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### **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter Social Security numbers on this form as it may be made public.

OMB No 1545-0052 2013

Department of the Treasury

For Paperwork Reduction Act Notice, see instructions.

EEA

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

		enue Service Information about Form 990-PF and its se	eparate instructions	is at www	.irs.gov/forr	n990pf. Open	to Public Inspection		
For	r caler	ndar year 2013 or tax year beginning		and endir			, 20		
		foundation	A Employer identification number						
		RT LEMHI COUNTY YOUTH SPORTS			94-3042135				
		and street (or P O box number if mail is not delivered to street address)	R	oom/suite	1	number (see instructions	)		
		MAIN STREET-SUITE 4			(208)4	66-2443	<del></del>		
		own, state or province, country, and ZIP or foreign postal code  N, ID 83467			C If exempt	tion application is pending,	check here		
			-f - f   -   -				<u> </u>		
Ū	Oncor	Final return Amended re	of a former public cha	nty	D 1. Foreig	n organizations, check he	re ▶ [		
		Address change Name change				n organizations meeting th			
Н	Check	type of organization X Section 501(c)(3) exempt printing			1	here and attach computat			
Г	7		taxable private founda	tion	E If private	foundation status was terr 07(b)(1)(A), check here	minated under		
ī		arket value of all assets at J Accounting method	14-1	Accrual	1				
	end of	year (from Part II, col (c), Other (specify)	<u></u>	.00.00.		ndation is in a 60-month te ction 507(b)(1)(B), check h			
	line 16		e on cash basis.)		0.,00,00	συστισο (σχιχο), οποσκι			
P	art I						(d) Disbursements		
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	for charitable		
		the amounts in column (a) (see instructions) )	books	ļ in	come	income	purposes (cash basis only)		
	1	Contributions, gifts, grants, etc , received (attach schedule)							
	2	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	18,896		18,896	18,896	· · · · · · · · · · · · · · · · · · ·		
	5a	Gross rents	150		150	150	: 		
	b	Net rental income or (loss)	4 1 41-41-	<del></del>			· · · · · · · · · · · · · · · · · · ·		
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	3,308						
	b	Gross sales pnce for all assets on line 6a 91,228  Capital gain net income (from Part IV, line 2)	<del>11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1</del>	м		11	<del></del>		
Re	8	Net short-term capital gain			3,308		· ·		
	9	Income modifications	···· · · · · · · · · · · · · · · · · ·		<del>- , , , , , , , , , , , , , , , , , , ,</del>				
	10a	Gross sales less returns and allowances		<b></b>					
	Ь	Less Cost of goods sold	,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,	·	<del></del>				
	c	Gross profit or (loss) (attach schedule)							
	11	Other income (attach schedule) STM106	178	*	178	178	· · · · · · · · · · · · · · · · · · ·		
	12	Total. Add lines 1 through 11	22,532		22,532	19,224			
	13	Compensation of officers, directors, trustees, etc	3,121				3,121		
S	14	Other employee salaries and wages							
nses	15	Pension plans, employee benefits							
<u> </u>	16a	Legal fees (attach schedule)							
<b>3</b> û	Ь	Accounting fees (attach schedule) STM108	1,450				1,450		
ĕ€	С	Other professional fees (attach schedule)							
Ę,	17	Interest RECEIVED							
٦≅	18	Taxes (attach schedule) (see instructions) STM110	45				45		
湮	19	Depreciation (attach schedule) and depletion STM126					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
چة	20	de pan GEP. 0 2.2014 .   O					<del></del>		
岩	21	Travel, conferences, and meetings				-	<del></del>		
<b>%</b>	23	Printing and publications 1.7	32		32	32			
\$₹	24	Total operating and administrative expenses.	2,538		2,538	2,538			
Operative Experimentative Exper		Add lines 13 through 23	7 100		2 570	0 550	4 63 6		
ŏ	25	Contributions, gifts, grants paid	7,186 10,836		2,570	2,570	4,616		
	26	Total expenses and disbursements. Add lines 24 and 25.	18,022	<u> </u>	2,570	2,570	10,836		
	27	Subtract line 26 from line 12	10,022		2,370	2,370	15,452		
	а	Excess of revenue over expenses and disbursements .	4,510		1	#			
	ь	Net investment income (if negative, enter -0-)	-,	•••••••••	19,962	·····	······		
	С	Adjusted net income (if negative, enter -0-)	 			16,654	- willia hadan an aritta		

Page 2

P	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year
	T.	should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	13,621	16,007	16,007
	2	Savings and temporary cash investments	43,893		
	3	Accounts receivable ▶		,,,,,,,	
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	l	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			
ets	8	Inventories for sale or use		-	
Assets	9	Prepaid expenses and deferred charges			
⋖	10a	Investments - U S. and state government obligations (attach schedule)			
		Investments - corporate stock (attach schedule) STM137	296,903	343,036	369,930
	С	· · · · · · · · · · · · · · · · · · ·	40,089	39,974	41,996
	11	Investments - land, buildings, and equipment basis			1
		Less accumulated depreciation (attach schedule)	1		
	12	Investments - mortgage loans	·		
	13	Investments - other (attach schedule)			
	14	Land, buildings, and equipment basis ▶3			
		Less accumulated depreciation (attach schedule)	3	3	
	15	Other assets (describe ▶			
	16	Total assets (to be completed by all filers - see the			
		ınstructions. Also, see page 1, item l)	394,509	399,020	427,933
_	17	Accounts payable and accrued expenses	3347303	333,020	421,333
	18	Grants payable			
es	19	Deferred revenue			
≝	20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule)				
Liabilities					{
Ξ	22	Other habilities (describe >			
	23	Total liabilities (add lines 17 through 22)	0		
	23		U	0	<u> </u>
		Foundations that follow SFAS 117, check here · · · · · · ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.			
alances	24	Unrestricted			
aŭ	25				
Bal	26	Temporarily restricted		<del></del>	
Net Assets or Fund Ba	20	Permanently restricted			
Ë		Foundations that do not follow SFAS 117, check here X			
ř	27	and complete lines 27 through 31.			
ls c		Capital stock, trust principal, or current funds			
se	28	Paid-in or capital surplus, or land, bldg., and equipment fund		<u> </u>	
As	29	Retained earnings, accumulated income, endowment, or other funds	394,509	399,020	
et	30	Total net assets or fund balances (see instructions)	394,509	399,020	
~	31	Total liabilities and net assets/fund balances (see			
<u> </u>	4 11	instructions)	394,509	399,020	
	art III				
		net assets or fund balances at beginning of year - Part II, column (a), line			
		f-year figure reported on pnor year's return)			394,509
		amount from Part I, line 27a		<u>2</u>	4,510
		Increases not included in line 2 (itemize) ▶ STM115		3	1
		nes 1, 2, and 3		4	399,020
		eases not included in line 2 (itemize)▶		5	<u> </u>
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, or	olumn (b), line 30	6	399,020
EEA					Form 990-PF (2013)

