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## Form 990-PF

Department of the Treasury Internal Revenue Service

PO-BOX 1747

For calendar year 2015, or tax year beginning

C/O RANDY KERN, TRUSTEE

THE WILLARD CHARITABLE FOUNDATION, INC

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

4/01

2016 Employer identification number

Telephone number (see instructions) 208-523-4741

82-0470336

▶ 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. Open to Public Inspection

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В

, 2015, and ending

2015

OMB No 1545 0052

IDAHO FALLS, ID 83403 If exemption application is pending, check here G Check all that apply Initial return Initial return of a former public charity 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 Check type of organization X Section 501(c)(3) exempt private foundation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Ε If private foundation status was terminated under section 507(b)(1)(A), check here Fair market value of all assets at end of year Accounting method X Cash Accrual (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination ► Ś (Part I, column (d) must be on cash basis ) 1,095,250. under section 507(b)(1)(B), check here Part I | Analysis of Revenue and (c) Adjusted net (a) Revenue and (b) Net investment (d) Disbursements Expenses (The total of amounts in expenses per books income income for charitable columns (b), (c), and (d) may not necespurposes sarily equal the amounts in column (a) (cash basis only) (see instructions)) Contributions, gifts, grants, etc, received (attach schedule) 1.000 2 Ck ► X if the foundation is not required to attach Sch B Interest on savings and temporary cash investments N/A Dividends and interest from securities 5 a Gross rents **b** Net rental income or (loss) 6 a Net gain or (loss) from sale of assets not on line 10 REVENU b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2). Net short term capital gain Income modifications 10 a Gross sales less returns and allowances **b** Less Cost of C Gross profit or (loss) (attach schedule) Other income (attach schedule) Total. Add lines 1 through 11 000 13 Compensation of officers, directors, trustees, etc. 0. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) See St 1 **b** Accounting fees (attach sch) 780 c Other prof fees (attach sch) 17 Interest 18 Taxes (attach schedule)(see instrs) 19 Depreciation (attach schedule) and depletion 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 23 780 780. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 780 0 780. Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements 220 b Net investment income (if negative, enter -0-) 0 C Adjusted net income (if negative, enter -0-)

Page 2

Par	t III	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End o	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing			
	2	Savings and temporary cash investments	15.	235.	235.
	3	Accounts receivable			
	١.	Less. allowance for doubtful accounts			
	4	Pledges receivable			
	ے ا	Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)			
A	`	Less allowance for doubtful accounts			
S	8	Inventories for sale or use			
A S E T	9	Prepaid expenses and deferred charges			
S	10:	a Investments – U.S. and state government obligations (attach schedule)			
	1	b Investments — corporate stock (attach schedule)			
		c Investments — corporate bonds (attach schedule)			
	11	Investments – land, buildings, and equipment basis			i
		Less: accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less: accumulated depreciation (attach schedule)			
	15	, 555 B0000mone B	1,053,022.	1,095,015.	1,095,015.
	16	Total assets (to be completed by all filers — see the instructions Also, see page 1, item I)	1,053,037.	1,095,250.	1,095,250.
L	17	Accounts payable and accrued expenses	1/000/00/.	1,030,200.	1,033,230.
Ä	18	Grants payable .			
В	19	Deferred revenue			
Ľ	20	Loans from officers, directors, trustees, & other disqualified persons.			
I T	21	Mortgages and other notes payable (attach schedule)			-
ı	22	Other liabilities (describe See Statement 3 )		28,073.	•
E S	23	Total liabilities (add lines 17 through 22)	0.	28,073.	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.	, , , , , , , , , , , , , , , , , , ,	20,013.	
N F	24	Unrestricted			
E U	25	Temporarily restricted			
D	26	Permanently restricted .		<del></del>	
A B S A E L T A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.			
ĔĹ	27	Capital stock, trust principal, or current funds	565,081.	565,081.	
SN	28	Paid-in or capital surplus, or land, bldg , and equipment fund	487,956.	502,096.	
o E	29	Retained earnings, accumulated income, endowment, or other funds	55,7550		
RS	30	Total net assets or fund balances (see instructions)	1,053,037.	1,067,177.	
	31	Total liabilities and net assets/fund balances (see instructions)		<u> </u>	
Par	<u> </u>  -	Analysis of Changes in Net Assets or Fund Balance	1,053,037.	1,095,250.	
					<u> </u>
1	end-	l net assets or fund balances at beginning of year – Part II, colun of-year figure reported on prior year's return)	nn (a), line 30 (must agre	ee with 1	1,053,037.
2		r amount from Part I, line 27a		2	220.
3		increases not included in line 2 (itemize) See Statement	4	3	41,993.
4	Add	lines 1, 2, and 3		4	1,095,250.
5		ases not included in line 2 (itemize) See Statement		5	28,073.
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5) -	- Part II, column (b), line	30 6	1,067,177.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions Form 990-PF (2015)

