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### Form 990-PF

**Return of Private Foundation** 

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

Do not enter Social Security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For c	alend	far year 2013 or tax year beginning OCT	1, 2013	, and ending	SEP 30, 2014	
Nan	e of	foundation			A Employer identification	number
T	ΗE	GOOD WORKS INSTITUTE,	INC.		82-0518035	
Num	ber an	d street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
_P	.0.	BOX 1811			208-726-44	21
		wn, state or province, country, and ZIP or foreign power VALLEY, ID 83353	ostal code		C If exemption application is po	ending, check here
		all that apply Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	check here
•	IIOON	Final return	Amended return	mor public dilanty	orong organizations	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
		Address change	Name change		Foreign organizations me check here and attach co	eting the 85% test,
H C	heck	type of organization. X Section 501(c)(3) ex			E If private foundation stat	
	-		Other taxable private founda	tion	under section 507(b)(1)	
l Fa		rket value of all assets at end of year   J   Accounting		Accrual	F If the foundation is in a 6	•
		·   —	her (specify)		under section 507(b)(1)	
<b></b>		57,957. (Part I, colu.	mn (d) must be on cash b	asis.)		
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	348,012.		N/A	
	2	Check ► X if the foundation is not required to attach Sch. B	•			
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	51.	51.		STATEMENT 1
	5a	Gross rents				
	b	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10	<1,590.	>		
Revenue	b	Gross sales price for all assets on line 6a 315,957.				} 
ě	7	Capital gain net income (from Part IV, line 2)		0.		
<b>E</b>	8	Net short-term capital gain				<del></del>
	9	Income modifications .		<u> </u>	EVELIVE 1-	[ ·
	10a	Gross sales less returns and allowances	<u> </u>	,	**************************************	
		Less Cost of goods sold			Cropp war	
		Gross profit or (loss)			EC 7 8 2014	·
	11	Other income	346,473.	5/1.		<u> </u>
	12	Total. Add lines 1 through 11	23,500.			0.
	13	Compensation of officers, directors, trustees, etc	23,300.	<u> </u>		
	14	Other employee salaries and wages Pension plans, employee benefits				
S		Legal fees				
cn cn		Accounting fees STMT 2	1,881.	941.		940.
≈×		Other professional fees				
<b>6</b>		Interest				
(Sign	18	Taxes				
ist.	19	Depreciation and depletion				
Ē	20	Occupancy				
and Administrative Expens	21	Travel, conferences, and meetings				
ב ב	22	Printing and publications				
	23	Other expenses STMT 3	263.	0.		263.
<b>a .</b>	24	Total operating and administrative				
Operating 6		expenses. Add lines 13 through 23	25,644.	941.		1,203. 439,839.
	25	Contributions, gifts, grants paid	439,839.			439,839.
	26	Total expenses and disbursements.	465 400	0.44		441 042
	<u> </u>	Add lines 24 and 25	465,483.	941.		441,042.
	1	Subtract line 26 from line 12	Z110 010			1
	l	Excess of revenue over expenses and disbursements	<119,010.	0.		
		Net investment income (if negative, enter -0-)		<u> </u>	N/A	
	<u> </u>	Adjusted net income (if negative, enter -0-)	<u> </u>	L	IN/A	L

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30
(must agree with end-of-year figure reported on prior year's return)

2 Enter amount from Part I, line 27a

3 Other increases not included in line 2 (itemize)

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize)

5 0.

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57,957.

