 3216	\$	Payroll X
	SUN VALLEY, ID 83353		(Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	ANN M. DOWN		Person X
	P.O. BOX 3216	 	Payroll Noncash X
	SUN VALLEY, ID 83353		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12			Person X
		\$	Payroll Noncash
			(Complete Part II if there is a noncash contribution)
		October 15 Difference	- 000 000 F7 000 BF\ (0040)

Employer identification number

$\mathtt{THE} \cdot \mathtt{GOC}$	D WOI	RKS IN	STITUI	E, INC].

Part I	Contributors (see instructions). Use duplicate copies of Part I if	additional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
13		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person Payroll Noncash (Complete Part II if there Is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Moncash (Complete Part II if there is a noncash contribution)

Employer identification number

THE GOOD WORKS INSTITUTE, INC.

art II	Noncash Property (see instructions) Use duplicate copies of Par	t II if additional space is needed.	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	2891 SHARES ISHARES RUSSELL 1000		
$\frac{1}{}$			
		\$\$	03/04/13
(a) No. rom art l	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	38 SHARES APPLE		
2		\$\$	06/19/13
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	723 SHARES CADENCE		
_3		_	
		<u> </u>	06/19/13
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	205 SHARES CITIGROUP	_	
4		\$10154.	06/19/13
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
art I	1392 SHARES ISHARES RUSSELL 1000	(
_5	2022 20000 2000 2		
		<u> </u>	06/19/13
(a) No. rom art i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	230 SHARES JP MORGAN CHASE	_	
		_	06/10/10
	1-12	\$ 12316.	06/19/13 0, 990-EZ, or 990-PF) (

Employer identification number

THE GOOD WORKS INSTITUTE, INC.

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is	s needed.
--	-----------

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
7	347 SHARES MICROSOFT		
		<u> </u>	06/19/13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
8	428 SHARES PFIZER		
		<u> </u>	06/19/13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
9	41 SHARES VISA		
		\$\$	06/19/13
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
10	285 SHARES WELLS FARGO		
		\$\$	06/19/13
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
11	15 SHARES GOOGLE		
		\$ 13271.	06/19/13
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of orga	anization			Employer identification number			
THE •GO	OOD WORKS INSTITUTE, INC	2.		82-0518035			
Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and th the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additional	idual contributions to section 501() e following line entry. For organizati , contributions of \$1,000 or less fo	c)(7), (8), or (10) orgons completing Part r the year (Enter this info	anizations that total more than \$1,000 for the			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		d) Description of how gift is held			
-		(e) Transfer of gi	ft				
	Transferee's name, address, an		Relationshi	p of transferor to transferee			
(a) No.		į.					
from Part I	(b) Purpose of gift	(c) Use of gift		d) Description of how gift is held			
	(e) Transfer of gift						
	Transferee's name, address, an		Relationshi	p of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
-	(e) Transfer of gift						
	Transferee's name, address, an	d ZIP + 4	Relationshi	p of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held			
-		(e) Transfer of gi	ft				
-	Transferee's name, address, an	d ZIP + 4	Relationshi	p of transferor to transferee			

Part IV Capital Gains and Los	sses for Tax on Investment Income				
(a) List and	describe the kind(s) of property sold ick warehouse, or common stock, 20	1, e g , real estate, 10 shs MLC Co	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a 2300 SHARES NU	VEEN PFD FD2		D	06/25/03	12/12/12
b 2891 SHARES IS	HARES RUSSELL 10	00	D	03/04/13	03/05/13
c 38 SHARES APPL	E		D	06/19/13	
	ENCE		D	06/19/13	
	IGROUP		D	06/19/13	
	HARES RUSSELL 10	00	D	06/19/13	
	MORGAN CHASE		D	06/19/13	
	ROSOFT		D	06/19/13	
1 428 SHARES PFI	ZER		D	06/19/13	
41 SHARES VISA			<u>D</u>	06/19/13	
k 285 SHARES WELL			P	06/19/13	
1 15 SHARES GOOG	LE		P	06/19/13	06/28/13
<u>m</u>				 	
<u>n</u>					
0			<u> </u>	<u> </u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) plus (f) minus (g)	
a 22214.		33322.			-11108.
b 202767.		201098.	•,	· · · · · · · · · · · · · · · · · · ·	1669.
c 14913.		16074.			-1161.
d 10415.		10722.			-307.
e 9800.		10154.			-354. -706.
f 117099. g 12090.		12317.	· · · · · · · · · · · · · · · · · · ·	·	-700. -227.
11000		12003.			-227. -68.
h 11935. 1 12024.		12455.			$\frac{-30.}{-431.}$
7415.		7488.			-73.
k 11710.		11588.	1		122.
13085.		13271.			-186.
m					
n					
0					
	g gain in column (h) and owned by t	he foundation on 12/31/69	(I) Lo:	sses (from col (h))	
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		of col. (h) gain over not less than "-0-")	col (k),
a	_				-11108.
b					1669.
С					-1161.
d					-307.
е					-354.
f					-706.
g					-227.
h					-68.
					-431.
					-73.
<u>k</u>	-		_, <u></u>		122. -186.
1		· · · · · · · · · · · · · · · · · · ·			-190.
m					
<u>n</u>					
0	r If gain also enter	in Part I line 7			4655
2 Capital gain net income or (net ca		\			-12830.
3 Net short-term capital gain or (los If gain, also enter in Part I, line 8,	column (c)	}		37 / -	
If (loss), enter "-0-" in Part I, line 8				N/A_	