32,815,841.

780.

7

Add lines 5 and 6

Enter qualifying distributions from Part XII, line 4

		-04/			1	2age 4
Par		e instru	ctions	)		
J a	Exempt operating foundations described in section 4940(d)(2), check here					
	Date of ruling or determination letter (attach copy of letter if necessary — see instrs)	İ	ĺ			
t	Domestic foundations that meet the section 4940(e) requirements in Part V,	1	<u> </u>			0.
	check here ► and enter 1% of Part I, line 27b.		l			
C	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	-	l			
	foundations only Other's enter -0-)	2				0.
3	Add lines 1 and 2	3	<u> </u>			0.
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-	5	<u> </u>			0.
6	Credits/Payments:					
	2015 estimated tax pmts and 2014 overpayment credited to 2015	_	l .			
	Exempt foreign organizations — tax withheld at source 6b	_ ,	' 1			
	Tax paid with application for extension of time to file (Form 8868)	4	1			į.
7	Backup withholding erroneously withheld  Total gradity and neumants. Add lines 6s through 6d	<del></del> -	<u> </u>			
,	Total credits and payments Add lines 6a through 6d	7	<b>├</b> ─			<u>0.</u>
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here	8				
10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	<b>├</b>			0.
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 2016 estimated tax  * Refunded  t VII-A   Statements Regarding Activities	<u> 11</u>	<u> </u>			
						I No
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?			1.0	Yes	No
				1 a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?			1 b		X
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials por distributed by the foundation in connection with the activities	ublished	i			
c	Did the foundation file Form 1120-POL for this year?			1 c		x '
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year					
	(1) On the foundation >\$ 0. (2) On foundation managers		0.			1
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed foundation managers • \$ 0.	on				'
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
_	If 'Yes,' attach a detailed description of the activities					<del>  ^-</del> -
_	·					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, article of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	es		3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4 a	_	X
	of 'Yes,' has it filed a tax return on Form 990-T for this year?			4 b	N	/A
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If 'Yes,' attach the statement required by General Instruction T					
6	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 of	onflot				
	with the state law remain in the governing instrument?	.Orinict		6	Х	
7	Old 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	
8 a	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 <sup>2</sup> If 'No,' attach explanation			8 b	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	4942(1)	)(5)			
	for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' comple	te Part	XIV	9		X
10		names				
<del></del>	and addresses			10		X
BAA			Fo	rm <b>9</b> 9	U-PF	(2015)

	1990-PF (2015) THE WILLARD CHARITABLE FOUNDATION, INC	82-	<u> </u>	<u>6</u>		age 5
Pai	t VII-A Statements Regarding Activities (continued)			<del></del>		
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		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified advisory privileges? If 'Yes,' attach statement (see instructions)	ed person	had	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption website address.  N/A	applicatio	n?	13	X	
14	The books are in care of ► MILES WILLARD COMPANY  Telephone	no F	208-5	23-4	741	
• • •	Located at ► PO BOX 1747 IDAHO FALLS ID ZIP + 4 ►	834				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here	22.	·	N/A		
	and enter the amount of tax-exempt interest received or accrued during the year	▶ 1	15			N/A
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other autbank, securities, or other financial account in a foreign country?	hority ove	er a	16	Yes	No X
_	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country ▶					a consum
Pai	t VII-B   Statements Regarding Activities for Which Form 4720 May Be Required					
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.				Yes	No
1 a	During the year did the foundation (either directly or indirectly)					
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes	X No			,
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes	XNo			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes	X No	] ]		,
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes	X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available					
	for the benefit or use of a disqualified person)?	Yes	X No			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)	Yes	XNo			
ŧ	olf any answer is 'Yes' to 1a(1)-(6), did <b>any</b> 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 b	N	/A
	Organizations relying on a current notice regarding disaster assistance check here	•				
(	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 2015?			1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))					,
ā	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?	Yes	XNo			
	If 'Yes,' list the years ▶ 20 _ , 20 _ , 20		<u></u>			
I	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)	)(2) )(2) to				
	all years listed, answer 'No' and attach statement – see instructions.)			2 b	N,	/A
•	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he	re				
	► 20 , 20 , 20 , 20			1 1		
3 8	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			
ı	of If 'Yes,' did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to					
	determine if the foundation had excess business holdings in 2015.)			3 b	N	/A
4 8	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			4 a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could					
'	jeopardize its charitable purpose that had not been removed from jeopardy before the first day of					
PAA	the tax year beginning in 2015?			4 b orm 99	n pr	(2015)
BAA			Г(	פב ווויכ	<b>U-FF</b> (	(2017)

