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

OMB No 1545-0052

2015

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.

Open to Public Inspection

			tax year beginni	ng J	ul 1 ,2	<u>015,</u>	and ending Ju	<u>n_</u>	30 , 2016	
Name of			NT.					A	Employer identification num	nber
		FOUNDATIO et (or P.O box numbe	er if mail is not delivered	to street a	iddress)		Room/suite	В	46-6471942 Telephone number (see instru	uctions)
P.O.	BOX	x 2360	, and ZIP or foreign pos				 	_	(307) 237-930	1
CASE		e or province, country	, and ZIP of foreign pos	stal code	ta	Y	82602	С	If exemption application is	pending, check here. >
		I that apply	Initial return		Initial return of a fo			_		
•		т	Final return	ţ	Amended return		, poems or any	P	1 Foreign organizations, che	ck here • [
			Address chan	ge	Name change				2 Foreign organizations mee here and attach computation	
H C		pe of organization			(c)(3) exempt private				nere and attach computation	
			nonexempt chan		<del>,</del>	Ť	nvate foundation	E	If private foundation status under section 507(b)(1)(A)	was terminated
		t value of all assets <i>II, column (c), line 1</i>			ounting method. [		ash X Accrual	_	.,,,,,	
	\$		,478.		column (d) must be	on c	ash basis.)	F	If the foundation is in a 60- under section 507(b)(1)(B)	
Part		nalysis of R		(1. 2.1.1.7)	(a) Revenue and		(b) Net investmen	<u>-</u>	(c) Adjusted net	(d) Disbursements
	sa	<b>xpenses</b> (The olumns (b), (c), a anly equal the an ee instructions)	e total of amounts ind (d) may not ne nounts in column )	in eces- (a)	expenses per book	(S	Income	•	income	for charitable purposes (cash basis only)
	1		nts, etc, received (attach sch	•						
	2	Ck ► X if the fo	rundation is <b>not</b> required to a	ittach Sch B			<u> </u>		<del> </del>	
	3	•	temporary cash investments							
	4 5-		rom securities		47,31	9.	47,31	9.		
		Net rental income								
R	6 a	or (loss)	sale of assets not on line 10	<del></del>	67,69	2.				
E	) t	Gross sales price for assets on line 6a .	orall 704	206.						
È	7		ome (from Part IV, line	•			67,69	2.		
< Ν - υ	9	•	talgaın 1s						<del> </del>	
, E	10 a	Gross sales less returns and	1					_		
ر ج	.	allowances	ļ							<u> </u>
/: -:	1 -	goods sold · · ·							ļ	
<u>.</u>	111		lach schedule)						ļ	
-		•	·							
	12		through 11 · · · ·		115,01	1.	115,01	1.		
	13	Other employees	icere; directors in see	s, tc · ·	<del> </del>				<del> </del>	
	15	Pension plans, emp	loyee benefits			_		_	ļ	
A	16a	Legal fees (attach s	chechue). 🤌 🖔 · 201 tach sch)	6 . 5						
D M		1 1	The second secon	_· <u> </u> g						
Ņ	F .	Other prof lees (att	OGDEN.	JT · ·	<u> </u>		<u> </u>		<del> </del>	
O P E R A	17	Taxes (attach schedule)	(see instrs) EXCISE	TAX.	2,93	Λ			<u> </u>	<u> </u>
R R	19	Depreciation (attach	ı		2,93	<b>1.</b>		_	<del>                                     </del>	
ŢŢ	20		etion		_ <del></del>					
N V G E	20		, and meetings			_			<u> </u>	
A E	22	Printing and publica	tions					_		
N X D P	23	Other expenses (att	•	pppe	4.00		4 00			
Ñ S	24	Total operating and	RUST DEPT.	FEES	4,03	8.	4,03	8.		
E		expenses. Add line	s 13 through 23 · · ·		6,97	2.	4,03	8.		<u> </u>
	25	Contributions, gifts, gran	•	• • • •	229,99	6.				229,996.
	26	Total expenses and Add lines 24 and 25	d disbursements.		236,96	8.	4,03	8.		_ 229,996.
	27	Subtract line 26 from			l					
	a	Excess of revenue and disbursements	•		-121,95	7			1	
	b	Net investment inc	come (if negative, enter	-0-)		•	110,97	3.		
			ne (if negative, enter -0							
DAAI	ine De	named Dades	tion Act Notice	1	·	_	TEE 40204 12		_	Form 990-PF (2015)

