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Form 990-PF

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

2014

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. Openito: Public Inspection For calendar year 2014, or tax year beginning 2014, and ending Employer identification number ELIZABETH WEBB KANTA CHARITABLE TRUST 46-0946748 133 E. HIGHLAND VIEW DR. R Telephone number (see instructions) BOISE, ID 83702 (208) 342-3658 If exemption application is pending, check here G Check all that apply Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check Address change Name change here and attach computation X Section 501(c)(3) exempt private foundation Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated under section 507(b)(1)(A), check here X Cash Fair market value of all assets at end of year Accounting method Accrual (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► s (Part I, column (d) must be on cash basis) 1,711,473 Partie Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books ıncome ıńcome for charitable columns (b), (c), and (d) may not necessarily equal the amounts in column (a) purposes (cash basis only) (see instructions)) 600,169 Contributions, gifts, grants, etc, received (attach schedule) 2 Ck ► of the foundn is not required to attach Sch B Interest on savings and temporary cash investments Dividends and interest from securities 46,314 46,314 5 a Gross rents b Net rental income or (loss) 6 a Net gain or (loss) from sale of assets not on line 10 10,678. REVENUE b Gross sales price for all assets on line 6a 10,678 Capital gain net income (from Part IV, line 2) 10,678.Net short-term capital gain Income modifications 10 a Gross sales less returns and allowances **b** Less Cost of goods sold C Gross profit or (loss) (attach schedule). 11 Other income (attach schedule) 12 Add lines 1 through 11 1,657, 56,992 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 egal fees (attach schedule) 16 a ADMINISTRATIVE h nting fees (attach sch) JUL GENNACOS. 17 S 18 19 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses, Add lines 13 through 23 PART XV 25 Contributions, gifts, grants paid 127,500. 127,500. Ø, 26 Total expenses and disbursements. Add lines 24 and 25 127,500 127,500 Subtract line 26 from line 12: a Excess of revenue over expenses 1,529,661 and disbursements **b** Net investment income (if negative, enter -0-) 56,992.

C Adjusted net income (if negative, enter -0-)

Page 2

Par	शाळ	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		of year	
The San	22.5(6)		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
`	1	Cash - non-interest	-bearing ,			_	
	2	Savings and tempor	ary cash investments .		275,239	. 275,239.	
	3	Accounts receivable	>				
		Less allowance for	doubtful accounts ►				
	4	Pledges receivable	-	地球 。	於某一業務 與		
		Less allowance for	doubtful accounts ►				
	5	Grants receivable					
	6	Receivables due from offic	cers, directors, trustees, and other ch schedule) (see instructions)				
				p.O. E. aphaga. As an approximate file and the control of the	750×150000, NOWONO 111270×4470 72700		
۸	7	Other notes and loans rec	` ' ==========				
ŝ		Less allowance for					
A S E T	8	Inventories for sale					
Ť	9	Prepaid expenses a	<u>-</u>				
S		obligations (attach s	· ·				
	ı		stock (attach schedule) STATEMENT 1		1,972,709	. 1,436,234.	
	`	□ Investments — corporate	,	Chi Picifia hak untura mengangan penggan ang kanang			
	11	Investments – land, equipment basis.	buildings, and	".Le45 to: "	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
		Less. accumulated deprec (attach schedule)	elation • • • • • • • • • • • • • • • • • • •				
	12	Investments – mort	• •				
	13	Investments - other		SAME OF THE SAME O	2	and the Control of th	
	14	Land, buildings, and					
		Less: accumulated deprec (attach schedule)	-				
	15 16	Total assets (to be	be ► completed by all filers —) Also, see page 1, item l) .	0.	2,247,948	. 1,711,473.	
L	17		nd accrued expenses		, , , , , , , , , , , , , , , , , , , ,		
I A	18	Grants payable					
B	19	Deferred revenue					
- I	20	Loans from officers, direc	tors, trustees, & other disqualified persons .				
ī	21	Mortgages and other note	s payable (attach schedule)			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
Ţ	22	Other liabilities (des	cribe ►)			
Ė		· · · · · · · · · · · · · · · · · · ·	17 Haranda 00)	0	0		
<u>s</u>	23	· · · · · · · · · · · · · · · · · · ·	I lines 17 through 22)	0.	0		
		and complete lines	llow SFAS 117, check here 24 through 26 and lines 30 and 31.	_			
NF	24	Unrestricted					
EU	25	Temporarily restricted					
, D	26	•	F				
A B S A L T A		Foundations that do and complete lines	o not follow SFAS 117, check here 🕒 🔀 27 through 31.	2			
EL	27		orincipal, or current funds		2,247,948		
SŅ	28	Paid-in or capital surplus	, or land, bldg., and equipment fund				
OE	29	- ·	ulated income, endowment, or other funds				
RS	30		fund balances (see instructions)	0.	2,247,948		
	31	(see instructions)	net assets/fund balances	0.	2,247,948		
Par	HIII		iges in Net Assets or Fund Balanc			I make which residents and an experimental property and a property	
			alances at beginning of year - Part II, col		agree with		
1	end-	of-year figure reporte	d on prior year's return)	idinin (a), inie 50 (inust a	1	0.	
2	1 500 661						
3	3 Other increases not included in line 2 (itemize) ► SEE STATEMENT 2 3 718,287.						
4							
5		eases not included in line 2	· · · ·		5		
6	Tota	I net assets or fund b	alances at end of year (line 4 minus line 5	5) - Part II, column (b),	line 30 6	2,247,948.	