Form 990-PF (2015) THE WILLARD CHARI			82-04	70336	Page <b>6</b>
Part VII-B   Statements Regarding Activit		n 4720 May Be Red	uired (continued)		
-5 a During the year did the foundation pay or incu	•				
(1) Carry on propaganda, or otherwise attempt	ot to influence legislation	(section 4945(e))?	Yes	No	
(2) Influence the outcome of any specific publion, directly or indirectly, any voter registra	ic election (see section ition drive?	4955), or to carry	Yes X	No	
(3) Provide a grant to an individual for travel,	study, or other similar p	ourposes?	∐ Yes X	No	
(4) Provide a grant to an organization other the in section 4945(d)(4)(A)? (see instructions	nan a charitable, etc, orç )	ganization described	Yes X	No	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
(5) Provide for any purpose other than religion educational purposes, or for the prevention			Yes X	No	
b If any answer is 'Yes' to 5a(1)-(5), did any of t described in Regulations section 53 4945 or in (see instructions)?	he transactions fail to qual a current notice regardi	ualify under the exception ong disaster assistance	ons	5 b	N/A
Organizations relying on a current notice regai	rding disaster assistance	e check here			
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response	he foundation claim exe sibility for the grant?	mption from the	N/A Yes	No	11
If 'Yes,' attach the statement required by Regu	ulations section 53 4945	-5(d)			
6 a Did the foundation, during the year, receive ar on a personal benefit contract?	•			No	
<b>b</b> Did the foundation, during the year, pay premi	ums, directly or indirect	ly, on a personal benefi	t contract?	6 b	X
If 'Yes' to 6b, file Form 8870				 	
<b>7 a</b> At any time during the tax year, was the found <b>b</b> If 'Yes,' did the foundation receive any procee			سا ليا	No 7b	
Part VIII Information About Officers, Dir				1/ 11	
and Contractors	cc(013, 11u3(cc3, 1 c	anadion managers	, riiginy raid Empi	oyees,	
1 List all officers, directors, trustees, foundation	managers and their co	mpensation (see instru	ctions).	<del></del>	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation		se account, illowances
Louise Nelson	Director	0.	0.		0.
455 Gustafson	1.00				
Idaho Falls, ID 83402					
Virginia Willard	Director	0.	0.	Ì	0.
154 East 49th South	1.00		ļ	)	
Idaho Falls, ID 83404	Dimenton			<del> </del>	
Randy Kern	Director	0.	0.	}	0.
2230 East Greenbrier Idaho Falls, ID 83404	1.00				
10010 10113, 10 03404			<del></del>	<del> </del>	
	1			1	
				<u> </u>	
2 Compensation of five highest-paid employees					
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation		se account, illowances
None					
				<del> </del>	
	1				
				<del> </del>	
	1				
	1			}	
	1				
	1				
Total number of other employees paid over \$50,000	) 	<u> </u>	<u> </u>		0