Par	4   4	Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only.	Beginning of year	End of	year
- 41		(See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing	1,013.	583.	583.
	2	Savings and temporary cash investments [	1,044.	147,164.	147,164.
	3	Accounts receivable			
		Less: allowance for doubtful accounts	517.	<u>53</u> 0.	530.
	4	Pledges receivable			]
		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 S	1	Less: allowance for doubtful accounts			
Š	8	Inventories for sale or use			
A S E T	9	Prepaid expenses and deferred charges			<u> </u>
S	10:	a Investments — U.S. and state government obligations (attach schedule)	2,079,286.	1,881,227.	1,900,566.
	1	b Investments — corporate stock (attach schedule)	1,469,786.	1,462,053.	1,590,369.
	(	c Investments — corporate bonds (attach schedule)	391,358.	329,490.	314,266.
	11	Investments — land, buildings, and equipment: basis			
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13				
	14	Land, buildings, and equipment: basis ►		· · · · · · · · · · · · · · · · · · ·	
		Less accumulated depreciation (attach schedule)			
	15 16	Total assets (to be completed by all filers -			
	<u> </u>	see the instructions. Also, see page 1, item I)	3,943,004.	3,821,047.	3,953,478.
ŀ	17	Accounts payable and accrued expenses			
À	18	Grants payable		<del>_</del>	
B	19	Deferred revenue			
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons			
Ť	21	Mortgages and other notes payable (attach schedule)			
E	22	Other liabilities (describe  )  Total liabilities (add lines 17 through 22)			
<u> </u>	23		<del></del>		
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
N F E U T N	24	Unrestricted			
ΤŇ	25	Temporarily restricted		<del></del>	
A D	26	Permanently restricted			
A B A L A N C		Foundations that do not follow SFAS 117, check here . > X and complete lines 27 through 31.			
E L T A	27	Capital stock, trust principal, or current funds	3,943,004.	3,821,047.	
SÑ	28	Pald-in or capital surplus, or land, bldg, and equipment fund			
C OE R S	29	Retained earnings, accumulated income, endowment, or other funds - · · ·			
RS	30	Total net assets or fund balances (see instructions)	3,943,004.	3,821,047.	, #
	31	Total liabilities and net assets/fund balances (see instructions)	3,943,004.	3,821,047.	
Pari		Analysis of Changes in Net Assets or Fund Balance		3/022/01/1	
	Total	I net assets or fund balances at beginning of year — Part II, column (a of-year figure reported on prior year's return)	a). line 30 (must agree w	ith	3 043 004
2		r amount from Part I, line 27a			3,943,004.
				<del> </del>	-121,957.
		lines 1, 2, and 3		· <del> </del>	3,821,047.
5	Docto	ases not included in line 2 (Itemize)			3,021,071.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) — Pa	art II, column (b), line 30	6	3,821,047.

Part V Capital Gains and I  (a) List and describe 2-story brick warehouse	Losses for Tax on Investmer the kind(s) of property sold (e.g , real e; or common stock, 200 shares MLC	estate,	(b) How acquire P — Purchase D — Donation		(d) Date sold (mo , day, yr )
1a SEE SCHEDILE III AT	TACHED		P .	Various	Various
b					
c					<u> </u>
d					
<u>e</u>	(0.5)	4 2 5 4 4 4 4	· - T	#\ C - t	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sale		(h) Gain or (e) plus (f) m	(loss) Inus (g)
a 704,206.	0.	63	6,514.		67,692.
b					
<u> </u>					
d					
Complete only for accets showin	g gain in column (b) and award by th	o foundation on 12/21/60		- <del></del>	<del></del>
(i) F.M.V.	ng gain in column (h) and owned by th	(k) Excess of col (i)		(1) Gains (Co gain minus col (k), l	ol (h) outnotless
as of 12/31/69	as of 12/31/69	over col. (j), if any		than -0-) or Losses (f	
a0.	0.		0.		67,692.
b					
d				<del> </del>	
2 Capital gain net income or (net o	capital loss).	enter in Part I, line 7 er -0- in Part I, line 7			
	ارے (ioss), end iss) as defined in sections 1222(5) an	_	F	2	67,692.
	3, column (c) (see instructions). If (loss			,	
Part Qualification Under				<u></u>	
If section 4940(d)(2) applies, leave this Was the foundation liable for the section of Yes,' the foundation does not qualify	on 4942 tax on the distributable amou y under section 4940(e). Do not comp	lete this part.		· · · · · · · Yes	X No
1 Enter the appropriate amount in	each column for each year; see the i	nstructions before making ar	ny entries.		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use ass	ets (c	(d) Distributio ol. (b) divided by o	n ratio col. (c))
2014	205,166.	4,26	1,172.		0.048148
2013	99,272.	4,16	0,798.		0.023859
2012	0.	3,93	7,296.		0.000000
2011					<u></u>
2010	<u> </u>				·
2 Total of line 1, column (d)				2	0.072007
3 Average distribution ratio for the number of years the foundation	5-year base period — divide the total has been in existence if less than 5 years.	on line 2 by 5, or by the ears		3	0.024002
4 Enter the net value of noncharita	able-use assets for 2015 from Part X,	line 5		4	3,955,973.
5 Multiply line 4 by line 3				5	94,951.
	me (1% of Part I, line 27b)			6	1,110.
7 Add lines 5 and 6			-	7	
a. Enter avalifican distributions for					96,061.
	m Part XII, line 4		<u> </u>	B South	96,061. 229,996.