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Part IV Capital Gains a	and Losses for Tax on In	vestment	Income						
(a) List and descr 2-story brick wa	ibe the kind(s) of property sold (e g rehouse; or common stock, 200 shs	, real estate, s MLC Co )		(b) I P D	low ac - Purcl - Dona	ition	c) Date ac (mo., day	y, yr)	(d) Date sold (mo., day, yr.)
·-	ES RUSSELL 1000						1/14		01/14/14
b 100K MODESTO II		<del>.</del>					3/21		04/01/14
c 50K AL ST PUBSO				-			8/08		08/11/14
d 650 SHS VANGUA	RD REIT ETF			ļ		D 0	8/22	/14	08/25/14
<u> </u>	<b></b>	1	<del> </del>	<u>.                                    </u>					<u>!</u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)	10,	t or other basis					n or (loss (f) minus	(g)
a 100,092.	· · ··- ·		100,53						<441.
ь 109,953.			110,66						<708.>
56,194. d 49,718.			56,46 49,88						<271.> <170.>
<del></del>			49,00	0.					<u> </u>
Complete only for assets showin	g gain in column (h) and owned by	the foundation	on 12/31/60	-		//\	Paine /Co	I /h) goin	minus
Complete only for assets showing	(j) Adjusted basis	T	cess of col. (1)			col (	k), but no	I. (h) gain ot less tha	n -0-) or
(I) FMV as of 12/31/69	as of 12/31/69		col. (j), if any			•	Losses (1	from col.	(h)) ,
2									<441.
b								<del></del>	<708.
C									<271.>
d									<170.
0						-			
2 Capital gain net income or (net ca	pital loss) { If gain, also enter of the loss of the l			}	2				<1,590.
3 Net short-term capital gain or (los	•								
If gain, also enter in Part I, line 8,		(-)		<b>]</b> [		l			
If (loss), enter -0- in Part I, line 8 Part V Qualification U				لا_	3_	L		N/A	<u> </u>
If section 4940(d)(2) applies, leave the Was the foundation liable for the section of the sectio	tion 4942 tax on the distributable an	omplete this pa	rt		 s.				Yes X No
(a) Base period years	(b)		Net value of no	(c)		use assets	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(d) bution ratio vided by col (c))
Calendar year (or tax year beginnii 2012	ing iii)	5,889.				4,758		501 (b) di	3.011984
2012		0,506.				2,937			2.273922
2010		2,754.	<del></del>			6,716			.889272
2009		2,021.				0,672			1.158625
2008	44	1,702.			36	8,198.	,		1.199632
2 Total of line 1, column (d)							2		8.533435
3 Average distribution ratio for the the foundation has been in existe	•	on line 2 by 5,	or by the number	r of ye	ars		3		1.706687
4 Enter the net value of noncharitat	ole-use assets for 2013 from Part X,	line 5					4		81,448.
5 Multiply line 4 by line 3							5		139,006.
6 Enter 1% of net investment incon	ne (1% of Part I, line 27b)						6		0.
7 Add lines 5 and 6							7		139,006.
8 Enter qualifying distributions from							8		441,042.
If line 8 is equal to or greater than See the Part VI instructions.	n line 7, check the box in Part VI, line	e 1b, and comp	Diete that part usin	ıg a 1	% tax	rate			

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Par			or 494	<del>18 -</del> s	ee instru	ction	ns)
	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔙 and e						
	Date of ruling or determination letter: (attach copy of letter if ne						^
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► X and enter 1%	ļ	1			0.
	of Part I, line 27b						
C A	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4	% of Part I, line 12, col (b). ノ					_
<b>2</b> T	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. C	Others enter -0-)	_	2			0.
-	Add lines 1 and 2		<u> </u>	3			0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only	Others enter -0-)		4			0.
5 T	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		ļ	5			0.
	Credits/Payments	1 1 00					
	2013 estimated tax payments and 2012 overpayment credited to 2013	6a 8,2	41.				
	Exempt foreign organizations - tax withheld at source	6b	<b>—</b>				
c T	Tax paid with application for extension of time to file (Form 8868)	6c					
	Backup withholding erroneously withheld	6d	<b>—</b> ∮				
<b>7</b> T	Total credits and payments. Add lines 6a through 6d			7		<u>8,2</u>	<u>41.</u>
8 E	Enter any <b>penalty</b> for underpayment of estimated tax. Check here 📖 if Form 2220 is att	ached	_	8			
9 T	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			9			<del></del>
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			10		8,2	
	Enter the amount of line 10 to be: Credited to 2014 estimated tax	8,241. Refunde	<u>d ▶  </u>	11			0.
	t VII-A   Statements Regarding Activities						
1a [	During the tax year, did the foundation attempt to influence any national, state, or local legi	slation or did it participate or int	ervene in			Yes	
	any political campaign?				. <u>1a</u>		X
b C	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	oses (see instructions for the de	finition)?		1 <u>b</u>		X
l	If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities a	nd copies of any materials pu	ıblished	or			
c	distributed by the foundation in connection with the activities.						
C [	Did the foundation file Form 1120-POL for this year?				10		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during th		_				
•	(1) On the foundation ▶ \$ O . (2) On foundation manager		0.				
	Enter the reimbursement (if any) paid by the foundation during the year for political expend	diture tax imposed on foundation	1				
	managers > \$O.						
2 F	Has the foundation engaged in any activities that have not previously been reported to the	IRS?			2		X
1	If "Yes," attach a detailed description of the activities.						
	Has the foundation made any changes, not previously reported to the IRS, in its governing		ation, or				
t	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chang	ges			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the ye	ar?		/-	<u>4a</u>		X
	If "Yes," has it filed a tax return on Form 990-T for this year?			N/I			
	Was there a liquidation, termination, dissolution, or substantial contraction during the year	?			. 5	ļ	X
	If "Yes," attach the statement required by General Instruction T.						
6 4	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied (	either <sup>.</sup>					
	By language in the governing instrument, or						
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandato</li> </ul>	ry directions that conflict with th	ie state la	W		1	٠,,
	remain in the governing instrument?				. 6	17	X
7 [	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," co	emplete Part II, col. (c), and P	art XV		7	X	
8a E	Enter the states to which the foundation reports or with which it is registered (see instructi	ons) -			-		
	ID	AM			-		
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the	Attorney General (or designate)				v	
	of each state as required by General Instruction G? If "No," attach explanation		lan cele e		8b	X	ļ
	is the foundation claiming status as a private operating foundation within the meaning of s		or calend	ar			v
	year 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes,"				. 9	-	X
10 [	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a sched	uie listing their names and addresses	L		10	1	47