Part IV   Capital Gains a	and Losses for Tax on Inves	tment Income	9					
(a) List and describ 2-story brick ware	(b) How acquired P-Purchase D-Donation	(c) Date acquired (d) L		(d) Date sold (yr, mo, day)				
1a D A DAVIDSON MUTO	JAL FUNDS		P	Variou	-	Virious		
b								
С								
d		<del></del> -						
<u>e</u>								
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or o		(h) Gain or (loss) (e) plus (f) minus (g)				
a 91,228			87,920	3,308				
b				•				
С								
d								
e								
Complete only for assets show	wing gain in column (h) and owned b	y the foundation o	n 12/31/69	(I) G	ains (Co	I (h) gain minus		
(i) F M V as of 12/31/69	g (j) Adjusted basis (k) Excess of col (i) as of 12/31/69 over col (j), if any			col (k)	, but not	less than -0-) or om col (h))		
a					3,3			
b		-						
С	***************************************	-						
d				-		•		
e				-				
2 Capital gain net income or (ne	at canital loss t	o enter in Part I, lir		2		3,308		
3 Net short-term capital gain or	(loss) as defined in sections 1222(5)							
· · ·	e 8, column (c) (see instructions) If (l							
		•	``}	3				
	nder Section 4940(e) for Rec		Net Investme					
If "Yes," the foundation does not c	section 4942 tax on the distributable qualify under section 4940(e) Do not	complete this par	t			Yes X No		
	in each column for each year, see the	ne instructions befo	ore making any e	ntries				
(a)  Base period years  Calendar year (or tax year beginnin	g in) Adjusted qualifying distributions	Net value of r	(c) noncharitable-use as	ssets (col (b) divided by col (c))				
2012	17,2	41	373,0	38	0.	046218		
2011	8,9	18	371,1	L40	0.	024029		
2010	12,0	17	346,0	085	0.	034723		
2009	7,7	48	302,1	L77	0.	025641		
2008	21,0	83	316,6	576	0.	066576		
2 Total of line 1, column (d)				2	0.	197186		
_	he 5-year base period - divide the to on has been in existence if less than	•	•	3	0.	039437		
	ritable-use assets for 2013 from Part							
						402,891		
5 Multiply line 4 by line 3			• • • • • • • •	5	5 15,889			
6 Enter 1% of net investment in	come (1% of Part I, line 27b)			6		200		
7 Add lines 5 and 6				7		16,089		
	rom Part XII, line 4					15,452		
Part VI instructions	han line 7, check the box in Part VI,	ine 1b, and compl	ete that part using	g a 1% tax rat	e. See	rne		

Form	990-PF (2013) HEMMERT LEMHI COUNTY YOUTH SPORTS 94-3042			Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instru	ction	s)	
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1 →			
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			399
	here ▶ and enter 1% of Part I, line 27b		-11111	
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of			
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) . 2			0
3	Add lines 1 and 2			399
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) . 4			0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			399
6	Credits/Payments Credits/Payments			
а	2013 estimated tax payments and 2012 overpayment credited to 2013   6a			
b	Exempt foreign organizations - tax withheld at source 6b			
С	Tax paid with application for extension of time to file (Form 8868) 6c			
d	Backup withholding erroneously withheld 6d			
7	Total credits and payments Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			399
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			777
11	Enter the amount of line 10 to be Credited to 2014 estimated tax ▶ Refunded ▶ 11			
	rt VII-A Statements Regarding Activities			
1a			Yes	No
	participate or intervene in any political campaign?	1a	103	X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	10		71
-	instructions for the definition)?	1b		x
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		<b>.</b>	
	published or distributed by the foundation in connection with the activities			
c	Did the foundation file Form 1120-POL for this year?	1c	Ī	х
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	10	ļ	A
•	(1) On the foundation ►\$ (2) On foundation managers. ►\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
C	on foundation managers.   \$\Bigs\\$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	,	•	v
-		2	<u> </u>	X
3	If "Yes," attach a detailed description of the activities  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			
3			Ī	v
4a	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
b	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u> </u>
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	4b		X
3	If "Yes," attach the statement required by General Instruction T	5	<del> </del>	<del>  . ↑</del>
6	· · ·			
U	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  • By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that	1		.,
-	conflict with the state law remain in the governing instrument?	6	7-	X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	ID			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation N/A (IIII)	8b		X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes,"			
	complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		X

	990-PF (2013) HEMMERT LEMHI COUNTY YOUTH SPORTS 94-3042	2135	F	age 5
Pa	rt 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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	_
	Website address   ECASEY1@CABLEONE.NET			
14	The books are in care of ▶ ELIZABETH CASEY  Telephone no ▶ 208-	466-2	443	
	Located at ▶ 326 S MIDDLE CREEK DRIVE, NAMPA, ID ZIP+4 ▶ 8368	6	_	
15				<b>▶</b> □
	and enter the amount of tax-exempt interest received or accrued during the year ▶   15			_
16	- · ·		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	' ' '	Х
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of		·	
	the foreign country			
Pa	rt 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.	T	Yes	No
1a	During the year did the foundation (either directly or indirectly):		1.55	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		1	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a		Ī	
	disqualified person?		Ī	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		ŧ	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		1	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		ļ	
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		1	
	foundation agreed to make a grant to or to employ the official for a period after	İ	Ī	
	termination of government service, if terminating within 90 days ) Yes X No		Ī	
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)?	1 <sub>b</sub>		
	Organizations relying on a current notice regarding disaster assistance check here		-	
С	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 2013?	1c	Ť	х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private		<u> </u>	
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)).		Ī	
а	At the end of tax year 2013, did the foundation have any undistributed income (lines 6d and		1	
	6e, Part XIII) for tax year(s) beginning before 2013? Yes X No			
	If "Yes," list the years  ,,,		1	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		Ī	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	1	Ī	
	all years listed, answer "No" and attach statement - see instructions )	2b	Ī	x
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	-	ļ	
	•		]	
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b			I	
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the		1	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of	l		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		İ	
	foundation had excess business holdings in 2013 )	3b	†	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	70		
~	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2013?	4b	Ī	Х
		1 40		42