Par		:tions)			
1 a	Exempt operating foundations described in section 4940(d)(2), check here · · · · · and enter 'N/A' on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary — see instrs)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			1,1	10.
	check here - ► X 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, col (b)				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0.
3	Add lines 1 and 2			1,1	<u> 10.</u>
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			1,1	10.
6	Credits/Payments:				
а	2015 estimated tax pmts and 2014 overpayment credited to 2015				Ì
b	Exempt foreign organizations — tax withheld at source 6 b				
C	: Tax paid with application for extension of time to file (Form 8868) 6 c				
d	Backup withholding erroneously withheld				
7	Total credits and payments. Add lines 6a through 6d			1.8	40.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here If Form 2220 is attached				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			7	30.
11	Enter the amount of line 10 to be Credited to 2016 estimated tax				52.
	t VII-A Statements Regarding Activities				<u> </u>
		T	Т,	res	No
1 a	n 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 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 Ь		х
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.				
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 > \$ (2) On foundation managers > \$		l	t	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$				
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				
	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes		3		Х
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	[	4 a		X
b	olf 'Yes,' has it filed a tax return on Form 990-T for this year?		4 b	1	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	[	5		Х
	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			i	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?		6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV		7	$\frac{x}{x}$	
	Enter the states to which the foundation reports or with which it is registered (see instructions)	```⊢	<u>·</u> +	^	
va	<del></del>	-	ı	l	
_	WY - Wyoming	-		ļ	
b	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If 'No,' attach explanation	· · · <u> </u>	8ь	х	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part XIV	-	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names		Ť	$\neg \dagger$	
	and addresses		10		<u> </u>
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X

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b 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

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Part VII-B   Statements Regarding Activiti		4720 May Be Requ	uired (continued)		
<ul><li>5 a During the year did the foundation pay or incur at</li><li>(1) Carry on propaganda, or otherwise attempt to</li></ul>	•	ection 4945(a)\2	· · · · Yes X	No.	
, , , , ,	<del>-</del> •	• • •	[],es [A]		
<ul> <li>(2) Influence the outcome of any specific public on, directly or indirectly, any voter registration</li> <li>(3) Provide a grant to an individual for travel, stu</li> </ul>	ndrive?		Yes X	No No	
(4) Provide a grant to an organization other than	a chantable, etc. organiz	zation described			
in section 4945(d)(4)(A)? (see instructions).  (5) Provide for any purpose other than religious, educational purposes, or for the prevention of					
<b>b</b> If any answer is 'Yes' to 5a(1)-(5), did any of the	transactions fail to qualify	y under the exceptions	· · · · Yes X	No	
described in Regulations section 53.4945 or in a (see instructions)?	current notice regarding	disaster assistance		5b	
Organizations relying on a current notice regardi	ng disaster assistance ch	eck here			
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsib	ility for the grant?		· · · · Yes	No	
If 'Yes,' attach the statement required by Regulat	•	•			
6a Did the foundation, during the year, receive any to on a personal benefit contract?				No	
<b>b</b> Did the foundation, during the year, pay premium	is, directly or indirectly, o	n a personal benefit conf	tract?	• • 6 в	X_
If 'Yes' to 6b, file Form 8870.  7 a At any time during the tax year, was the foundation	on a party to a prohibited	tax shelter transaction?	Yes 🛛	No	İ
b If 'Yes,' did the foundation receive any proceeds	or have any net income a	attnbutable to the transac	ction?	7b	
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	gers, Highly Paid E	mployees	·,
and Contractors					
1 List all officers, directors, trustees, foundation	(b) Title, and average	(c)Compensation	(d)Contributions to	(e) Expense	account
(a) Name and address	hours per week devoted to position	(if not paid, enter -0-)	employee benefit plans and deferred compensation	other all	owances
H. A. TRUE, III					
P.O. BOX 2360	TRUSTEE	•			0
CASPER WY 82602	0.00	0.	0.	<del></del>	0.
DAVID L. TRUE P.O. BOX 2360	TRUSTEE				
CASPER WY 82602	0.00	0.	0.	<u></u>	0.
				}	
				<del> </del>	
2 Compensation of five highest-paid employee					
(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	(e) Expense other all	e account, lowances
NONE			<u> </u>		
				1	
			]		
				1	
	<del> </del>			<del> </del>	<del></del>
				1	
Total number of other employees paid over \$50,000 .		<u> </u>	!	<del> </del>	None
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Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	mployees,
3 Five highest-paid independent contractors for professional services (see instructions). 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>
	<del></del>
Total number of others receiving over \$50,000 for professional services	None_
Partix-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
·	
A	
<b>"</b>	
<del></del>	<del></del>
Partices Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1	
2	
	n
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	
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see instructions.)		<u> </u>
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes		0.00
a Average monthly fair market value of securities		3,794,321.
<b>b</b> Average of monthly cash balances		221,365.
C Fair market value of all other assets (see instructions)		530.
d Total (add lines 1a, b, and c)	· · 1 d	4,016,216.
e Reduction claimed for blockage or other factors reported on lines 1a and 1c		
(attach detailed explanation)		
2 Acquisition indebtedness applicable to line 1 assets		
3 Subtract line 2 from line 1d	3	4,016,216.
4 Cash deemed held for chantable activities Enter 1-1/2% of line 3		
(for greater amount, see instructions)		60,243.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4		3,955,973.
6 Minimum investment return. Enter 5% of line 5		197,799.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operations and contain foreign experient and part of private operations about the part of the part	ing toun	dations
and certain foreign organizations check here ► and do not complete this part.)	<del></del>	
1 Minimum investment return from Part X, line 6	<b>├</b>	197,799.
2a Tax on investment income for 2015 from Part VI, line 5	<u> </u>	
b Income tax for 2015. (This does not include the tax from Part VI.)		
C Add lines 2a and 2b		1,110.
3 Distributable amount before adjustments. Subtract line 2c from line 1 · · · · · · · · · · · · · · · · · ·		196,689.
4 Recoveries of amounts treated as qualifying distributions		
5 Add lines 3 and 4		<u> 196,689.</u>
6 Deduction from distributable amount (see instructions)		
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	196,689.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes: a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	. l 1a	220 006
		229,996.
b Program-related investments — total from Part IX-B		
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	· ·	
3 Amounts set aside for specific charitable projects that satisfy the	1-	
a Suitability test (prior IRS approval required)		
b Cash distribution test (attach the required schedule)		
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	• • 4	229,996.
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	1 110
6 Adjusted qualifying distributions. Subtract line 5 from line 4	-	1,110.
		228,886.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the	e foundati	on