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Part VII-B Statements Regarding Activities for Which I		Required (continu	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	1 4945(e))?	. T	s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,		
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s 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)?		☐ Ye	s X No	1 1
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f	•		
the prevention of cruelty to children or animals?			s X No	1 1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	Ier the excentions described i	• • —		1 1
section 53 4945 or in a current notice regarding disaster assistance (see instru		rrogalizations	N/A 5	n 1
Organizations relying on a current notice regarding disaster assistance check h	· · · · · · · · · · · · · · · · · · ·			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi		inad		
expenditure responsibility for the grant?		//A □ Ye	s 🗆 No	1 1
• • •		17 23		
If "Yes," attach the statement required by Regulations section 53.494	• •			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		. 👽	
a personal benefit contract?		Y6	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal Denetit Contract?		6	b X
If "Yes" to 6b, file Form 8870.			[TV]	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		. L	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A 7	b
Part VIII   Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly	<i>!</i>	
List all officers, directors, trustees, foundation managers and their	compensation			
Elat uli officera, unoccora, trustees, foundation munugera une tren	(b) Title, and average	(c) Compensation	(d) Contributions to	(a) Evnense
(a) Name and address	hours per week devoted	(if not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
ANN M. DOWN	to position PRES	enter -0-)	compensation	allowances
P.O. BOX 3216	PRES			
	0.50			^
SUN VALLEY, ID 83353	0.50	0.	0.	0.
	TRES			
P.O. BOX 2660	0.50	10 000		0
EAGLE, ID 83616	0.50	10,000.	0.	<u> </u>
	SEC		•	
P.O. BOX 987	0.50	2 500		•
KETCHUM, ID 83340	0.50	3,500.	0.	0.
PHYLIS HOCKETT	DIR			
5872 MOUNTAIN RANCH DRIVE		1	_ [	_
PARK CITY, UT 84098	0.50	10,000.	0.	0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Cookshillians to	( ) F
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
	devoted to position	(0) 00	compensation	allowances
NONE				
		ļ		
			I	
			<u> </u>	
Total number of other employees paid over \$50,000			. ▶	0
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O.

All other program-related investments. See instructions

Total. Add lines 1 through 3

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, se	e instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		<del>-</del>
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	82,688.
C	Fair market value of all other assets	10	
đ	Total (add lines 1a, b, and c)	1d	82,688.
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) . 1e 0 .		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	82,688.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,240.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	81,448.
6	Minimum investment return. Enter 5% of line 5	6	4,072.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here  and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	4,072.
2a	Tax on investment income for 2013 from Part VI, line 5		
b	Income tax for 2013 (This does not include the tax from Part VI )		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	4,072.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	4,072.
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 XIII, line 1	7	4,072.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		441 042
	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	441,042.
b		1b	<u> </u>
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	441 042
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	441,042.
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	5	441,042.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	· · · · · · · · · · · · · · · · · · ·
		ALCOUNDE TAFF	no cortino

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4940(e) reduction of tax in those years

# Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI,				
line 7	······	·····	**************************************	4,072.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only			0.	·
h Total for prior years		•		
		0.		<del></del>
3 Excess distributions carryover, if any, to 2013				
a From 2008 423,312. b From 2009 289,041.				
055 400				
262 225				
	1,731,321.			
f Total of lines 3a through e	1,/31,321.	<del></del>		
4 Qualifying distributions for 2013 from Part XII, line 4 ▶\$ 441,042.				
a Applied to 2012, but not more than line 2a			0.	
The state of the s			0.	<del></del>
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				***************************************
(Election required - see instructions)	0.			
d Applied to 2013 distributable amount		······································		4,072.
e Remaining amount distributed out of corpus	436,970.			170720
5 Excess distributions carryover applied to 2013	0.		·····	0.
(If an amount appears in column (d), the same amount must be shown in column (a))	<u> </u>			
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	2,168,291.			
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 2012. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2013 Subtract				
lines 4d and 5 from line 1. This amount must				_
be distributed in 2014		***************************************	[ 	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 2008	400 010			
not applied on line 5 or line 7	423,312.	·····		
9 Excess distributions carryover to 2014.	1 744 070			
Subtract lines 7 and 8 from line 6a	1,744,979.			
10 Analysis of line 9:				
a Excess from 2009 289, 041.				
b Excess from 2010 257, 432.				
c Excess from 2011 362, 385.				
d Excess from 2012 399,151.				
e Excess from 2013 436,970.			<u> </u>	Form <b>990-PF</b> (2013)

Part XIV Private Operating Fo		etructions and Part VII		N/A	-0316033 Page 10
1 a If the foundation has received a ruling or			7, 4003(0) 37	N/A	
foundation, and the ruling is effective for					
b Check box to indicate whether the found		=	r section	4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	I TOURIDATION DESCRIBED	Prior 3 years		
income from Part I or the minimum	(a) 2013	(b) 2012	(c) 2011	(d) 2010	(e) Total
investment return from Part X for		<b>(-,</b> · · ·	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		- (-,
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					
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		•			
(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" afternative 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)		ļ <u>-</u>			<del> </del>
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income		- A - Alaia	 	b 65 000	
Part XV Supplementary Info			it the foundati	on nad \$5,000	or more in assets
		ructions./			
1 Information Regarding Foundation a List any managers of the foundation who	•	than 99/ of the total cont	ributions received by	the foundation before	the close of any tay
year (but only if they have contributed m			illuddolla received by	tile louildation belole	the close of any tax
ANN M. DOWN	, ,	, ,, ,,			
b List any managers of the foundation who	o own 10% or more of t	he stock of a corporation	(or an equally large p	ortion of the ownershi	p of a partnership or
other entity) of which the foundation has			( <del>-</del> <del>-</del>		,
NONE		<u></u>			
2 Information Regarding Contributi	on, Grant, Gift, Loar	, Scholarship, etc., P	rograms:		
Check here 🕨 🔲 if the foundation o					
the foundation makes gifts, grants, etc.	(see instructions) to ind	ividuals or organizations i	ınder other condition	s, complete items 2a, l	o, c, and d
a The name, address, and telephone num		the person to whom appl	ications should be ad	dressed:	
ANN DOWN, 208-726-44					
P.O. BOX 1811, SUN V	ALLEY, ID	33353			
b The form in which applications should b SEE ATTACHED GRANT A			hould include		
c Any submission deadlines	•				
NONE  d Any restrictions or limitations on awards	cuch as hy assaranhy	nal areas charitable fields	kinds of institutions	or other factors	
NONE	o, aucii aa uy yavyiapiili	ai aivas, ciiaiilaul <del>e</del> ilelus	, หมายอ บา เมอนเขนบนปร	, 01 011101 1001013	
<del>-</del>					
323601 10-10-13					Form <b>990-PF</b> (2013)

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 or substantial contributor Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient a Paid during the year N/A PUBLIC GENERAL N/A PUBLIC GENERAL PUBLIC GENERAL N/A N/A PUBLIC GENERAL N/A PUBLIC GENERAL SEE CONTINUATION SHEET(S) **▶** 3a Total 439,839. **b** Approved for future payment NONE ٥. Total **▶** 3b

Form 990-PF (2013)

Part XVI-A	Analysis	of Income	-Producing	Activities
COLLATER!	Wildli And	OI IIICOIII <del>o</del>		VCHAINE2