HEMMERT LEMHI COUNTY YOUTH SPORTS

	1990-PF (2013) HEMMERT LEMHI COUNT IT VII-B Statements Regarding Activitie			1720	May Roll	Poquir	94-3042	2135	Page 6
5a				14/20	way be	Keguii	ea (continuea)	1	
Ja	During the year did the foundation pay or incur any a					1	□ <b></b>		
	(1) Carry on propaganda, or otherwise attempt to in		-		. ,,	• • •	Yes X No		
	(2) Influence the outcome of any specific public elec	-		•		ı			
	directly or indirectly, any voter registration drive?						Yes X No		
	(3) Provide a grant to an individual for travel, study,	or other	similar purpos	es?			Yes X No		
	(4) Provide a grant to an organization other than a continuous	charitable	e, etc , organiz	ation de	scribed in				
	section 509(a)(1), (2), or (3), or section 4940(d)(	(2)? (see	instructions)			[	Yes X No		
	(5) Provide for any purpose other than religious, cha		-			,			
	purposes, or for the prevention of cruelty to child					ſ	Yes X No		
b	If any answer is "Yes" to 5a(1)-(5), did any of the tra								
_	Regulations section 53 4945 or in a current notice re		-		•			1 †	
								5b	
	Organizations relying on a current notice regarding or						▶ 📋	1 1	
С	If the answer is "Yes" to question 5a(4), does the fou					r		1 1	
	because it maintained expenditure responsibility for	the gran	t?			[	Yes No		
	If "Yes," attach the statement required by Regulation	ns sectio	n 53 4945-5(d	)				1 1	
6a	Did the foundation, during the year, receive any fund	ds, direct	tly or indirectly	to pay	premiums				
	on a personal benefit contract?					[	Yes X No	1	
b	Did the foundation, during the year, pay premiums, o						·	6ь [	X
	If "Yes" to 6b, file Form 8870.	•	•	•					<del>-  </del>
7a	At any time during the tax year, was the foundation a	a party to	a prohibited t	ax shelt	er transactio	n2	Yes X No		
	If "Yes," did the foundation receive any proceeds or							7 <sub>b</sub>	
	t VIII Information About Officers, Dire								
Li Cui	and Contractors	ciois,	iiustees,	rounu	alion iviai	layers	, riigiliy Falu i	=mpio	rees,
					<del> </del>				
<u> 1 L</u>	ist all officers, directors, trustees, foundation man					7		_	
	(a) Name and address	hou	hours per week (If not p		ompensation not paid, nter -0-)	t paid, employee benefit plans			nse account, illowances
ELI	ZABETH CASEY	MANAG	ER						
326	S MIDDLE CREEK DRIVE, ID 83686		4		3,121		0		0
					-				
		1				· -		•	
						}			
	Compensation of five highest-paid employees (other NONE."	er than t	hose include	d on line	1 - see ins	truction	s). If none, enter		
			4=				(d) Contributions to		
	(a) Name and address of each employee paid more than \$50	,000	(b) Title, and a hours per w devoted to po	eek T	(c) Comper	nsation	employee benefit plans and deferred compensation	(e) Exper other a	nse account, llowances
NON	B								
					İ				
		-							
			l. <u></u>						
			]						
	· · · · · · · · · · · · · · · · · · ·								
			•						
Total	number of other employees paid over \$50,000								0

Form 990-PF (2013)

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Booking the tire largest program related in restriction to the restriction of the largest program related to	
1	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	

EEA

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign for	oundat	ions,
<u> </u>	see instructions.)	Ε 1	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes.		
a	Average monthly fair market value of securities	1a	372,265
b	Average of monthly cash balances	1b	36,761
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	409,026
е	Reduction claimed for blockage or other factors reported on lines 1a and		
_	1c (attach detailed explanation)	1	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	409,026
4	Cash deemed held for charitable activities  Enter 1 1/2% of line 3 (for greater amount, see	} }	
	instructions)	4	6,135
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	402,891
6	Minimum investment return. Enter 5% of line 5	6	20,145
Pa	rt 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.)	<del></del>
1	Minimum investment return from Part X, line 6	1	20,145
2a	Tax on investment income for 2013 from Part VI, line 5		
þ	Income tax for 2013 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	399
3	Distributable amount before adjustments Subtract line 2c from line 1	3	19,746
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	19,746
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	<u>line 1 </u>	7	19,746
Pa	rt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	1	
a	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	15,452
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	<del>                                     </del>	
-	purposes	2	
3	Amounts set aside for specific chantable projects that satisfy the	<del>-</del>	
а	Suitability test (pnor IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4.	4	15,452
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
-	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	15,452
•	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether	۔۔۔۔	
	qualifies for the section 4940(e) reduction of tax in those years	2.0.00	