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

		(a) Corpus	(b) Years prior to 2014	(c) 2014	<b>(d)</b> 2015
1	Distributable amount for 2015 from Part XI, line 7 · · · · · · · · · · · · · · · · · ·				196,689.
2	Undistributed income, if any, as of the end of 2015				
ē	Enter amount for 2014 only			211,045.	
t	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2015				
é	From 2010				
	From 2011				
	From 2012	İ			
	1 From 2013				
	From 2014				
	Total of lines 3a through e	0.			
4	Qualifying distributions for 2015 from Part				
	XII, line 4: \$ 229,996.		[	[	
ě	Applied to 2014, but not more than line 2a · · ·			211,045.	
ı	Applied to undistributed income of prior years (Election required – see instructions)				
•	Treated as distributions out of corpus (Election required — see instructions)				
	Applied to 2015 distributable amount				18,951.
•	Remaining amount distributed out of corpus	0.			
5	Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below: a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	0.			
1	Prior years' undistributed income. Subtract		0.		
•	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		J.		
•	Subtract line 6c from line 6b. Taxable amount — see instructions		0.		
	Undistributed income for 2014 Subtract line 4a from				
	line 2a Taxable amount — see instructions			0.	
1	f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2016				177,738.
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)				
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:				· · · · · · · · · · · · · · · · · · ·
	Excess from 2011		!	1	
ı	Excess from 2012 0 .		]		
•	Excess from 2013 0 .				
•	Excess from 2014 0 .		1		
_ •	Excess from 2015 0 .				
A A					Form 000-DE (2015)

	Private Operating Foundating or dete	<del>`-</del>			<del></del>	N/A
is effectiv	e for 2015, enter the date of the rulir	ng			<u></u> •	
_	x to indicate whether the foundation	<del></del>	ing foundation descri		4942(j)(3) or	4942(j)(5)
2 a Enter the	lesser of the adjusted net om Part I or the minimum	Tax year	<u> </u>	Prior 3 years		
investme	nt return from Part X for rilsted	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
<b>b</b> 85% of lir	ne 2a [					
	g distributions from Part XII, each year listed					
for active co	cluded in line 2c not used directly onduct of exempt activities		<u></u>			<u> </u>
for active Subtract	g distributions made directly conduct of exempt activities. Ine 2d from line 2c					
<ol> <li>Complete alternativ</li> </ol>	e 3a, b, or c for the e test relied upon:					
a 'Assets' a	ltemative test — enter			ļ		
• •	e of all assets					
section	e of assets qualifying under on 4942(j)(3)(B)(i)	<del></del>				
minimum in	nt' alternative test — enter 2/3 of vestment return shown in Part X, such year listed					
c 'Support'	alternative test — enter:					
inves divide on se	support other than gross tment income (interest, ends, rents, payments ecunties loans (section a)(5)), or royalties)					
more	ort from general public and 5 or exempt organizations as provided tion 4942(j)(3)(B)(iii)					
(3) Large an e	est amount of support from tempt organization					
	s investment income	_ <u></u>		<u> </u>		
PartXV S	upplementary Information ssets at any time during the	(Complete this e year – see ir	s part only if the nstructions.)	foundation ha	d \$5,000 or more	e in
a List any r close of a	lon Regarding Foundation Manag nanagers of the foundation who hav any tax year (but only if they have co TRUE, III	e contributed more	than 2% of the total n \$5,000). (See secti	contributions receive on 507(d)(2).)	ed by the foundation I	pefore the
	L. TRUE		<del> </del>			
b List any r a partner NONE	nanagers of the foundation who owr ship or other entity) of which the fou	n 10% or more of the ndation has a 10%	ne stock of a corporate or greater interest.	ion (or an equally la	rge portion of the owr	ersnip of
Check he requests	ion Regarding Contribution, Gran re [ ] if the foundation only ma for funds. If the foundation makes gr items 2a, b, c, and d.	kes contributions to	preselected charital	ble organizations an		
a The name	e, address, and telephone number o	r e-mail address of	f the person to whom	applications should	be addressed:	
	TRUE, III & DAVID L. BOX 2360	TRUE				
CASPE		WY 8260	)2 (30	7) 237-9301		
	in which applications should be sub					
IN WRITING	WITH SUFFICIENT INFORMATION INCLUDED TO SUPP	PORT THAT THE APPLICANT	MEETS RESTRICTIONS SET OU	IT IN (d) BELOW, ALSO SEE	ATTACHED SCHEDULE V FOR S	CHOLARSHIP APPLICATION
c Any subn	nission deadlines:	<del></del>			<u>.                                    </u>	
NONE						
_	ctions or limitations on awards, such	n as by geographic	al areas, chantable fi	elds, kinds of institu	tions, or other factors	:
BAA		π	EEA0310 10/13/15			orm <b>990-PF</b> (2015)