(a) List and describ	e the kind(s) of property sold (e g , r	eal estate.	(b) How acquired		(d) Date sold
. 2-story brick warehou	P — Purchase D — Donation	(month, day, year)	(month, day, year)		
1a CAPITAL GAIN DISTR	IBUTIONS		P		
b					
d					
е					
(e) Gross sales price (f) Depreciation allowed (g) Cost or other basis plus expense of sale				(h) Gain or (e) plus (f) m	
a 10,678.				-	10,678.
b					
<u> </u>					<u>-</u>
d					
Complete only for accets show	 wing gain in column (h) and owned b	y the foundation on 12/31/	60	(1) 0 (0.1	
(i) Fair Market Value as of 12/31/69	(i) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a	1 (1)	(I) Gains (Col gain minus column (I gan -0-) or Losses (fi	<), but not less
a					10,678.
b					
c					
d					
е		antar in David Line 7		Τ	
2 Capital gain net income or (ne		enter in Part I, line 7 ter -0- in Part I, line 7	_ 2		10,678.
	(loss) as defined in sections 1222(5)	_			·
ın Part I, Ime 8 .	ne 8, column (c) (see instructions). If		3		0.
	er Section 4940(e) for Reduce				
(For optional use by domestic private	foundations subject to the section 4940	(a) tax on net investment ind	come)	N/A	
If section 4940(d)(2) applies, leave	this part blank.				
Was the foundation liable for the se	ection 4942 tax on the distributable a	mount of any vear in the b	ase period?	∏Yes	□No
	alify under section 4940(e). Do not c		p	ب ا	₽
	each column for each year, see the ins	<u> </u>	entries	-	
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as	sets (col	(d) Distribution umn (b) divided	n ratio by column (c))
2013					
2012					
2011					
2010					
2009		······································		 	
2 Total of line 1, column (d)			2		
3 Average distribution ratio for	the 5-year base period — divide the ton has been in existence if less than	total on line 2 by 5, or by t 5 years	he 3		
4 Enter the net value of noncha	aritable-use assets for 2014 from Par	t X, line 5	4		
5 Multiply line 4 by line 3	5				
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		
8 Enter qualifying distributions	from Part XII, line 4		8		·
If line 8 is equal to or greater the	an line 7, check the box in Part VI, line	1b, and complete that part	using a 1% tax	rate See the	