1	Distributable amount for 2013 from Part XI,	(a) Corpus	(b) Years pnor to 2012	(c) 2012	(d) 2013
	line 7	·····			19,746
2	Undistributed income, if any, as of the end of 2013			-	
а	Enter amount for 2012 only	~~~~		17,051	
Ь	Total for prior years:,,				
3	Excess distributions carryover, if any, to 2013		1	1	
а	From 2008			1	
b	From 2009		1	1	
С	From 2010		1	1	
d	From 2011		1	1	
е	From 2012		1	<u> </u>	
f	Total of lines 3a through e		<u> </u>		
4	Qualifying distributions for 2013 from Part XII,				
	line 4. ▶ \$15,452		<b>1</b>	1	
а	Applied to 2012, but not more than line 2a			15,452	
þ	Applied to undistributed income of prior years				- <del> </del>
	(Election required - see instructions)			1	
C	Treated as distributions out of corpus (Election			· · · · · · · · · · · · · · · · · · ·	· , , , , , , , , , , , , , , , , , , ,
	required - see instructions)		1	Ţ	
d			·	· · · · · · · · · · · · · · · · · · ·	
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2013 .				
	(If an amount appears in column (d), the same	······			<del></del>
	amount must be shown in column (a))			<b>!</b>	
6	Enter the net total of each column as		}	1	
	indicated below:		1	-	
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5.			1	
b		· · · · · · · · · · · · · · · · · · ·	<u> </u>	<del></del>	
	line 4b from line 2b				
С	Enter the amount of prior years' undistributed	1 197-1		··· · · · · · · · · · · · · · · · · ·	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>
	income for which a notice of deficiency has			<b>1</b>	
	been issued, or on which the section 4942(a)				
	tax has been previously assessed			1	
Ь	Subtract line 6c from line 6b Taxable	· '412 - 5-4-111		<del>'' · · · · · · · · · · · · · · · · · · </del>	······································
_	amount - see instructions				
۵	Undistributed income for 2012 Subtract line	r ranner - Pto		<del></del>	<del></del>
Ū	4a from line 2a Taxable amount - see				
	Instructions			1 500	
f	Undistributed income for 2013 Subtract lines			1,599	***************************************
•	4d and 5 from line 1. This amount must be		1		
	distributed in 2014		1		10 546
7	Amounts treated as distributions out of corpus		<u> </u>	· · · · · · · · · · · · · · · · · · ·	19,746
'	· · · · · · · · · · · · · · · · · · ·				
	to satisfy requirements imposed by section				
8	170(b)(1)(F) or 4942(g)(3) (see instructions)	<del></del>	<del> </del>		···
0	Excess distributions carryover from 2008 not		1	<b>I</b>	
0	applied on line 5 or line 7 (see instructions)		-		·····
9	Excess distributions carryover to 2014.			<b>1</b>	
	Subtract lines 7 and 8 from line 6a		ļ <u>-</u>		
10	Analysis of line 9			•	
a	Excess from 2009			#	
Ь	Excess from 2010			<b>‡</b>	
C	Excess from 2011		1		
d	Excess from 2012		1	1	
е	Excess from 2013			1	

Form	990-PF (2013) <b>HEMMERT L</b> :	EMHI COUNTY YO	UTH SPORTS		94-3042135	Page 10
	XIV . Private Operating Foun			t VII-A, question 9)		- age it
	If the foundation has received a ruling o					
_	foundation, and the ruling is effective for				<b>•</b>	
b	Check box to indicate whether the found		_		4942(j)(3) or 494	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		0/\(\)-/
	income from Part I or the minimum investment return from Part X for	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
	each year listed	·				
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed	<del>-</del>			<del>                                     </del>	
d	Amounts included in line 2c not used directly for active conduct of exempt activities .					
е	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:					
а	"Assets" alternative test - enter (1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
ь	"Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С	"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					
Part	XV Supplementary Informat	ion (Complete t	his part only if t	he foundation had	1 \$5,000 or more in a	ssets at
	any time during the year	r <u>-s</u> ee instructio	ns.)			
1	Information Regarding Foundation M	anagers:				
а	List any managers of the foundation will before the close of any tax year (but or	no have contributed n aly if they have contrib	nore than 2% of the to outed more than \$5,0	otal contributions receiv 00) (See section 507(d	red by the foundation ()(2))	
	NONE,					
b	List any managers of the foundation who ownership of a partnership or other ent				arge portion of the	
	NONE,					
2	Information Regarding Contribution,	Grant, Gift, Loan. So	holarship, etc., Pro	grams:		
	Check here ▶ ☐ If the foundation onlunsolicited requests for funds. If the foundation onlunsolicited requests for funds.	y makes contribution:	s to preselected char	itable organizations and		
	other conditions, complete items 2a, b,			handa a la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant de la constant d		
а	The name, address, and telephone nur	inder or e-mail of the	person to wnom appl	ications should be addr	essea:	
b	990APP The form in which applications should to	a submitted and info	rmation and materials	e thou chould include:		
J	See 990 ASP	oe submilleu and inio	imadon and material	a men anonio lucinde.		
	Any submission deadlines			<del></del>		

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors: None

đ

EEA

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager Recipient status of Amount contribution recipient Name and address (home or business) or substantial contributor a Paid during the year SALMON BASEBALL PROGRAMS SALMON, ID 83467 FI 4,438 SALMON LITTLE LEAGUE FOOTBALL SALMON, ID 83467 FI 2,791 SALMON HIGH BOYS BASKETBALL 1,132 SALMON HIGH WEIGHT ROOM 1,205 WHITEWATER THERAPEUTIC RIDING SALMON, ID 83467 FI 1,270 3a 10,836 Approved for future payment