\_\_\_\_

Form 990-PF (2015) TRUECOS FOUNDATION

Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

a Pad dumg the year SEE ATTACHED SCHEDULE IV  229,996.  Total.  Total.  Approved for future payment  229,996.	a Padd dunng the year SEE ATTACHED SCHEDULE IV  229,996.		Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Total	Total  Total  Total 229,996.			substantial contributor	recibient		<u></u>
b Approved for future payment	b Approved for future payment	a Paid during ti	ddress (home or business)	foundation manager or substantial contributor	status of recipient	contribution	
b Approved for future payment	b Approved for future payment	Takel					220 006
				<u></u>	<del></del>	1	223,330.
	Total						

Excluded by section 512, 513, or 514

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

Enter gross amounts unless otherwise indicated.

	ss amounts unless otherwise indicated.	Unrelated business income		Excluded by	section 512, 513, or 514	(e)	
1 Pro	GEORGE CONTROL TO VIOLENCE	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions.)	
	gram service revenue:			code			
a				++			
b				<del>                                     </del>			
°	······································			<b>-</b>			
d							
e	·			<del>                                     </del>			
f							
	es and contracts from government agencies						
2 Me	mbership dues and assessments						
3 Inte	rest on savings and temporary cash investments						
1 Div	idends and interest from securities			14	47,319.		
5 Net	t rental income or (loss) from real estate:						
a Del	bt-financed property						
	debt-financed property						
	rental income or (loss) from personal property			+ +			
	ner investment income	<del>-</del>		<del>                                     </del>		<del></del>	
	n or (loss) from sales of assets other than inventory		· · · · · · · · · · · · · · · · · · ·	18	67,692.		
	t income or (loss) from special events			1 10	01,032.		
		<u></u>		<del> </del>			
	oss profit or (loss) from sales of inventory						
	er revenue			++-			
.a							
				<del> </del>			
°.—							
d			·			<u></u>	
e	_						
	- A - A - A - A - A - A - A - A - A - A			1 1	115 011		
Sul	ototal. Add columns (b), (d), and (e)				115,011.		
	ototal. Add columns (b), (d), and (e)					115,011	
	ototal. Add columns (b), (d), and (e)				13	115,011	
e wor	ksheet in line 13 instructions to venfy calculations	.)				115,011	
e wor	ksheet in line 13 instructions to venfy calculations VI-B Relationship of Activities to the	.) Accomp	lishment of Exem	npt Purpo	ses		
e wor	ksheet in line 13 instructions to verify calculations  VI-B Relationship of Activities to the  Explain below how each activity for which income	Accomp	lishment of Exem	npt Purpos	ses	the	
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ee wor	ksheet in line 13 instructions to verify calculations  VI-B Relationship of Activities to the  Explain below how each activity for which income	Accomp	lishment of Exem	npt Purpos	ses	the actions.)	

Unrelated business income

**Preparer** 

**Use Only** 

BAA

Firm's name

Firm's address

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: 1 a (1) Х 1 a (2) Х (2) Other assets . **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization . . . . . . 1 b (1) Х 1 b (2) (2) Purchases of assets from a noncharitable exempt organization . . . Х (3) Rental of facilities, equipment, or other assets . . . . . . 1 b (3) Х 1 b (4) Х (4) Reimbursement arrangements . . . . 1 b (5) Х 1 b (6) Х (6) Performance of services or membership or fundraising solicitations.... C Sharing of facilities, equipment, mailing lists, other assets, or paid employees. . . . . . . 1 c Х d 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 (b) Amount involved (d) Description of transfers, transactions, and sharing arrangements (a) Line no 2 a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations X No described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . . b If 'Yes,' complete the following schedule. (c) Description of relationship (a) Name of organization (b) Type of organization Under penalties of penury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge Sign this return with the preparer shown below Here TRUSTEE Signature of officer or trustee Date Title Yes Pnnt/Type preparer's name Preparer's signature Date PTIN Check self-employed Paid Firm's EIN

Phone no.

Form 990-PF (2015)

#### **Supporting Statement of:**

Form 990-PF,p12/Line 4 Column (d)

Description	Amount
DIVIDENDS & INTEREST	57,118.
LESS:	
AMORITIZATION OF PREMIUM	-9,799.
Total	47,319

SCHEDULE\_I

TRUECOS FOUNDATION
Supporting Schedule and Statement
To Accompany 2015 Form 990-PF
46-6471942

Part XV:

Supplemental Information

Line 2 (d): Restrictions

The purpose of the Foundation is to utilize income and such portions of the principal as the Trustees deem appropriate exclusively for religious, charitable, scientific, literary and educational purposes, as set forth in Section 501(c)(3) of the Internal Revenue Code including, for these purposes, the making of distributions to organizations that qualify as exempt organizations under Section 501(c)(3) of the Code.