Form 990-PF (2015) THE WILLARD CHARITABLE FOUNDATION, IN	C 82-04	
Part VIII Information About Officers, Directors, Trustees, Founda and Contractors (continued)	tion Managers, Highly Paid Empl	oyees,
3 Five highest-paid independent contractors for professional services (see ins	structions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None		
		<del></del>
		Ì
		<del> </del>
		}
	······································	<del> </del>
		}
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical	al information such as the number of	T
organizations and other beneficiaries served, conferences convened, research papers produced, etc	a mormation such as the number of	Expenses
1 N/A		
		1
2		
		_{
		<del></del>
3		_
		-{
		<del> </del>
4		-
		1
Part: IX:B: Summary of Program-Related Investments (see instru	uctions)	<u></u>
Describe the two largest program-related investments made by the foundation dur		Amount
1	ing the tax year of times 1 and 2.	Amount
'		-
<u>n/n</u>		-
2		<del> </del>
		1
		1
All other program-related investments See instructions		
3		_
		_
		<u></u>
Total. Add lines 1 through 3	· · · · · · · · · · · · · · · · · · ·	<u> </u>
BAA		Form <b>990-PF</b> (2015)

b Program-related investments — total from Part IX-B

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes

Amounts set aside for specific charitable projects that satisfy the Suitability test (prior IRS approval required)

Cash distribution test (attach the required schedule)

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

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)

Adjusted qualifying distributions. Subtract line 5 from line 4

BAA

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2015)

780

780.

5

6

TEEA0308L 10/13/15

#### Part:XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	<b>(d)</b> 2015
Distributable amount for 2015 from Part XI, line 7	医广克 电流流			50,249
2 Undistributed income, if any, as of the end of 2015		5. 量强数 1		1 ( )
a Enter amount for 2014 only		图: 上海	0	2 2 1
b Total for prior years 20, 20, 20		0		
3 Excess distributions carryover, if any, to 2015 a From 2010 918		是一个是一个。 第一个是一个		
<b>a</b> From 2010 918 <b>b</b> From 2011 618		77,李二基层均		
c From 2012 582				1432
d From 2013 784.				
e From 2014 944				
f Total of lines 3a through e	3,846	图5.12.金器。	F. The his	
4 Qualifying distributions for 2015 from Part		3.气节覆当		* * * * * * * * * * * * * * * * * * *
XII, line 4  \$ 780				
a Applied to 2014, but not more than line 2a		6 2 E 2	0	*
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions)		0		
<ul> <li>Treated as distributions out of corpus (Election required — see instructions)</li> </ul>	0	100		
d Applied to 2015 distributable amount		[7] [2] 建囊工		780
e Remaining amount distributed out of corpus	0_		- 20 T.	
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the	3,846			3,846
same amount must be shown in column (a) )			<b>医</b>	
<del>-</del>	度 2 4		章	量.
6 Enter the net total of each column as indicated below.				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0	牙 福州夏州		
<b>b</b> Prior years undistributed income. Subtract	Decree Lies			
line 4b from line 2b	<b>要性。</b>	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		1 0		
		[F - 气力][[]		
e Undistributed income for 2014 - Subtract line 4a from line 2a - Taxable amount — see instructions			0	上海 事
f Undistributed income for 2015. Subtract lines		10000000000000000000000000000000000000	[[] 14 14 14 15	
4d and 5 from line 1. This amount must be distributed in 2016.				45,623
7 Amounts treated as distributions out of			- 19' C = 1	10,7020
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required — see instructions)	0_		屋	L. ASS.
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	0			
9 Excess distributions carryover to 2016 Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9	<b>高马马·</b>	(3. () 一致,基础		F - 44 7
a Excess from 2011		10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	<b>E</b> -1219	
b Excess from 2012			F25-	[ 注記 まり
c Excess from 2013				
d Excess from 2014 e Excess from 2015				
e Excess from 2015		BLAL - C. TES AL		Form <b>990-PF</b> (2015)