Enter gross amounts unless otherwise indicated	l linrelated	business income	Excluded by s	ection 512, 513, or 514	(0)
Program service revenue.	(a) Business	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
a	Code				
b	-				<del></del>
			<del> </del>		
			<del></del>		
d			<del> </del>		
e	1-				
†					
<b>g</b> 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			14	18,896	
5 Net rental income or (loss) from real estate					
a Debt-financed property			1		
b Not debt-financed property					
6 Net rental income or (loss) from personal property			15	150	
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					
9 Net income or (loss) from special events				-	<u> </u>
10 Gross profit or (loss) from sales of inventory					
11 Other revenue. a NON TAXABLE DIV	-		14	170	
			14	178	
b	<del></del>		+		
<u> </u>			<del> </del>		
d					
e			-		
2 Subtotal Add columns (b), (d), and (e)			1	19,224	··· · · · · · · · · · · · · · · · · ·
13 Total. Add line 12, columns (b), (d), and (e)				13	19,224
See worksheet in line 13 instructions to verify calculations.)		<del> </del>			
Part XVI-B Relationship of Activities to the					
Line No.	ome is report	ed in column (e) o	f Part XVI-A co	ntributed importantly to	
Explain below how each activity for which inc	ome is report	ed in column (e) o	f Part XVI-A co	ntributed importantly to	
Explain below how each activity for which ind accomplishment of the foundation's exempt	ome is report	ed in column (e) o	f Part XVI-A co	ntributed importantly to	
Line No. Explain below how each activity for which inc	ome is report	ed in column (e) o	f Part XVI-A co	ntributed importantly to	
Explain below how each activity for which ind accomplishment of the foundation's exempt	ome is report	ed in column (e) o	f Part XVI-A co	ntributed importantly to	
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Explain below how each activity for which ind accomplishment of the foundation's exempt	ome is report	ed in column (e) o	f Part XVI-A co	ntributed importantly to	
Explain below how each activity for which ind accomplishment of the foundation's exempt	ome is report	ed in column (e) o	f Part XVI-A co	ntributed importantly to	

Part :			n Regarding Tra	ansfers To	and Transa	ctions an	d Relation	ships	With	Nonch	arital	ble	
1 D			ectly or indirectly eng	rage in any of t	ha fallowing wit	h any other		dooonb			1 "	V	N <sub>0</sub>
			Code (other than see		_	•	•					Yes	No
	rganizati		Occidentalian ser	011011001(0)(0)	organizations)	or in secuon	JZ7, Telaulig	, to poin	Cai				
	•		rting foundation to a	noncharitable	evemnt organia	otion of							
					-						4-/4	•	v
											1a(1)	-	X
						• • • • • •	• • • • • •				1a(2)		X
		sactions:											3.5
			noncharitable exem								1b(1)		X
			s from a noncharitab								1b(2)		X
			equipment, or other a								1b(3)		X
			angements								1b(4)	_	X
			antees								1b(5)	_	X
			vices or membership								1b(6)		X
			ipment, mailing lists,								_1c		X
			he above is "Yes," co										
			er assets, or services										
			or sharing arrangen										
(a) Line i	no (b) A	mount involved	(c) Name of nor	ncharitable exemp	ot organization	(d) Des	scription of tran	sfers, tra	nsactio	ns, and sha	aring arra	angeme	ents
	<del></del>						_						
			<del> </del>			_							
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	-												
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			<u> </u>	<del></del>									
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		<del></del>											
			ļ			_							
2a is	the four	ndation directly	y or indirectly affiliate	d with, or relate	ed to, one or mo	ore tax-exen	npt organizat	ons					
			I(c) of the Code (oth	er than section	501(c)(3)) or in	section 527	77				∐ Ye	s X	No
b If		<u> </u>	llowing schedule										
	(8	a) Name of organ	nization	(b)	Type of organizati	on		(c) De	scriptio	n of relation	nship		
							ļ						
							<u> </u>						
	Under pe correct, a	nalties of penury, I ind pamplete Decl	declare that I have examin aration of pregate (other th	ed this retum, inclu-	ding accompanying ed on all information	schedules and s	tatements, and ter	o the best ledge	of my kn	owledge and	l belief, ıt	ıs true,	
Sign	<b> </b>	$\ell \nu$					<b>,</b>			May the IR			ım
Here		TABILARIACI		8	-29-14	TRUSTE	B			with the pre	eparer sho	own belg	w
	Signa	sture of officer or tr	ustee	Dat		Title				(see inst )?		Yes	X No
D-!-!		Print/Type prepar	rer's name	Preparer's si	gnature /	1 +11	Date		Check	lf I	PTIN		
Paid		ROBERT E	BAKER	ROBERT	E BAKER 14	49 Yali	08-11-20	14	self-err	ployed P	0129	7 <u>5</u> 57	
Prepa	arer	Firm's name	► ROBERT E B	AKER CPA P	Α			Firm's El	N <b>&gt;</b>				
Use (	Only	Firm's address	▶ 1301 MAIN S	STREET SUI	TE 4			Phone no	,				
Salmon I				83467				]	208	-756-4	970		

	Federal Supporting Statements	2013 PG 01
Name(s) as shown on return		Your Social Security Number
HEMMERT LEM	HI COUNTY YOUTH SPORTS	94-3042135

# FORM 990PF, PART XV, LINE 2 APPLICATION SUBMISSION INFORMATION

### GRANT PROGRAM

YOUTH SPORTS

### APPLICANT NAME

ELIZABETH CASEY

### **ADDRESS**

326 MIDDLE CREEK DRIVE NAMPA, ID 83686

### TELEPHONE

208-466-2443

### EMAIL ADDRESS

### FORM & CONTENT

A WRITTEN REQUEST OUTLINING THE PURPOSE FOR WHICH THE FUNDS WILL BE USED AND HOW IT WILL BENEFIT LEMHI COUNTY YOUTHS.

### SUBMISSION DEADLINE

NONE

### RESTRICTIONS ON AWARD

GIFTS, GRANTS & AWARDS ARE LIMITED TO YOUTH SPORTS ACTIVITIES IN LEMHI COUNTY, IDAHO.