#### SCHEDULE II

TRUECOS FOUNDATION
Supporting Schedule and Statement
To Accompany 2015 Form 990-PF
46-6471942

Part II, Line 2 US GOVERNMENT OBLIGATIONS	COST	<u>FMV</u>
Federated Govt Obligations Premier #117	147,163.87	147,163.87
Total Cash Equivalents		
Part II, Line 10a		
US Treasury Note .625% 04/30/18	98,740.71	100,066 00
US Treasury Note .875% 10/15/18	199,570.31	201,070.00
US Treasury Note 1.125% 3/31/20	395,172.85	404,064.00
Fed Farm Credit Bank 1.04% 3/26/18 C 3/26/14	200,000.00	200,004.00
Federal Home Loan Bank .5% 12/30/16 C 6/30/15	200,000.00	200,418.00
Federal Home Loan Bank .74% 7/25/17 C 7/25/13	200,000.00	200,004.00
Federal Home Loan Bank .75% 11/22/17 C 5/22/14	200,000.00	200,442.00
Federal Home Loan Mtg Corp 1.25% 10/02/19	199,790.81	202,376.00
Federal Nation MTG Assn 0% 10/9/19	187,952.77 1,881,227.45	192,122.00 1,900,566.00
Total US Gov't Agencies	1,001,221.45	1,900,966.00
Part II, Line 10b		
EQUITIES  Large Cap Equities		
Dodge & Cox International Stock Fund #1048	85,454.47	78,813.56
Harbor International Fund #011	87,238.84	78,575.89
Primecap Odyssey Stock	55,000.00	58,305 47
Vanguard 500 Index Admiral #540	126,723.94	162,943.20
Harbor Capital Appreciation Fund #12	112,967.37	132,314 32
T Rowe Price Growth Stock Instl	113,281.66	131,934.99
Dodge & Cox Stock Fund #145	137,442.53	153,061.09
T Rowe Price Equity Income I Class	157,147.07	157,403.34
Total Large Cap Equities	875,255.88	953,351.86
Mid Cap Equities		
Artisan Mid Cap Advisor	85,734.68	78,699.82
Eaton Vance Atlanta SMID Cap I	90,697.13	117,573.73
Fidelity Low Priced Stock Fund #316	128,447.92	135,735.94
Vanguard Selected Value Fund	96,300.74	103,691.99
Total Mid Cap Equities	401,180.47	435,701.48
Small Cap Equities		
Fidelity Small Cap Discovery	102,502.79	100,657.71
Hancock Horizon Burkenroad Small Cap Inv #1018	83,113 97	100,657.71
Total Small Cap Equities	185,616.76	201,315.42
TOTAL EQUITIES	1,462,053.11	1,590,368.76
Part II, Line 10c		
Pimco Low Duration Inst! FD #36	97,511.69	92,188.14
SEI Short Duration Gov't #45	72,045.5 <del>4</del>	71,725.92
Total Short Term Bonds	169,557.23	163,914.06
Habor Bond Fund #14	79,193.34	75,404.80
Pimco Total Return Instl #35	80,739.20	74,947.08
Total Intermediate Term Bonds	159,932.54	150,351.88
TOTAL CORPORATE BONDS	329,489.77	314,265.94
GRAND TOTAL	3,819,934.20	3,952,364.57

#### SCHEDULE III

TRUECOS FOUNDATION
Supporting Schedule and Statement
To Accompany 2015 Form 990-PF
#46-6471942

Part IV: Capital Gains and Losses for Tax on Investment Income

Line 1a.	(b) How	(c) Date	(d) Date	(e) Sales	(g) Cost	(h) Gain
(a) Description:	Acquired	Acquired	Sold	Price	Basis	or (Loss)
Long Term Gains and Losses:				<del></del>	<del></del>	<del></del>
AMG Yacktman Fund Service Class	P	03/12/13	01/14/16	65,438.23	69,026.56	-3,588.33
AMG Yacktman Fund Service Class	Р	05/22/13	01/14/16	53,256.65	60,000.00	-6,743.35
AMG Yacktman Fund Service Class	Р	12/26/13	01/14/16	29,988.38	33,543.34	-3,554.96
Fed Home Loan Bank .7% 12/27/16 C 09/27/13	Р	03/15/13	07/01/15	140,000.00	140,000.00	0.00
Fed Home Loan Bank .7% 12/27/16 C 9/27/13	P	03/15/13	09/28/15	60,000.00	60,000.00	0.00
Fed Natl Mtg Addn Step-Up .625% 04/30/18	P	05/01/13	10/30/15	200,000.00	200,000.00	0.00
SEI Intermediate Dur Govt PO RT #46	P	03/12/13	10/30/15	68,703.70	70,000.00	-1,296.30
SEI Intermediate Dur Govt PO RT #46	Р	04/01/13	10/30/15	3,948.72	3,943.96	4.76
				621,335.68	636,513.86	-15,178.18
Long Term Capital Gain Dividends:				82,870.06		82,870.06
Net Capital Gains and Losses		(Part IV, L	ine 2)	704,205.74	636,513.86	67,691.88