Enter gross amounts unless otherwise indicated	Unrelated b	usiness income		by section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu-	(d)	Related or exempt
1 Program service revenue	code	Amount	sion code	Amount	function income
a					
b		•			<del></del>
c					
d					<del></del>
6					
1					
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					51.
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			<u> </u>		
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					<1,590.
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C		-			
d					
8					
12 Subtotal Add columns (b), (d), and (e)			).	0.	<1,539.
13 Total. Add line 12, columns (b), (d), and (e)				13	<1,539.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Asser	nlichment of	Evennt D	LIFTOCOC	
rart Avra Relationship of Activities	to the Accom	ipiisnment oi	Exempt P	urposes	

	o foundation's exempt purposes (other than by providing funds for such purposes).
NON	E
<del></del>	
	<del></del>
<del></del>	
- 1	
1 -13	Form 990-PF

THE GOOD WORKS INSTITUTE, INC. 82-0518035 Form 990-PF (2013) Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of X (1) Cash 1a(1) X (2) Other assets 1a(2) b Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 10 If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (c) Name of noncharitable exempt organization (a) Line no (b) Amount involved (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes b If "Yes," complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge with the preparer n below (see instr )? Sign Here PRESIDENT X Yes Signature of officer or trustee Title Check PTIN Print/Type preparer's name Preparer's signature Date self-employed Paid RONALD RUTTENBERG 11/21/14 P00145738 Firm's EIN ► 20-1980979 **Preparer** Firm's name ► RONALD RUTTENBERG & **Use Only** Firm's address ▶ 433 AIRPORT BLVD., SUITE 130

Form **990-PF** (2013)

Phone no 650-342-5272

CA 94010

BURLINGAME,

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

Name of the organization

**Employer identification number** 

T1	HE GOOD WORKS INSTITUTE, INC.	82-0518035			
Organization type (check					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)( ) (enter number) organization				
	4947(a)(1) nonexempt charitable trust <b>not</b> 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				
• •	is covered by the <b>General Rule</b> or a <b>Special Rule</b> . e)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ule. See instructions.			
General Rule					
-	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in molete Parts I and II.	noney or property) from any one			
Special Rules					
509(a)(1) and 170	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the repolar (b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	-			
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the <b>General Rule</b> applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year					
but it must answer "No" o	that is not covered by the General Rule and/or the Special Rules does not file Schedule n Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its F et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).				

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule 8 (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization

Employer identification number

### THE GOOD WORKS INSTITUTE, INC.

82-0518035

Part I	Contributors	(see instructions)	. Use duplicate copies	of Part I if additional space is needed.
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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		Person X Payroll			
	P.O. BOX 3216	\$	Noncash X (Complete Part II for			
	SUN VALLEY, ID 83353		noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
2	ANN M. DOWN		Person X			
	P.O. BOX 3216	\$	Payroll X			
	SUN VALLEY, ID 83353		(Complete Part il for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
3	ANN M. DOWN		Person X			
	P.O. BOX 3216	\$	Payroll X			
	SUN VALLEY, ID 83353		(Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
4	ANN M. DOWN		Person X			
	P.O. BOX 3216	\$	Payroll Noncash X			
	SUN VALLEY, ID 83353		(Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
5			Person X Payroll			
			(Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
6			Person X Payroll			
:		\$	Noncash (Complete Part II for			
			noncash contributions.)			

Name of organization

Employer identification number

THE GOOD WORKS INSTITUTE, INC.

82-0518035

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is r	eeded.
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(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9			Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10			Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer Identification number

82-0518035

ert #	Noncash Property (see instructions). Use duplicate copies of Par	t II if additional space is needed.	<del>-</del>
(a)	HOLLOSII FTOPOLLY (300 matrochoria). Oso duplicate copies of Far	(c)	
No.	(b)  Description of noncash property given	FMV (or estimate) (see instructions)	(d) Date received
art I	1175 SHARES ISHARES RUSSELL 1000		
			01/14/14
(a) No.	(b)	(c)	(d)
om art I	Description of noncash property given	FMV (or estimate) (see instructions)	Date received
2	100K MODESTO IRREG BOND		
		<u> </u>	03/21/14
(a) No. rom	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	50K AL ST PUBSCH	_	
		\$ 56,930.	08/08/14
(a) No. rom Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
4	650 SHARES VANGUARD REIT ETF		
		\$\$.	08/22/14
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	
		<u> </u>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		   \$	