Page 4

Par	Excise Tax Based on Investment Income (Section 4940(a), 494	10(b), 4940(e),	or 4948 – see	instructions)
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N	I/A' on line 1.			
'Date of ruling or determination letter' (attach copy of letter if necessary — see instrs)					
b Domestic foundations that meet the section 4940(e) requirements in Part V,					
check here ► ☐ and enter 1% of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)					
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2					
3	Add lines 1 and 2			3	1,140.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation	ns only Other	rs enter -0-)	4	0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter	er -0-		5	1,140.
6	Credits/Payments				
а	2014 estimated tax pmts and 2013 overpayment credited to 2014	6 a			
b	Exempt foreign organizations — tax withheld at source	6 b			4. 7.7
	Tax paid with application for extension of time to file (Form 8868)	6 c			
	Backup withholding erroneously withheld	6 d	-		
	Total credits and payments Add lines 6a through 6d	_ 		7	0.
8		220 is attache	d	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		 •	9	1,140.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		▶	10	
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax	Refu	unded ►	11	
	Statements Regarding Activities	1			,
				ar Vi	Yes No
1 a	During the tax year, did the foundation attempt to influence any national, state, or participate or intervene in any political campaign?	r local legislat	ion or aid it	2	1a X
				-	
b	Did it spend more than \$100 during the year (either directly or indirectly) for politi (see Instructions for the definition)?	cal purposes			1b X
	·			Į.	SIM OF THE PARTY
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies or distributed by the foundation in connection with the activities	ot any materiai	s publisnea		
_	Did the foundation file Form 1120-POL for this year?			ě	1.6 V
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed	during the ve	ar:	3	
	(1) On the foundation \Rightarrow 0. (2) On foundation management		> \$	0.	
е	Enter the reimbursement (if any) paid by the foundation during the year for political exp	enditure tax in	nposed on		
	foundation managers \$ 0.			S	
2	Has the foundation engaged in any activities that have not previously been report	ed to the IRS	?	776	2 X
	If 'Yes,' attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing	ıng instrument.	, articles	in the second	
•	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformation of incorporation	med copy of t	he changes	L	3 X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during	ig the year?		Ĺ	4 a X
b	If 'Yes,' has it filed a tax return on Form 990-T for this year?				4b N/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	<u>.</u>			5 X
	If 'Yes,' attach the statement required by General Instruction T			1	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) sa	atisfied either			
	By language in the governing instrument, or			18 a	
	 By state legislation that effectively amends the governing instrument so that no mand with the state law remain in the governing instrument? 	atory direction	s that conflict		6 X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, to	column (c), and P	Part XV		7 X
	Enter the states to which the foundation reports or with which it is registered (see			9	
- *	ID	·			
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gene (or designate) of each state as required by <i>General Instruction G</i> ? If 'No,' attach explanation	eral SEE	STATEMENI	· 3	8 b X
C.				lä lä	
9	Is the foundation claiming status as a private operating foundation within the mea for calendar year 2014 or the taxable year beginning in 2014 (see instructions for	Part XIV)? If	f 'Yes,' complete	e Part XIV	9 X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a			Ī	
	and addresses	SEE	STATEMENT		10 X
BAA			-	For	m 990-PF (2014)

Pā	Rand Statements Regarding Activities (continued)				
11	11 At any time during the year, did the foundation, directly or indirectly, own a controlled entit within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	ty	11		X
12	12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disc advisory privileges? If 'Yes,' attach statement (see instructions)	qualified person had	12		Х
13	13 Did the foundation comply with the public inspection requirements for its annual returns an Website address ► N/A	nd exemption application?	13	Х	
14	Website address N/A The books are in care of ► SUSAN COPPLE	Telephone no (2	08) 342	2-365	8
15	Located at ► 133 E. HIGHLAND VIEW DR. BOISE ID 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —	ZIP + 4 ► 83702			
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 15			N/A
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or oth bank, securities, or other financial account in a foreign country?	her authority over a	16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly enter the name of the foreign country	TD F 90-22.1) If 'Yes,'			
Pa	Paravilles Statements Regarding Activities for Which Form 4720 May Be R	Required	See Miles	al 🗸	
1	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies. 1 a During the year did the foundation (either directly or indirectly):		建筑	Yes	No
•	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X	No ,		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	☐ Yes	No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X	35555		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	∐Yes X	No 🔐		130
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	Yes X	No	2, 76	
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	e Yes X	No .		
	b If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions or Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see	described in instructions)?	11	N c	/A
	Organizations relying on a current notice regarding disaster assistance check here	▶ [
	c Did the foundation engage in a prior year in any of the acts described in 1a, other than except that were not corrected before the first day of the tax year beginning in 2014?	cepted acts,	10		X
2	2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation private operating foundation defined in section 4942(j)(3) or 4942(j)(5))	on was a			
	a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?	☐Yes X	No 🏂		
	If 'Yes,' list the years ► 20 _ , 20 _ , 20 _ , 20			167	, <u>, (</u>
	b Are there any years listed in 2a for which the foundation is not applying the provisions of s (relating to incorrect valuation of assets) to the year's undistributed income? (If applying so all years listed, answer 'No' and attach statement — see instructions)	section 4942(a)(2) ection 4942(a)(2) to	21	o N	A
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list	st the years here			
_	► 20 , 20 , 20 , 20				
	3 a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	Yes X	No .		
	b If 'Yes,' did it have excess business holdings in 2014 as a result of (1) any purchase by the or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer per by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or b (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form determine if the foundation had excess business holdings in 2014)	riod approved pequest, or	31	o N	/A
4	4 a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	s	4:	 	Х
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	t could	41	o e	X
DA.	BAA		Form 9	90-PF	(2014)