Supporting Schedule and Statement To Accompany 2015 Form 990-PF

#46-6471942

TRUECOS FOUNDATION

<u>DONEE</u> BISMARCK STATE COLLEGE	<u>Address</u> Bismarck, nd	RELATIONSHIP NONE	STATUS OF DONEE PUBLIC CHARITY	<u>PURPOSE</u> ENGAGE IN THIS ACTIVITIES THAT SUPPORT AND ASSIST IN THE DEVELOPMENT AND ADVANCEMENT OF BISMARCK STATE COLLEGE	AMOUNT 750
CASPER COLLEGE	CASPER, WY	NONE	PUBLIC CHARITY	TO PROVIDE OPPROTUNITIES TO IMPROVE QUALITY OF LIFE AND SUSTAINABLE COMMUNITY BUILDING AND CITIZENSHIP	2,250
CASPER MOUNTAIN BIATHLON CLUB	CASPER, WY	NONE	PUBLIC CHARITY	TO PROVIDE OPPROTUNITY AND TRAINING FOR YOUTH AND ADULTS OF ALL ABILITIES TO ACHIEVE EXCELLENCE THROUGH THE SPORT OF BIATHOLON	30,000
CENTRAL WYOMING COLLEGE	RIVERTON, WY	NONE	PUBLIC CHARITY	TO ENHANCE THE QUALITY OF LIFE THROUGH INNOVATION AND EXCELLENCE IN EDUCATION	750
CHILDREN'S HOPSITAL COLORADO FOUNDATION	DENVER, CO	NONE	PUBLIC CHARITY	FOR CHILDREN'S HOSPITAL COLORADO IN SUPPORT OF ITS MISSION	1,000
CONVERSE COUNTY HOSPITAL FOUNDATION DOUGLAS, WY	DOUGLAS, WY	NONE	PUBLIC CHARITY	TO ENHANCE THE SERVICES, PROGRAMS AND PATIENT CARE PROVIDED TO THE COMMUNITY BY CONVERSE COUNTY HOSPITALS AND HEALTHCARE SYSTEMS THROUGH INCREASED PHILANTHROPIC SUPPORT	5,000
EASTERN WYOMING COLLEGE	TORRINGTON, WY	NONE	PUBLIC CHARITY	STUDENT-CENTERED, COMPREHENSIVE COMMUNITY COLLEGE THAT RESPONDS TO THE EDUCATIONAL, CULTURAL, SOCIAL AND ECONOMIC NEEDS OF ITS COMMUNITIES WITH QUALITY, AFFORDABLE EDUCATIONAL OPPORTUNITIES FOR DYNAMIC LIFELONG LEARNING	750
GLENDIVE MEDICAL CENTER FOUNDATION	GLENDIVE, MT	NO NO NO	PUBLIC CHARITY	TO FUND NEW TECHNOLOGY AND CAPITAL IMPROVEMENTS AT THE HOSPITAL, BUILD THE ENDOWNMENT TO ENSURE WE WILL ALWAYS HAVE HEALTH CARE CLOSE TO HOME, TO HELP SUSTAIN OUR HOSPICE PROGRAM FOR PATIENTS IN THIS AREA, TO ASSIST THE ELDERLY AND UNDERSERVED WHO ARE UNABLE TO PAY FOR THEIR MEDICAL CARE AND TO IMPROVE HEALTH SERVICES AND ADD PROGRAMS TO MAKE OUR COMMUNUITY HEALTHIER	9,000

AMOUNT 1,875 75,000

DEDICATED TO INDIVIDUAL LIBERTY, THE RIGHT TO

PUBLIC CHARITY

TO TRANSFORM STUDENTS' LIVES THROUGH THE

PURPOSE

STATUS OF DONEE PUBLIC CHARITY

POWER OF INSPIRED LEARNING

5,800

TO PROVIDE SCHOLARSHIPS TO STUDENTS STUDYING

PUBLIC CHARITY

GOVERNMENT & FREE ENTERPRISE SYSTEM

OWN & USE PROPERTY, LIMITED & ETHICAL

AGRICULTURE, RURAL MEDICINE AND VETERNARY

SCIENCE

750

TO CREATE OPPORTUNITIES TO ADVANCE EDUCATION,

PUBLIC CHARITY

RESEARCH AND SERVICE AT THE UNIVERSITY

2,000

TO HELP CHRILDREN REACH THEIR POTENTIAL AND

PUBLIC CHARITY

LEAD MORE FULFILLING LIVES, REGARDLESS OF A

FAMILY'S ABILITY TO PAY

92,446

**DENTS HAVE ACCESS TO** 

750

**GROWTH AND DEVELOPMENT** 

 TRUECOS FOUNDATION Supporting Schedule and Statement To Accompany 2015 Form 990-PF #46-6471942		
 <u>DONEE</u> LARAMIE COUNTY COMMUNITY COLLEGE	<u>Address</u> Cheyenne, wy	<u>RELATIONSHIP</u> NONE
 MOUNTAIN STATES LEGAL FOUNDATION	DENVER, CO	NONE
 NATIONAL WESTERN SCHOLARSHIP TRUST	DENVER, CO	NONE
 NORTH DAKOTA STATE UNIVERSITY	FARGO, ND	NONE
 SHRINES HOSPITAL FOR CHILDREN	TAMPA, FL	NONE
 UNITED WAY OF NATRONA COUNTY	CASPER, WY	NONE

UNITED WAY OF NATRONA COUNTY	CASPER, WY	NON	PUBLIC CHARITY	TO ENSURE LOCAL RESIDENTS HAVE ACCESS TO HUMAN SERVICES PROGRAMS WHICH HELP PREPARE THEM FOR SUCCESS IN LIFE, KEEP THEM SAFE AND HEALTH, AND WORK TO IMPROVE THEIR OVERALL QUALITY OF LIFE
UNIVERSITY OF NORTH DAKOTA	GRAND FORKS, ND	NO ON	PUBLIC CHARITY	THE UND ALUMNI ASSOCIATION & FOUNDATION SUPPORTS UNIVERSITY OF NORTH DAKOTA STUDENTS, FACULTY, ALUMNI AND THE GREATER COMMUNITY BY PROVIDING RESOURCES FOR