	Federal S	upporting Stateme	nts	2013	PG 01
Name(s) as shown on return		apporting otatorno		FEIN	10 01
HEMMERT LEM	HI COUNTY YOUTH SPO	ORTS		94	-3042135
ROUNDING		PART III, LINE		STA	TEMENT #115
TOTAL	•		1		
	FORM 990PF, INVESTMENTS: COF	PART II, LINE 1 RPORATE STOCK SO		STA	PG 01 TEMENT #137
CATEGORY		BOY	BOOK VALU	JE	EOY FMV
CORPORATE STOCK	:	296,903	343,0	36	369,930
TOTALS		296,903	343,0	36	369,930
		PART II, LINE 1 PRPORATE BOND SO	CHEDULE		PG 01 FEMENT #138
CATEGORY		BOY	BOOK VALU	<u>JE</u>	EOY FMV
CORPORATE BONDS	<b>S</b>	40,089	39,9	74	41,996
TOTALS		40,089	39,9	74	41,996

Federal Supporting Statements   2013 70 01							
Voc School School March			Federal St	upporting State	ments	2013 PG 01	
No. 10 county forms grower   No. 11 county forms growers growers growers   No. 10 county forms   No. 10 coun	Name(s) as shown on retum					Your Social Secunty Numb	
FUNDAMENT IN LINE 21 - OTHER EXCHENGES SCHENGLE	HEMMERT LEMHI COUNTY YOUTH SPORTS					94-3042135	
NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   NUMBER   N		FORM 990PF	LINE 23	OTHER EXPENSES SCHEI	OULE	STATEMENT #103	•
FOUR GENERAL OFFICE 2,538 2,538 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	DESCRIPTION	REVENUE AND EXPENSES	NET	ADJUSTED NET INCOME	CHARITABLE PITE POSE		
FORM 950FF, DART I, LINE 11 - OTHER INCOME SCHEDULE  REMONIE  SCHITCH  AND EXPENSES  178  178  178  178  178  178  178  17	OPERATING EXPENSE OFFICE	2,538	2,538	2,538			
FORM 990PE, PART I, LINE 11 - OTHER INCOME SCHEDULE  REVENUE  REVENUE  AND EXPRES  AND EXPRES  O  O  O  O  O  O  O  O  O  O  O  O  O	TOTALS	2,538	2,538	2,538	0		
REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVENUE   REVE						5 6	
SCRIPTION         AND EXPENSES         INVESTMENT         NET INCON           PITAL GAINS DISTRIB-1099'S         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0         0 <td></td> <td>FORM 990</td> <td>PF, PART I, LINE 11</td> <td>- OTHER INCOME SCHEI</td> <td>OULE</td> <td>STATEMENT #106</td> <td></td>		FORM 990	PF, PART I, LINE 11	- OTHER INCOME SCHEI	OULE	STATEMENT #106	
PALS 178	DESCRIPTION CAPITAL GAINS DISTRIB-1099'S NON TAXABLE DISTRIBUTIONS	REVENUE AND EXPENSES 0 17.8	NET INVESTMENT 0 178	ADJUSTED NET INCOME 0 178			
	TOTALS	178	178	178			

		Federal St	Federal Supporting Statements	ments		
		- 2021	appoining orace		2013 PG 01	
Name(s) as shown on return					Your Social Secunty Number	•
NEWTERL LEMBI COUNTY TOUTH SPOKES					V4-3042135	,
	FORM 990PF,	FORM 990PF, PART I, LINE 16(B)	- ACCOUNTING FEES SCHEDULE	EDULE	STATEMENT #108	
DESCRIPTION	REVENUE AND EXPENSES	NET	ADJUSTED NET INCOME	CHARITABLE PURPOSE		
ACCOUNTING FEES	1,450	0	0	1,450		
TOTALS	1,450	0	0	1,450		
					PG 01	
	FORM	990PF, PART I, LINE	FORM 990PF, PART I, LINE 18 - TAXES SCHEDULE		STATEMENT #110	
Section 1	REVENUE	NET	ADJUSTED	CHARITABLE		
FEDERAL INCOME TAX	AND EAVENSES	INVESTMENT	NEI INCOME	204505E		
TOTALS	4.5	0	0	45		
						···
STM-LD						

DATE COST OR PRIOR YEAR COMPUTATION SCHEDULE  OTHER DATE LIFE DEPRECIATION SCHEDULE  11.2003 64.5 1.354 1.354 1.354 1.354 1.354 1.354 1.354 1.354 1.354 1.354 1.354 1.354 1.354 1.354 1.354 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.355 1.35	DATE COST OR PRIOR 19 - DEFRECIATION SCHEDULE  ANOTHER DATE 1 1214 ST. LINE 19 - DEFRECIATION SCHEDULE  12-01-1994 1,354 1,355 SL 0 7 0  12-31-2003 1,557 1,555 SL 0 5 5 0  4,807 4,807 4,804 5,804	Name(s) as snown on return IEMMERT LEMHI COUNTY YOUTH DESCRIPTION COPIER COMPUTER DESK & CHAIR COMPUTER DESTATED ENV			5 5 5 5 -			Its		2013	2013 PG 01
COST OR PRIOR YEAR COMPUTATION SCHEDULE  COST OR PRIOR YEAR COMPUTATION  1,354 1,354 5L 0 7 0  1,567 1,565 5L 0 5 0  1,241 1,241 5L 0 5 0  4,807 4,804	COST OR PRIOR YEAR COMPUTATION SCHEDULE  OTHER BASIS DEPRECTATION METHOD RATE LIFE DEPRECTATION 1,354 1,354 5L 0 7 0 1,567 1,565 5L 0 5 0 1,241 1,241 5L 0 5 0 1,241 4,807 4,804		SPORTS							Your Socia 94-304	il Secunty Number 2135
DATE   COST OR   PRIOR YEAR   COMPUTATION   ACQUIRED   CURRENT YEAR     1.201.1894   1.354   St.   O	DNTS COST OR PRIOR YEAR COMPUTATION AGENCY YEAR ACCOMPUTATION ACCOURSED OTHER BASIS DEPRECIATION NOTICE 12-0-1594 1,1344 1,1344 51, 0 0 7 0 0 12-31-3003 1,1567 1,565 81 0 0 5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			FORM 990PF,	PART I, LINE 19	9 - DEPRECIATI	ION SCHEDULE			STATEM	ENT #126
13-01-1984   0.188   0.186   0.189   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994   0.1994	13-01-1894   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184   13-184	<sub>e</sub>	DATE	COST OR	PRIOR YEAR	COMPUTATION	_		CURRENT YEAR	NET INVESTMENT	ADJUSTED NET
12-13-1294 1,154 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 15,14 1	12-31-203 645 644 85 0 7 0 0 0 1 1 1 2 1 3 1 2 1 3 1 2 1 3 1 2 1 3 1 2 1 3 1 2 1 3 1 2 1 3 1 2 1 3 1 2 1 3 1 2 1 3 1 2 1 3 1 2 1 3 1 2 1 3 1 2 1 3 1 2 1 3 1 2 1 3 1 2 1 3 1 2 1 3 1 2 1 3 1 3		ACQUIRED	OTHER BASIS	DEPRECIATION	METHOD		LIFE	DEPRECIATION	INCOME	INCOME
12-31-2003 1,567 1,566 12, 0 7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	12-23-2003 1,567 1,564 81, 0 7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	٠.	12-01-1994	1,354	1,354	Sī	0	7	0	0	0
1,567 1,565 84 0 5 0 0 0 1,241 1,241 84 0 5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	1,567 1,265 1,241 1,241 1,241 5L 0 5 0 0 0 4,807 4,807		12-31-2003	645	644	SL	0	7	0	0	0
4,807 4,804 6 6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	4.807 4.804 5 0 5 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		12-31-2003	1,567	1,565	SL	0	Ŋ	0	0	0
			06-06-2007	1,241	1,241	SL	0	Ŋ	0	0	0
				4,807	4,804						