Part VII B: Statements Regarding Activit	ies for Which Form	า 4720 May Be Req	uired (continue	ed)	
5 a During the year did the foundation pay or incu	• • • • • • • • • • • • • • • • • • • •				
`(1) Carry on propaganda, or otherwise attemp	3	(Yes	X No	
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ation drive?	-	Yes	X No	
(3) Provide a grant to an individual for travel,		Yes	X No		
(4) Provide a grant to an organization other the in section 4945(d)(4)(A)? (see instructions	nan a charitable, etc, or s)	ganization described	Yes	X No	
(5) Provide for any purpose other than religion educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	e, literary, or or animals?	Yes	X No	
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to on a current notice regard	qualify under the excep ding disaster assistance	tions e		5b N/A
Organizations relying on a current notice rega	rding disaster assistanc	ce check here)	· 🛮	
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure responsible for the statement required by Regularity.	sibility for the grant?	·	N/A Yes	No	April 1
6 a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or indi	rectly, to pay premiums	S Yes	X No	
b Did the foundation, during the year, pay premi	iums, directly or indirect	tly, on a personal bene	fit contract?		6b X
If 'Yes' to 6b, file Form 8870	dat.a			₹ N.	
7 a At any time during the tax year, was the found b If 'Yes,' did the foundation receive any procee				X No N/A	7 b
Part VIII Information About Officers, D				,	
and Contractors					
1 List all officers, directors, trustees, foundation			tructions).		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions employee bend plans and defer compensation	efit red	Expense account, other allowances
SUSAN COPPLE	TRUSTEE	0.		0.	0
133 E. HIGHLAND VIEW DR. BOISE, ID 83702	1.00				
2 Compensation of five highest-paid employees (of	her than those included o	on line 1 – see instructio	ns). If none, enter 'N	ONE.'	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions employee bene plans and defer compensation	efit	Expense account, other allowances
NONE					
Fotal number of other employees paid over \$50,000	<u> </u>		1	•	0
rotar number of other employees paid over \$50,000	,			´ I	U

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 `Five highest-paid independent contractors for professional services (see		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	-	0
Partix A Summary of Direct Charitable Activities		
-	· · · · · · · · · · · · · · · · · · ·	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statist organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ıcal ınformation such as the number of	Expenses
1 SEE STATEMENT 5		
2		
3		
4		
4		
		· · · · · · · · · · · · · · · · · · ·
Partix 5 Summary of Program-Related Investments (see instr		
Describe the two largest program-related investments made by the foundation during t	he tax year on lines 1 and 2.	Amount
1		
<u>N/A</u>		
2		
All other program-related investments See instructions.		
3		
`		
Total. Add lines 1 through 3	-	0.
BAA		Form 990-PF (2014)

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations,

	see instructions.)		
1 a	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes Average monthly fair market value of securities	1 a	1,366,503.
t	Average of monthly cash balances	1 b	289,318.
C	Fair market value of all other assets (see instructions)	1 c	
c	Total (add lines 1a, b, and c)	1 d	1,655,821.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c	46.2	
	(attach detailed explanation) 1 e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,655,821.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	24,837.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,630,984.
6	Minimum investment return. Enter 5% of line 5	6	81,549.
Par	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private opera and certain foreign organizations check here ► and do not complete this part.)	ting fo	oundations
1	Minimum investment return from Part X, line 6	1	81,549.
2 a	Tax on investment income for 2014 from Part VI, line 5		
Ŀ	Income tax for 2014. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2 c	1,140.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	80,409.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	80,409.
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, line 1	7	80,409.
Pai	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes		
ā	a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	127,500.
	Program-related investments total from Part IX-B	1 b	
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: Suitability test (prior IRS approval required)	3 a	
ŀ	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	127,500.
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	127,500.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the for	ındatıon	

Form **990-PF** (2014)