1,125						
TO BE ONE OF THE NATION'S FINEST PUBLIC LAND-	GRANT RESEARCH UNIVERSITIES AND TO SERVE AS A	STATEWIDE RESOURCE FOR ACCESSIBLE AND	AFFORDABLE HIGHER EDUCATION OF THE HIGHEST	QUALITY; RIGOROUS SCHOLARSHIP; TECHNOLOGY	TRANSFER; ECONOMIC AND COMMUNITY	DEVELOPMENT; AND RESPONSIBLE STEWARDSHIP OF
PUBLIC CHARITY						
NONE						
LARAMIE, WY						

**UNIVERSITY OF WYOMING** 

TO FOSTER THE MOST SUCCESSFUL, WELL-ADJUSTED	GENERATION OF WOUNDED SERVICE MEMBERS IN	OUR NATION'S HISTORY
TO FOSTE	GENERATI	OUR NATIC

OUR CULTURAL, HISTORICAL AND NATURAL

RESOURCES

PUBLIC CHARITY

NONE

JACKSONVILLE, FL

WOUNDED WARRIOR PROJECT

TO FINANCIALLY SUPPORT 4-H PROGRAMS AND EDUCATION IN WYOMING

PUBLIC CHARITY

NONE

LARAMIE, WY

WYOMING STATE 4-H FOUNDATION

3,000

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1,750

EIN: 46-6471942

2015 Form 990 PF Attachment Page 10, Part XV, Question 10b

Schedule V

## TRUE COMPANIES

### SCHOLARSHIP PLAN APPLICATION

recent photograph

Name		
(Last)	(First)	(Middle)
Present Address (Street or Box		
		(City/State/Zip)
Sex: M Date of Birth	<del></del>	
Marital Status: Single □ Married □	• • •	u expect to marry soon?
If married, is spouse employed		Number of Dependents
These dependents are:	(Father, mo	other, children, etc.)
HIGH SCHOOL INFORMATION	Graduation l	Date
Name of School	Mailing Add	lress
Principal's Name	Type of Cou	urse
COLLEGES ATTENDED		
College	Mailing Address	Date of School Year
President	Degree Desired	Major Course
College	Mailing Address	Date of School Year
President	Degree Desired	Major Course
COLLEGE OR COLLEGES YOU PLAN	TO ATTEND	•
Name of College	City and State	
Degree Desired	Major Course	***
Name of College		
Degree Desired		

2015 Form 990 PF Attachment Page 10, Part XV, Question 10b YOUR WORK ACTIVITIES FOR THE PAST THREE YEARS (either for your family, Schedule V ORGANIZED SCHOOL ACTIVITIES (such as athletics, music, dramatics in which you have participated, the position you have held, and which school year you took part): ORGANIZED OUT-OF-SCHOOL ACTIVITIES (such as Boy or Girl Scouts, 4-H Club, positions you have held, during which school year you took part, and any recognition received): Do you feel that your grades are an accurate index to your ability? \_\_\_\_\_\_ If not, please explain:\_\_\_\_\_ Which school subject is of the greatest interest to you? Have you overcome any physical handicaps? If so, please explain: INDICATE ON WHOSE EMPLOYMENT YOU BASE YOUR APPLICATION FOR SCHOLARSHIP: Full name of that parent: Position with company: GIVE FULL NAME, ADDRESS, AND OCCUPATION OF OTHER PARENT:

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Please attach a transcript of your high school and of your college grade record (if applicable Page 10, Part XV, Question 10b ing in your own handwriting: A. What are your major goals and objectives in life? B. Why Schedule V lege or university? C. Tell us what you think will be your major field of study and why.

YOUR APPLICATION CA	NNOT B	E PROPERLY EVALU	JATED WITHOUT A	ALL THE PRE	VIOUS INFORMATION.
Applicant's Signatu	re:				
The following is submitted as su Scholarship Plan.	pplemen	SUPPLEMENTA (TO BE COMPLE tal data so that consider	ETED BY PAREN	ľT)	al need as described in the
The persons dependent on your s	support a	re:			
Name		Relationship	Age		Percentage of Support
	<u> </u>		<u> </u>		
	<b> </b>		<u> </u>		
	<u>!</u>				
Do you have other children in co	llege? _	e 1985.		<del></del>	· · · · · · · · · · · · · · · · · · ·
What college and year of school?	·		,		
William corresponding Jam or selection			<del></del>		
		<del>-</del>		. <u> </u>	
	FSTI	MATED COST FOR E	INI ICATION FACE	IVEAR	·
		First Choic		1	cond Choice College
Tuition and Fees					
Books			<del></del> -		
Room & Board					
Transportation	-	,	<u> </u>		
Clothing					
Miscellaneous					
Total					

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Schedule V

HOW W	ILL YOUR CHILD'S EDUCATION BE FINANCE	ED?	
•		Percentage	I
	Parent's Normal Income	%_	
	Parent's Savings	<u>%</u>	1
	Student's Part-time Earnings		
	Student's Summer Earnings		- 1
	Funds Borrowed		
	Student Loan Funds	<u>%</u>	
	G.I. Bill	<u>%</u>	ł
	Other Scholarships		ł
	Other (Explain:	) <u>%</u>	ŀ
	Total		- 1
If yes, pleas	iving a scholarship change your child's choice of cose explain:  hild be able to attend college without a scholarship ain:	? Yes No	
	factors do you feel are relevant in the committee's		
<u></u>			
Parent's Sig	nature:	Date:	