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Paristen & Co	Income Summary Statement Account 38240793	Statement Date: 03/01/2014 CORRECTED 2013
8 Third Street North P.O. Box 5015 Great Falls, MT 59401	HEMMERT LEMHI COUNTY YOUTH SPORTS FOUNDATION 326 S MIDDLE CREEK DR NAMPA, ID 83686-9708	Financial Advisor TERRY JUDD 406-752-6212 Office Code: 1146 Rep Code: 0088
PAYER'S Federal ID No 81-0139474	RECIPIENT'S ID No: 94-3042135	

Dividends and Distributions	Not reported to the IRS*	Interest Income	Not reported to the IRS*
1a- Total ordinary dividends (includes line 1b)	14,72131 C 🗸	1- Interest income (not included in line 3)	4,629 96 C
1b- Qualified dividends	7,859 41 CX	2- Early withdrawal penalty	00 0
2a- Total capital gain distributions (includes lines 2b, 2c, 2d)	134 34 C 🗸	3- Interest on US Savings Bonds & Treasury obligations	00 0
2b- Unrecaptured Section 1250 gain	134 34 C. V	4- Federal income tax withheld	0.00
2c- Section 1202 gain	00 0	5- Investment expenses	00 0
2d- Collectibles (28%) gain	000	7- Foreign country or US possession:	0.00
3- Nondividend distributions	178 10 C V V	8- Tax-exempt interest (includes line 9)	00 0
4- Federal income tax withheld	, 00.0	9- Specified private activity bond interest (AMT)	00 0
5- Investment expenses	00 0	<ol> <li>Tax-exempt bond CUSIP number (see instructions)</li> </ol>	
7- Foreign country or US possession 6- Foreign tax paid		11- State. 12- State ID number	
8- Cash Inquidation distributions	00 0	13- State tax withheld	00 0
9- Noncash Inquidation distributions	0.00		
10- Exempt-interest dividends (includes line 11)	000		
11- Specified private activity bond interest dividends (AMT)	00 0		
12- State 13- State ID number.		Lines 8 & 9 include tax-exempt interest and original issue discount	
14- State tax withheld	0.00		
Regulated Futures Contracts	Not reported to the IRS*	Miscellaneous Income	Not reported to the IRS*
9- Profit (loss) realized in 2013-closed contracts	00 0	2- Royalties	00 0
10- Unrealized profit (loss)-open contracts 12/31/2012	00 0	3- Other income	00 0
11- Unrealized profit (loss)-open contracts 12/31/2013	00 0	4- Federal income tax withheld	0.00
12- Aggregate profit (loss) on contracts	00 0	dends or interest	000
of responsible series and details of occasions also series and expenses the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of the series of	מו זפסטפי שטוליי	12- Foreign country or US possession 11- Foreign fax paid	
ii appiicaule, sui iiinalies allo oetalis oi proceeds irotti sale italisa	מיסווט מקלימים ווו	tax withheld	0.00
subsequent sections of this document.		17- State Payer's state IU number	Ċ
			200

• This statement displays all activity for this account. Any transactions that are being furnished to the IRS will also be provided on separate Forms 1099, which may be packaged with this statement or sent separately. Because this statement is formatted similarly to Forms 1099, we have provided the related instructions at the conclusion of this document.

ORIGINAL ISSUE DISCOUNT SUMMARY
Use bond-by-bond details from the following pages to determine reportable amounts of Original Issue Discount income for your tax return(s). The informational totals shown below appear for reference only.

Original issue discount for 2013		00 0	Original issue discor	Inginal issue discount on US Treasury obligations	0.00
Other periodic interest		00 0	Investment expenses	, , ,	00 0
Early withdrawal penalty		000	State:	State ID number	
Federal income tax withheld		00 0	State tax withheld		0.00
Foreign country or US possession	Foreign tax paid	00 0			

Changes to dividend tax classifications processed after the date of this statement may lead to a revised form

09/20/13

09/20/13

05/13/13

11/21/13

12	
5 of	
Page	

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4 Account 38240793		Additional information		Sale	Sale	Sale	Sale	Total of 38 lots		Sale	Total of 17 lots																		
Accou		Gain or loss(-)		88 8	522	-50 47	25 49	1,503 01		12.50	13 39	134 33	18.42	0.29	5.94	22 60	247 24	48 40	39 83	66 01	164 56	253 60	107.63	91 84	205	90 99	1,297.71	2,800 72	670 61
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rted to the IR		Cost or other basis		152 70	153 40	2,004.85	605.91	14,990 14		151 66	162 50	1,627 86	185.52	186.42	198 95	199.91	2,184.91	212.38	213 60	214 79	216.11	217 90	168 32	169.31	13.10	170 25	6,493 49	21,483.63	72,842.49
Proceeds Not Reported (continued)		Date of acquisition		06/02/06	09/01/06	10/10/06	12/21/06	VARIOUS		12/21/06	12/21/06	12/21/06	03/02/07	06/01/07	20/20/60	12/19/07	12/19/07	80/20/00	80/90/90	09/02/08	12/18/08	60/90/60	06/05/09	60/60/60	12/23/09	12/23/09	VARIOUS		
	NOT reported on Form 1099-B	Proceeds of # stocks, bonds, etc.	AIVSX (cont'd)	161 58	158 62	1,954 38	631.40	16,493.15	9	164.16	175 89	1,762 19	203 94	186 71	204 89	222.51	2,432.15	260 78	253 43	280.80	380 67	471 50	275 95	261 15	18.17	236.31	7,791 20	24,284 35	73,513.10
	VSACTIONS NOT repo	Quantity	Symbol	4 637	4.552	56.085	18.119	473 322	17 lax lots for 09/20/13.	4.535	4 859	48.680	5 634	5 158	2 660	6 147	67.187	7 204	7 001	7 7 5 7	10 516	13 025	7.623	7214	0 502	6 528	215 230	Security total.	Totals:
D. A. Davidson & Co.	LONG-TERM TRANSACTIONS NO Report on Form 8949, Part II, with Box F checked	Date of Sale	INVT CO OF AMER A /					09/03/13																			09/20/13		