Par XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
Distributable amount for 2014 from Part XI,		NET CHECK		
line 7				80,409.
2 Undistributed income, if any, as of the end of 2014:		7 - 9e-787		
a Enter amount for 2013 only			0.	
b Total for prior years. 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2014. a From 2009				
b From 2010			, jajan	
c From 2011				
d From 2012	in the state of	1. The 1.		
e From 2013		The state of the s		
f Total of lines 3a through e	0.	Figure 1		
4 Qualifying distributions for 2014 from Part	106/5			10 a 2 a 2 a 2 a 2 a 2 a 2 a 2 a 2 a 2 a
XII, line 4 ► \$ 127,500.		****	7.46	
a Applied to 2013, but not more than line 2a	Andrew Control		0.	
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
 Treated as distributions out of corpus (Election required — see instructions) 	0.			2.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1.5 (1
d Applied to 2014 distributable amount				80,409.
e Remaining amount distributed out of corpus	47,091.		- XS 201	
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the	0.	2 2 2		U.
same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:	**************************************			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	47,091.		14. The second	
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		4:17
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	CARACTE CONTRACTOR			
amount - see instructions		0.		1000
e Undistributed income for 2013 Subtract line 4a from		-11	_	
line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2014 Subtract lines		***	3	
4d and 5 from line 1 This amount must be distributed in 2015				_
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by			1.5	
section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)	0.			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7 (see instructions)	0.		1.00 E 10 E	
9 Excess distributions carryover to 2015. Subtract lines 7 and 8 from line 6a	47,091.	144		
10 Analysis of line 9		PLANT TARKET	100	
a Excess from 2010		1 J. 100		
b Excess from 2011		THE STATE OF THE S		
c Excess from 2012				
d Excess from 2013				
e Excess from 2014 . 47,091.				Form 990-PF (2014)
BAA				1:01111 330-FF (2014)

Form 990-PF (2014) ELIZABETH WEBB K				46-0946748	Page 10
Part Private Operating Foundation					N/A
1 a If the foundation has received a ruling or detective for 2014, enter the date of the	ermination letter that rulina	t it is a private operat	ing foundation, and th	e ruling ►	
b Check box to indicate whether the foundate	•	erating foundation d	escribed in section	4942(J)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		·
income from Part I or the minimum investment return from Part X for each year listed	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
b 85% of line 2a					
 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 assets qualifying under					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i) b 'Endowment' alternative test — enter 2/3 of					
minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test — enter.					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part W. Supplementary Information assets at any time during the	(Complete this	s part only if the	foundation had	\$5,000 or more	in
1 Information Regarding Foundation Mana		15tt dettolis.)			
a List any managers of the foundation who have close of any tax year (but only if they have NONE	e contributed more t	than 2% of the total c than \$5,000) (See	ontributions received t section 507(d)(2).)	by the foundation befo	ore the
b List any managers of the foundation who own	10% or more of the	e stock of a corporation	on (or an equally large	portion of the owner	ship of
a partnership or other entity) of which the NONE	foundation has a 1	10% or greater inter	est		·
2 Information Regarding Contribution, Gra Check here X if the foundation only make requests for funds If the foundation make complete items 2a, b, c, and d	akes contributions to	preselected charitab	le organizations and d	loes not accept unsol nizations under othe	icited ir conditions,
a The name, address, and telephone number of	r e-mail address of	the person to whom a	applications should be	addressed	• •
, , , ,		·			
b The form in which applications should be	submitted and info	rmation and materia	als they should includ	le [.]	
c Any submission deadlines:					
		 			
d Any restrictions or limitations on awards,	such as by geogra _l	phical areas, charita	ible fields, kinds of it	nstitutions, or other	ractors'
				_	

Rank Supplementary Information (co	ntınued)			
3 Grants and Contributions Paid During the Ye	ar or Approved for Fut	ure Paymen	<u>t</u>	T
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year				
SEE STATEMENT 6				
	-			
Total			► 3a	127,500
b Approved for future payment				
				1
]		
		<u> </u>	▶ 2b	

inter gross amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	(e)
1. Drogram common vocania	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions)
1 Program service revenue:	<u> </u>		code		
a	 - 		+		
b			 		
c	<u> </u>		 		
u		· . 	 -		· · · · · · · · · · · · · · · · · · ·
<u> </u>			 		
g Fees and contracts from government agencies			+		<u></u>
2 Membership dues and assessments			++-		
3 Interest on savings and temporary cash investments			 		
4 Dividends and interest from securities			14	46,314.	
5 Net rental income or (loss) from real estate	Will Market M			40,514.	TECHNICAL STATE OF THE STATE OF
a Debt-financed property	SECURITY SECTION	ENCOLUMN CONTRACTOR DE CONTRAC	以於2000年 1944	STATE OF THE PROPERTY OF THE	44 7 1 1 45 E A. S.
b Not debt-financed property					
6 Net rental income or (loss) from personal property			+		
7 Other investment income			+		
8 Gain or (loss) from sales of assets other than inventory			14	10,678.	
9 Net income or (loss) from special events.			 		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					THE PROPERTY OF
a	Milana Transaction of the Control of		in administration of the control	21 SEC. 2. CO. SHIP LANGUAGE CONTRACTOR CONT	and the second s
b		-			
c			 	-	
d			<u> </u>		
e					<u></u>
Subtotal Add columns (b), (d), and (e)	1000			56,992.	
13 Total. Add line 12, columns (b), (d), and (e)				13	56,992
See worksheet in line 13 instructions to verify calcula	tions)			•	
RandXVIB Relationship of Activities to the	ne Accomplis	hment of Exemp	t Purpose	s	
Line No. Explain below how each activity for which accomplishment of the foundation's exem	income is repor pt purposes (oth	ted in column (e) of ler than by providing	Part XVI-A c funds for suc	ontributed important ch purposes) (See i	ly to the nstructions.)
N/A					