Form 990-PF (2015) THE WILLARD CHAR				82-047033	<del></del>
Part XIV Private Operating Founda  1 a If the foundation has received a ruling or d					N/A
is effective for 2015, enter the date of the		inai ii is a private (	operating foundation	, and the fulling	
<b>b</b> Check box to indicate whether the foundation	on is a private opei	rating 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	(a) 2015	<b>(b)</b> 2014	(c) 2013	(d) 2012	(e) Total
each year listed	· · · · · · · · · · · · · · · · · · ·		<del> </del>	<u> </u>	
<b>b</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					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon.					
a 'Assets' alternative test — enter					
(1) Value of all assets			ļ		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter					
<ol> <li>Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalities)</li> </ol>				<u>:</u>	
(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			<u> </u>	<u> </u>	
Part XV Supplementary Information assets at any time during the	(Complete this	s part only if th	e foundation ha	ad \$5,000 or mo	re in
1 Information Regarding Foundation Manage		istructions.)	<del></del>	<del></del>	
a List any managers of the foundation who had close of any tax year (but only if they have	ave contributed mo	ore than 2% of the than \$5,000) (See	total contributions re section 507(d)(2))	ceived by the founda	ation before the
Virginia Willard					
<b>b</b> List any managers of the foundation who can partnership or other entity) of which the None	wn 10% or more of foundation has a 10	the stock of a corp % or greater interes	poration (or an equa est.	lly large portion of th	ne ownership of
2 Information Deposition Contained to Con-	t Citt I am Cabal				
2 Information Regarding Contribution, Gran Check here  ☐ If the foundation only n requests for funds. If the foundation make:	nakes contributions	to preselected cha	ırıtable organizations		
complete items 2a, b, c, and d		<u> </u>			
a The name, address, and telephone numbe	r or e-mail address	of the person to w	vnom applications sr	iouid de addressed	
See Statement 6		_			
<b>b</b> The form in which applications should be s	ubmitted and inforr	nation and materia	ils they should includ	le:	
See Statement for Line 2a					
c Any submission deadlines.					
See Statement for Line 2a					
d Any restrictions or limitations on awards, s	uch as by geograph	nical areas, charita	ble fields, kinds of in	nstitutions, or other f	actors
See Statement for Line 2a					
ВАА	TE	EA0310L 10/13/15		ſ	orm <b>990-PF</b> (2015)

Page 11

Name and address (flome or business)  Name and address (flome or business)  Amount  Total  Displayment  Naproved for future payment	3 Grants and Contributions Paid During the	e Year or Approved for Futu	re Payment		N/A
Total  b Approved for future payment		If recipient is an individual, show any relationship to any foundation manager or	Foundation status of recipient	Purpose of grant or contribution	
Total b Approved for future payment		substantial contributor	. John Cit		ļ
b Approved for future payment		substantial contributor	recipient		
b Approved for future payment					
				L► 3a	
					1
<b>_</b> . •	Total .			▶ 31	

## Part XVI-A Analysis of Income-Producing Activities

r gross amounts unless otherwise indicated	Unrelate	d business income	Excluded by	section 512, 513, or 514	(e)
Program service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	Related or exem function income (See instructions
r rogiam service revenue	<u> </u>		code		<del> </del>
		<u> </u>			<del>                                       </del>
			+ +		
<del></del>	<del></del>		++		
	+		<del>-                                    </del>		
	<del>                                     </del>		<del></del>		<del>                                     </del>
Fees and contracts from government agencies			+		<del></del>
Membership dues and assessments			-+		<del> </del>
Interest on savings and temporary cash investments	<del></del>		-		
Dividends and interest from securities			+		+
Net rental income or (loss) from real estate.	<del></del>	48 7 4			<del> </del>
Debt-financed property		- /			
Not debt-financed property	<del></del>		+		
Net rental income or (loss) from personal property			+ +		
Other investment income			+		<del> </del>
Gain or (loss) from sales of assets other than inventory	<u> </u>		+	· ·	
Net income or (loss) from special events			<del>-   -  </del> -		<del> </del>
Gross profit or (loss) from sales of inventory					<del> </del>
Other revenue.	<del></del>	<del></del>			<del>-</del>
		<u> </u>			<del></del>
	<del></del>		<del></del>		<del> </del>
			+		
			-+		<del></del> -
			1 1		1
Cutated Add adverse (b) (d) and (a)					<del>-</del>
	7 77				
Subtotal Add columns (b), (d), and (e)  Total. Add line 12, columns (b), (d), and (e)	•			13	
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations	ons )				
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate tXVI-B Relationship of Activities to the state of the state o	ons) ne Accompli			es	
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate   XVI-B Relationship of Activities to the SVI-B Relationship of Activity for which is	ons)	ted in column (e) of F	Part XVI-A co.	es	to the
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to verify calculations.  TXVI-B Relationship of Activities to the Explain below how each activity for which is accomplishment of the foundation's exemption.	ons)	ted in column (e) of F	Part XVI-A co.	es	to the structions )
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to verify calculations.  TXVI-B Relationship of Activities to the Explain below how each activity for which is accomplishment of the foundation's exemption.	ons)	ted in column (e) of F	Part XVI-A co.	es	to the structions )
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exemption.	ons)	ted in column (e) of F	Part XVI-A co.	es	to the structions )
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exemption.	ons)	ted in column (e) of F	Part XVI-A co.	es	to the structions )
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Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculate XVI-B Relationship of Activities to the No. Explain below how each activity for which accomplishment of the foundation's exemption.	ons) ne Accompli	ted in column (e) of F	Part XVI-A co.	es	to the structions )
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Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations to verify calculations.  TXVI-B Relationship of Activities to the Explain below how each activity for which is accomplishment of the foundation's exemption.	ons)	ted in column (e) of F	Part XVI-A co.	es	to the structions )