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The following information may be useful in the preparation of your federal and state tax return(s), if applicable This information represents what was available at the time your 1099 was prepared and may not be all inclusive and is subject to change. Please contact your mutual fund or UIT directly if you need to verify or supplement this information. Not all Federal Source Income is state tax-exempt For advice on your tax situation please consult a tax advisor, the IRS or your state tax authority.

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<sup>\*</sup> A detailed breakdown for Fed Source Total is listed when available For more information, contact the mutual fund or UIT directly

# Form 8868

(Rev January 2014)

Department of the Treasury Internal Revenue Service

## Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868.

• If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions) For more details on the electronic filing of this form, visit www irs gov/efile and click on e-file for Charities & Nonprofits Automatic 3-Month Extension of Time. Only submit original (no copies needed). A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns. Enter filer's identifying number, see instructions Type or Name of exempt organization or other filer, see instructions. Employer identification number (EIN) or print HEMMERT LEMHI COUNTY YOUTH SPORTS 94-3042135 Number, street, and room or suite no. If a P.O. box, see instructions File by the Social security number (SSN) due date for 1301 MAIN STREET-SUITE 4 filing your City, town or post office, state, and ZIP code. For a foreign address, see instructions return See instructions SALMON, ID 83467 **Application** Application Return Return Is For Code Is For Code Form 990 or Form 990-EZ 01 Form 990-T (corporation) 07 Form 990-BL 02 Form 1041-A 08 Form 4720 (individual) 03 Form 4720 (other than individual) 09 Form 990-PF 04 Form 5227 10 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 Form 990-T (trust other than above) 06 Form 8870 12 • The books are in the care of ► ELIZABETH CASEY, 326 S MIDDLE CRK RD, ID 83686 FAX No ▶ Telephone No ▶ 208-466-2443 If the organization does not have an office or place of business in the United States, check this box....... If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) for the whole group, check this box . . . . . . . ▶ ☐ If it is for part of the group, check this box . . . . ▶ ☐ and attach a list with the names and EINs of all members the extension is for. I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 08-15, 20 14, to file the exempt organization return for the organization named above. The extension is for the organization's return for ► X calendar year 2013 or ► tax year beginning , 20 , and ending 20 2 If the tax year entered in line 1 is for less than 12 months, check reason. ☐ Change in accounting period 3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions. За b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 0 3b | \$ c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for

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

EFTPS (Electronic Federal Tax Payment System). See instructions.

Form 8868 (Rev. 1-2014)

payment instructions

Form \$868 (	Rev. 1-2014)					Page 2
<ul> <li>If you are</li> </ul>	filing for an Additional (Not Automatic) 3-N	onth Extensio	n, complete only Part II and o	heck this box		▶ X
Note. Only o	complete Part II if you have already been gra	nted an automa	itic 3-month extension on a pre	eviously filed Form 886	8	
• If you are	filing for an Automatic 3-Month Extension	complete only	Part I (on page 1)	•		
Part II	Additional (Not Automatic) 3-Mo			e original (no copie	es needed)	
				filer's identifying nun		
Type or	Name of exempt organization or other filer, see instructions.  Employer identification number (EIN) or					
print	HEMMERT LEMHI COUNTY YOUTH SPORTS			94-3042135		
File by the	Number, street, and room or suite no. If a P.O. box, see instructions			Social security number (SSN)		
due date for	1301 MAIN STREET-SUITE 4					
filing your return See City, town or post office, state, and ZIP code For a foreign address, see instructions.						
instructions	SALMON, ID 83467		·			
Enter the Re	turn code for the return that this application i	s for (file a sepa	rate application for each return	n)		0 4
Application	on	Return	Application	Application Return		
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Form 4720 (individual)		03	Form 4720 (other than indiv	idual)		09
Form 990-PF		04	Form 5227	iddai)		10
Form 990-T (sec 401(a) or 408(a) trust)		05	Form 6069	11		
	T (trust other than above)	06	Form 8870			
	ot complete Part II if you were not already	<del></del>				12
for the whole	or a Group Return, enter the organization's for group, check this box ▶ ☐ If it is to ames and EINs of all members the extension	or part of the gr			a	
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_	ax year entered in line 5 is for less than 12 m	onths, check re	ason: 🔲 Initial return 📙 F	inal return		
	inge in accounting period					
	n detail why you need the extension		<del> </del>			
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	la If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any					
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b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and						
	ted tax payments made Include any prior ye	ar overpaymen	t allowed as a credit and any			
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c Balance due. Subtract line 8b from line 8a Include your payment with this form, if required, by using EFTPS						_
(Electro	onic Federal Tax Payment System). See inst	ructions.	<del></del>		\$	0
	Signature and Veri	fication mus	st be completed for Par	t II only.		
Under penalt knowledge a	nes of perjury, I declare that I have examined and belief, it is true, correct, and complete, an	this form, included that I am auth	ding accompanying schedules orized to prepare this form	and statements, and t	o the best of	my
Signature >	Phot Elaka CRA	Titl	· CPA	Date ▶	8-5-14	

EEA

Form 8868 (Rev. 1-2014)