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions.)
N/A	

Part Will Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

de re a Tr (1	escribed lating to	ganization directly in section 501(c) of political organizat from the reporting assets	of the Code (ot tions?	ther than section 5	501(c)(3) orgar	nizatións	s) or in section 5			1 a (1) 1 a (2)	Yes	No X X
b O	, ther trans	sactions.							ţ		t. 1841	
		of assets to a non	charitable exe	mpt organization					ľ	1 b (1)		X
•	•	ases of assets fror			ization				ŀ	1 b (2)		X
		of facilities, equip							ŀ	1 b (3)		X
•	•	ursement arrange	•						ŀ	1 b (4)		X
•	•	or loan guarantee							ŀ	1 b (5)		$\frac{x}{x}$
(6) Performance of services or membership or fundraising solicitations							<u> </u>	1 b (6)		X		
		facilities, equipme		· -		ees			H	1 c		$\frac{X}{X}$
- 0	namy or	raomaos, oquipini	orit, maining no	,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	or para emprey	000			L	10		
d If th ar	the answ e goods, ny transa	ver to any of the a other assets, or ser action or sharing a	bove is 'Yes,' ovices given by the trangement, st	complete the follo the reporting found how in column (d)	wing schedule ation If the four the value of the	Columi ndation r ne goods	n (b) should alw eceived less thar s, other assets,	ays show to fair market or services	he fair m value in received	arket valı	ue of	
(a) Line	no (b	Amount involved	(c) Name o	of noncharitable exemp	t organization	(d)	Description of tran	sfers, transact	ions, and s	haring arrar	igement	s
N/A										.,,		
												
					 							
						<u></u>						
					 -							
												
							.	 				
												
			_									
de	escribed i	dation directly or inc in section 501(c) o implete the followi	of the Code (ot	d with, or related to ther than section 5	, one or more ta 501(c)(3)) or ın	section	ot organizations 527?			Yes	X	No
		lame of organizati		(b) Type (of organization		(c) Descriptio	n of relat	tionship		
N/A	\-\frac{1}{2}	<u> </u>			<u> </u>		1			- 'F		
·												
		• • •										
Sign	Under pena correct, and	alties of perjury, I declar d complete Declaration	e that I have exami of preparer (other t	ined this return, includin than taxpayer) is based	ng accompanying so on all information o	hedules ar of which pro	nd statements, and to eparer has any know	the best of my ledge	knowledge	and belief, i	RS disci	ıss
lere	Sus	san CooM	·		6/1/2014	P :	TRUSTEE			preparer (see ipstr	shown b	elow
	Signature	e of officer or trustee		D	Pate /		itle				Yes	No
	P	rint/Type preparer's nan	ne	Preserrer's sig	gnature		Date	Check	X If	PTIN		
aid	F	RYAN E. STRA	TTON		-XXY		5/27/16	self-emple		P00535	759	
repa	rer F			ASSOCIATES	RLAC			Firm's EIN ►				
Jse O					UTE 290				_	·		
		_		83702-7001				Phone no	(208)	336-4	<u>19</u> 53	
BAA										Form 99 0		2014)