Part XVII Information Rec	LLARD CHARITABLE FOUNDATION, parding Transfers To and Transactions	and Relationships With Nonch	-0470336 aritable	Pa	<u> </u>
. Exempt Organ	zations	•			
1 Did the organization directly	or indirectly engage in any of the following with	any other organization	Š.	Yes	No
described in section 501(c) relating to political organization	of the Code (other than section 501(c)(3) organ	zations) or in section 527,			
	g foundation to a noncharitable exempt organiza	ition of			
(1) Cash	,		1 a (1)		X
(2) Other assets			1 a (2)		X
<b>b</b> Other transactions					
	ncharitable exempt organization		1 b (1)		X
	m a noncharitable exempt organization		1 b (2)		X
(3) Rental of facilities, equi	· · · · · · · · · · · · · · · · · · ·		1 b (3)		X
(4) Reimbursement arrange			1 b (4)		X
(5) Loans or loan guarante (6) Performance of service	es s or membership or fundraising solicitations	•	1 b (5)		X
	ent, mailing lists, other assets, or paid employe		1 b (6)		$\frac{\Lambda}{X}$
d If the answer to any of the the goods, other assets, or any transaction or sharing a	above is 'Yes,' complete the following schedule. services given by the reporting foundation. If the transpersent, show in column (d) the value of the	Column <b>(b)</b> should always show the e foundation received less than fair regions, other assets or services re	fair market value narket value in	of	
any transaction or sharing a  (b) Amount involved	above is 'Yes,' complete the following schedule, services given by the reporting foundation. If the trangement, show in column (d) the value of the column (c) Name of noncharitable exempt organization	Column (b) should always show the e foundation received less than fair re e goods, other assets, or services re (d) Description of transfers, transaction	ceived		3
any transaction or sharing a  (b) Amount involved	rrangement, show in column (d) the value of th	e goods, other assets, or services re	ceived		5
any transaction or sharing a  (b) Amount involved	rrangement, show in column (d) the value of th	e goods, other assets, or services re	ceived		3
any transaction or sharing a  (b) Amount involved	rrangement, show in column (d) the value of th	e goods, other assets, or services re	ceived		3
any transaction or sharing a  (b) Amount involved	rrangement, show in column (d) the value of th	e goods, other assets, or services re	ceived		5
any transaction or sharing a  (b) Amount involved	rrangement, show in column (d) the value of th	e goods, other assets, or services re	ceived		3
any transaction or sharing a  (b) Amount involved	rrangement, show in column (d) the value of th	e goods, other assets, or services re	ceived		5
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any transaction or sharing a  (b) Amount involved	rrangement, show in column (d) the value of th	e goods, other assets, or services re	ceived		3
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any transaction or sharing a  (b) Amount involved	rrangement, show in column (d) the value of th	e goods, other assets, or services re	ceived		3
any transaction or sharing a  (b) Amount involved	rrangement, show in column (d) the value of th	e goods, other assets, or services re	ceived		
any transaction or sharing a  (b) Amount involved	rrangement, show in column (d) the value of th	e goods, other assets, or services re	ceived		5
any transaction or sharing a  (b) Amount involved	rrangement, show in column (d) the value of th	e goods, other assets, or services re	ceived		3
any transaction or sharing a  a) Line no  (b) Amount involved  I/A	rrangement, show in column (d) the value of th	e goods, other assets, or services re  (d) Description of transfers, transaction	ceived		3