Part XV Supplementary Informat				1
3 Grants and Contributions Paid During th				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
CASA PARA LOS ADOLESCENTES	N/A	PUBLIC	GENERAL	12000
COMPASSION BEYOND BORDERS	N/A	PUBLIC	GENERAL	20000
FAITH FOUNDATION FLORI	N/A	PUBLIC	GENERAL	20000
GRACE	N/A	PUBLIC	GENERAL	27233
GREEN EMPOWERMENT	N/A	PUBLIC	GENERAL	15000
HANDS TO HEARTS INT'L	N/A	PUBLIC	GENERAL	15000
HELP	N/A	PUBLIC	GENERAL	5000
HUNGER COALITION	N/A	PUBLIC	GENERAL	10000
MACHIK	N/A	PUBLIC	GENERAL	15000
MACKAY ELEMENTARY SCHOOL	N/A	PUBLIC	GENERAL	10000. 344878.
Total from continuation sheets				344070

3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
IEPAL CLEFT & BURN CENTER	N/A	PUBLIC	GENERAL	10000
		DVD TO	GENERAL	
NORTHERN FUND	N/A	PUBLIC	GENERAL	10000
NYALA HEALTH	N/A	PUBLIC	GENERAL	10000
ODFL	N/A	PUBLIC	GENERAL	10000
				10000
OLENTARGY MEADOWS ELEM SCHOOL	N/A	PUBLIC	GENERAL	3000
ONE HEART	N/A	PUBLIC	GENERAL	16645
PACHAMAMA ALLIANCE	n/A	PUBLIC	GENERAL	
			-	20000
PMAKO HEALTH INIATIVE	N/A	PUBLIC	GENERAL	5000
THE SAGE SCHOOL	N/A	PUBLIC	GENERAL	10000
THRIVE	N/A	PUBLIC	GENERAL	24000

Part XV Supplementary Information	on			
3 Grants and Contributions Paid During the	Year (Continuation)	· 		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
VALENTINO ACHAR DENG FDN	N/A	PUBLIC	GENERAL	12000
				12000.
WESTERN WATERSHEDS PROJECT	N/A	PUBLIC	GENERAL	
				15000.
WILD 4 LIFE	N/A	PUBLIC	GENERAL	20000.
WOMEN'S WORLD HEALTH INT'L	N/A	PUBLIC	GENERAL	
				20000.
WORLDWIDE HEALING HANDS	N/A	PUBLIC	GENERAL	10000.
Total from continuation sheets			 	

Form 990-PF Dividend	ls and	Inter	est	from	Secui	rities	Statement	1
Source	Gross Amount 632.		Capital Gains Dividends		Column (A) Amount 632.			
SMITH BARNEY								
Total to Fm 990-PF, Part I, 1	.n 4			632.	=	0.		532.
Form 990-PF	Ace	counti	ng F	ees			Statement	2
Description	Expe	a) nses Books		(b) Inve		(c) Adjusted Net Incom		
ACCOUNTING FEES - RONALD RUTTENBERG & CO.		1815.			908.		9	907.
To Form 990-PF, Pg 1, ln 16b	1815.		908.		907.			
Form 990-PF	0	ther Ex	xpen	ses			Statement	3
Description	Expe	a) nses Books		(b) Inve		(c) Adjusted Net Incom		
OFFICE EXPENSES INTEREST		48.			0 . 4 .			48.
To Form 990-PF, Pg 1, ln 23		52.			4.			48.