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

Schedule of Contributors

2014

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization		Employer identification number			
ELIZABETH WEBB KANTA CHARITAB	LE TRUST	46-0946748			
Organization type (check one):					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a	private foundation			
	527 political organization				
Form 990-PF	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a privi	ate foundation			
	501(c)(3) taxable private foundation				
Check if your organization is covered by the Ge	eneral Rule or a Special Rule				
Note. Only a section 501(c)(7), (8), or (10) orga	inization can check boxes for both the General Rule and a S	pecial Rule See instructions			
property) from any one contributor. Comple	, or 990-PF that received, during the year, contributions tota te Parts I and II. See instructions for determining a contribut	ling \$5,000 or more (in money or or's total contributions			
Special Rules					
under sections 509(a)(1) and 170(b)(1)(A)(vi).	1(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% supp that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, he year, total contributions of the greater of (1) \$5,000 or (2) D-EZ, line 1. Complete Parts I and II	16a. or 16b. and that			
during the year, total contributions of more	1(c)(7), (8), or (10) filing Form 990 or 990-EZ that received than \$1,000 <i>exclusively</i> for religious, charitable, scientific, lichildren or animals. Complete Parts I, II, and III	rom any one contributor, lerary, or educational			
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					
990-PF), but it must answer 'No' on Part IV, lin	the General Rule and/or the Special Rules does not file Sche 2, of its Form 990, or check the box on line H of its Form effling requirements of Schedule B (Form 990, 990-EZ, or 99	990-EZ or on its Form 990-PF,			

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

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2014)

ao	e

of

of Part 1

Name of organization

ELIZABETH WEBB KANTA CHARITABLE TRUST

Employer identification number 46-0946748

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

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ELIZABETH WEBB KANTA TRUST 133 E. HIGHLAND VIEW DR. BOISE, ID 83702	\$1,600,169.	Person X Payroll
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		φ	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
	<u></u>	0 - b - d - d - B (F 000	000 E7 +* 000 DE\ (0014)

1 to

1 of Part II

Name of organization

ELIZABETH WEBB KANTA CHARITABLE TRUST

46-0946748

Employer identification number

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

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	CORPORATE STOCKS AND MUTUAL FUNDS		
		\$1,296,772.	1/02/14
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	_
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$ -	 -

1 of Part III

Name of organization

Employer identification number

ELIZABÈTH WEBB KANTA CHARITABLE TRUST

| 46-0946748 |
| Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8)

or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)

	Use duplicate copies of Part III if additional	space is needed	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		
	Transferee's name, addres	(e) Transfer of gift s, 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
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	Description of how gift is held
	Transferee's name, addres	(e) Transfer of gift s, 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
Part I			
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee

2014

FEDERAL STATEMENTS

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ELIZABETH WEBB KANTA CHARITABLE TRUST

46-0946748

STATEMENT 1 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION <u>METHOD</u>	BOOK VALUE	FAIR MARKET VALUE
CETERA - SECURITIES CETERA - MUTUAL FUNDS CETERA - PREFERRED SECURITIES	COST COST COST TOTAL	\$ 445,510. 1,517,199. 10,000. \$ 1,972,709.	\$ 585,168. 841,202. 9,864. \$ 1,436,234.

STATEMENT 2 FORM 990-PF, PART III, LINE 3 OTHER INCREASES

UNREALIZED LOSS OF CONTRIBUTED PROPERTY

TOTAL \$ 718,287. \$ 718,287.

STATEMENT 3 FORM 990-PF, PART VII-A, LINE 8B COPIES OF FORM 990-PF TO STATE OFFICIALS

THE STATE OF IDAHO DOES NOT REQUIRE COPIES OF AN ORGANIZATION'S FORM 990-PF TO BE FURNISHED TO THE ATTORNEY GENERAL.

STATEMENT 4 FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

NAME OF SUBSTANTIAL CONTRIBUTOR

ADDRESS OF SUBSTANTIAL CONTRIBUTOR

ELIZABETH WEBB KANTA TRUST

133 E. HIGHLAND VIEW DR. BOISE, ID 83702

STATEMENT 5 FORM 990-PF, PART IX-A, LINE 1 SUMMARY OF DIRECT CHARITABLE ACTIVITIES

DIRECT CHARITABLE ACTIVITIES

EXPENSES

THE EXEMPT PURPOSE OF THE TRUST IS TO PROVIDE FINANCIAL SUPPORT TO LOCAL CHARITABLE ORGANIZATIONS. IN CARRYING OUT ITS EXEMPT PURPOSE, THE TRUST WILL PROVIDE FINANCIAL GRANTS TO OTHER SECTION 501(C)(3) ORGANIZATIONS.

PLEASE SEE PART XV FOR A FULL LIST OF GRANTS PAID BY THE TRUST.