ame of organ	nization		Employer Identification number					
	OD WORKS INSTITUTE, IN	C	82-0518035					
Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the the total of exclusively religious, charitable, etc Use duplicate copies of Part III if additional	ie following line entry. For organizati ; , contributions of \$1,000 or less fo	c)(7), (8), or (10) organizations that total more than \$1,000 for the ions completing Part III, enter or the year. (Enter this information once.)					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
-		(a) Transfer of mi						
	Transferee's name, address, ar	(e) Transfer of gi	Relationship of transferor to transferee					
-								
(a) No.	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I	(b) raipose of gift	(c) as or girt	(a) Description of now gift is need					
	(e) Transfer of gift							
-	Transferee's name, address, ar	nd ZIP + 4	Relationship 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, and ZIP + 4		Relationship 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, ar		Relationship of transferor to transferee					
-								

	<del> </del>		
	Foundation status of	Purpose of grant or contribution	Amount
or substantial contributor	recipient		
N/A	PUBLIC	GENERAL	
N/A	PUBLIC	GENERAL	16,000
			10,000
N/A	PUBLIC	GENERAL	96,043.
N/A	PUBLIC	GENERAL	10,000.
N/A	PUBLIC	GENERAL	15,000.
N/A	PUBLIC	GENERAL	20,000.
N/A	PUBLIC	GENERAL	12,000
N/A	PUBLIC	GENERAL	24 435
			24,435
N/A	PUBLIC	GENERAL	10,250
N/A	PUBLIC	GENERAL.	
			5,000. 439,839.
	N/A N/A N/A N/A N/A	Year (Continuation)  If recipient is an individual, show any relationship to any foundation manager or substantial contributor  N/A  PUBLIC  N/A  PUBLIC	Year (Continuation)  If recipient is an individual, show any relationship to any foundation manager or substantial contributor  N/A  PUBLIC  SENERAL  N/A  PUBLIC  SENERAL

3 Grants and Contributions Paid During t				<del></del>
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	Contribution	
UNGER COALITION	N/A	PUBLIC	GENERAL	13,66
VACARANDA HEALTH	N/A	PUBLIC	GENERAL	
				15,00
IACHIK	N/A	PUBLIC	GENERAL	
				25,00
NO KENYA FUND	N/A	PUBLIC	GENERAL	10,00
PACHAMAMA ALLIANCE	N/A	PUBLIC	GENERAL	15,00
POSSIBLE	N/A	PUBLIC	general	
				25,00
PELESTAR CHILDRENS EDUC FDN	n/A	PUBLIC	general	
				27,45
THE SAGE SCHOOL	N/A	PUBLIC	GENERAL	10,00
TRANSITIONS GLOBAL	N/A	PUBLIC	GENERAL	15,00
WESTERN HANDS PROJECT	N/A	PUBLIC	GENERAL	10.00
Total from continuation sheets		1		10,00

Part XV Supplementary Information 3 Grants and Contributions Paid During the				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Aillouit
WESTERN WATERSHEDS PROJECT	N/A	PUBLIC	GENERAL	
				15,000
WILD 4 LIFE	N/A	PUBLIC	GENERAL	
				20,000
IINGS OF HOPE	N/A	PUBLIC	GENERAL	
				5,000
WOLF HOLLOW WILDLIFE REHAB	N/A	PUBLIC	GENERAL	
				10,000
WOMEN'S WORLD HEALTH INT'L	N/A	PUBLIC	general	
				15,000
				:
		<u> </u>		
		Ti.		
			<u> </u>	
Total from continuation sheets				

FORM 990-PF	DIVIDENDS	S AND INTER	EST FROM SECU	RITIES ST	TATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
MORGAN STANLEY	51	•	0. 51	. 51.	<u> </u>
TO PART I, LINE 4	51	•	0. 51	51.	
FORM 990-PF		ACCOUNTI	NG FEES	Si	PATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES - RORUTTENBERG & CO.	ONALD	1,881.	941.		940.
TO FORM 990-PF, PG 1	L, LN 16B	1,881.	941.		940.
FORM 990-PF		OTHER E	XPENSES	S	FATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
OFFICE EXPENSES	-	263.	0.		263.
TO FORM 990-PF, PG	l, LN 23	263.	0.		263.