<b>2 a</b> Is de	the for	undation directly of the contract of the contr	or indirectly affiliat ) of the Code (oth	ed with, or related to, one of er than section 501(c)(3)) of	or more tax-exemp r in section 527?	pt organiza	tions	Yes X No
<b>b</b> If	'Yes,'	complete the follo	wing schedule					
	(a)	Name of organiz	ation	(b) Type of organiza	ition	(c)	Description of re	lationship
N/A								<del></del>
							<del>-</del>	
				<del></del>	<del> </del>			
				· · · · · · · · · · · · · · · · · · ·			-	
	Under pe	nalties of perjury, I decla	ire that I have examined	his return, including accompanying sch han taxpayer) is based on all informa	nedules and statements,	and to the best	of my knowledge and bel	ief, it is true,
Sign Here		inte of officer or trustee	ly Mh	han taxpayer) is based on all informi	1.	r has any know	vledge	May the IRS discuss this return with the preparer shown below (see instructions)?  X Yes No
		Print/Type preparer's	name	Preparer signature Q	Date	e , ,	Check If	PTIN
Paid		E. Chris G	oode, CPA	E. Chris Good	le, CPA	11/2/16	self-employed	P00952536
Prepa	rer	Firm's name	Pulliam &	Associates Charte	red		Firm's EIN - 82-(	
Use O		Firm's address	7235 W. Em	erald Street, Sui	te A			

BAA

Form **990-PF** (2015)

(208) 322-8525

Phone no

7235 W. Emerald Street, Suite A Boise, ID 83704-8600

2015	Federal Statements	Page 1
. Client 60088	THE WILLARD CHARITABLE FOUNDATION, INC C/O RANDY KERN, TRUSTEE	82-0470336
11/02/16		10.28AM
Statement 1 Form 990-PF, Part I, Line 10 Accounting Fees	6b	
Accounting Fees	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income  \$ 780. Total \$ 780. \$ 0.	
Statement 2 Form 990-PF, Part II, Line 1 Other Assets	15	
Life Insurance CSV-Res	Book Value stricted Asset  Total \$ 1,095,015.	Fair Market Value \$ 1,095,015. \$ 1,095,015.
Statement 3 Form 990-PF, Part II, Line 2 Other Liabilities	22	
Loan Payable	Total	\$ 28,073. \$ 28,073.
Statement 4 Form 990-PF, Part III, Line 3 Other Increases	3	
Increase-CSV Life Inst	urance Total	\$ 41,993. \$ 41,993.
Statement 5 Form 990-PF, Part III, Line 9 Other Decreases	5	
Insurance Premuium Pay	yment By Loan Total	\$ 28,073. \$ 28,073.

**2015** 

## **Federal Statements**

Page 2

**Client 60088** 

# THE WILLARD CHARITABLE FOUNDATION, INC C/O RANDY KERN, TRUSTEE

82-0470336

11/02/16

10 28AM

Statement 6 Form 990-PF, Part XV, Line 2a-d Application Submission Information

Name of Grant Program:

Name:

Care Of:

Street Address: City, State, Zip Code: Telephone:

E-Mail Address: Form and Content:

Submission Deadlines: Restrictions on Awards: Randy Kern, Trustee

PO Box 1747

Idaho Falls, ID 83402

208-523-4741

Letter containing the amount requested and the charitable

purpose for the funds awarded.

None For educational, humanitarian, religious or relief of

economically disadvantaged persons only.

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Page 2 82-0470336	10 28AM	March	066,942										
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	air Ma K, Line	ij	1 11	991	r Mark								
	22/16 Average Monthly Fair Market Value of Securities Form 990-PF, Part X, Line 1a	April	526, 510 526, 510	12,241,991	Average Monthly Fair Market Value 1,020,166								
, ,	e Mon 30-PF,	r E	š 		Month.								
2015 Client 60088	verage orm 99	Security	Averages	Totals	/erage								
2015 Client	11/02/16 Ave For	- 		-	A								