20	1	1
ZU		4

FEDERAL STATEMENTS

PAGE 2

ELIZABETH WEBB KANTA CHARITABLE TRUST

46-0946748

STATEMENT 6 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
CATHOLIC CHARITIES OF IDAHO 1501 S. FEDERAL WAY BOISE, ID 83705			SEE STATEMENT 5	\$ 5,000.
BOISE ART MUSEUM 670 JULIA DAVIS DR BOISE, ID 83702			SEE STATEMENT 5	5,000.
CHILDREN'S HOME SOCIETY OF IDAHO 740 WARM SPRINGS AVENUE BOISE, ID 83712			SEE STATEMENT 5	5,000.
IDAHO STATE HISTORICAL SOCIETY 2205 OLD PENITENTIARY RD BOISE, ID 83712			SEE STATEMENT 5	5,000.
ZOO BOISE 355 JULIA DAVIS DRIVE BOISE, ID 83702			SEE STATEMENT 5	5,000.
BIG BROTHERS BIG SISTERS OF SOUTHWEST ID 110 N. 27TH ST. STE 100 BOISE, ID 83702			SEE STATEMENT 5	5,000.
BOYS & GIRLS CLUBS OF ADA COUNTY 610 E. 42ND ST GARDEN CITY, ID 83714			SEE STATEMENT 5	5,000.
LEARNING LAB 308 E. 36TH STREET GARDEN CITY, ID 83714			SEE STATEMENT 5	5,000.
THE IDAHO FOODBANK 3562 SOUTH TK AVE BOISE, ID 83705			SEE STATEMENT 5	5,000.
TERRY REILLY 211 16TH AVE NOTH PO BOX 9 NAMPA, ID 83653			SEE STATEMENT 5	5,000.
DISCOVERY CENTER OF IDAHO 131 W MYRTLE ST BOISE, ID 83702			SEE STATEMENT 5	5,000.

2014

FEDERAL STATEMENTS

PAGE 3

ELIZABETH WEBB KANTA CHARITABLE TRUST

46-0946748

STATEMENT 6 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
THE IDAHO CATHOLIC FOUNDATION 1501 S. FEDERAL WAY, SUITE 400 BOISE, ID 83705			SEE STATEMENT 5	
BOISE RESCUE MISSION MINISTRIES PO BOX 1494 BOISE, ID 83701			SEE STATEMENT 5	5,000.
WOMEN'S & CHILDREN'S ALLIANCE 720 W. WASHINGTON BOISE, ID 83702			SEE STATEMENT 5	5,000.
NAVY SEAL FOUNDATION 1619 D STREET VIRGINIA BEACH, VA 23459			SEE STATEMENT 5	5,000.
IDAHO DIAPER BANK 621 E KING ST #100 MERIDIAN, ID 83642			SEE STATEMENT 5	5,000.
ST MARKS FOOD BANK 7960 W NORTHVIEW ST BOISE, ID 83704			SEE STATEMENT 5	2,500.
IDAHO SPECIAL OLYMPICS 199 E 52ND ST GARDEN CITY, ID 83714			SEE STATEMENT 5	2,500.
PERFORMING ANIMAL SOCIETY 1065 POOL STATION RD SAN ANDREAS, CA 95249			SEE STATEMENT 5	2,500.
YMCA JUST FOR KIDS CAMPAIGN 1050 W STATE STREET BOISE, ID 83702			SEE STATEMENT 5	5,000.
RONALD MCDONALD HOUSE 101 E WARM SPRINGS AVE BOISE, ID 83712			SEE STATEMENT 5	5,000.
ST VINCENT DE PAUL FOOD BANK 3209 W OVERLAND RD BOISE, ID 83705			SEE STATEMENT 5	5,000.
CORPUS CHRISTI HOUSE 525 S AMERICANA BLVD BOISE, ID 83702			SEE STATEMENT 5	5,000.

2014

FEDERAL STATEMENTS

PAGE 4

ELIZABETH WEBB KANTA CHARITABLE TRUST

46-0946748

STATEMENT 6 (CONTINUED) FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
BOYS & GIRLS CLUB OF NAMPA 316 STAMPEDE DR NAMPA, ID 83687			SEE STATEMENT 5	\$ 5,000.
YMCA MAKE A SPLASH 1050 W STATE STREET BOISE, ID 83702			SEE STATEMENT 5	5,000.
HUMAN RIGHTS EDUCATION CENTER			SEE STATEMENT 5	5,000.
KNIGHTS OF THE HOLY SEPULCHRE 837 SW BLVD. APT. E JEFFERSON CITY, MO 65109			SEE STATEMENT 5	5,000.
			TOTAL	\$ 127,500.