For calendar year 2017, or tax year beginning 12-01-2017

DLN: 93491287005069

OMB No 1545-0052

2017

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

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

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

, and ending 11-30-2018

Open to Public Inspection

Name of foundation LARRY AND MARTHA DAY CHARITABLE TRU	A Employer identification number
DIRECTION PRINTER DAT CHARLEDGE TIME	20-7197623
Number and street (or P O box number if mail is not delivered to street address) Room/suite PO BOX 1683	B Telephone number (see instructions)
City or town, state or province, country, and ZIP or foreign postal code DUBOIS, WY 82513	C If exemption application is pending, check here
G Check all that apply ☐ Initial return ☐ Initial return of a former public chari ☐ Final return ☐ Amended return	ty D 1. Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check here and attach committation
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Form 990-	·PF (2017)				Page 2
Part II	Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year (a) Book Value	End of (b) Book Value	year (c) Fair Market Value
1	Cash—non-interes	t-bearing		1	
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- 100 F ' T D T 17	Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)	
1a Exempt operating foundations described in section 4940(d)(2), check here ▶ □ and enter "N/A" on line 1	
Date of ruling or determination letter(attach copy of letter if necessary-see instructions)	
b Domestic foundations that meet the section 4940(e) requirements in Part V, check	2,143
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 J. line 12.	
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Form	990-PF (20	17)		Р	age 5
Pai	rt VII-A	Statements Regarding Activities (continued)			
11	At any time	e during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of	f section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		No
12	Did the fou	indation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory pi	rivileges? If "Yes," attach statement (see instructions)	12		No
13	Did the fou	indation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	
	Website ad	ldress ►N/A			
14	The books	are in care of ▶LARRY DAY Telephone no ▶(408) 31	15-826	4_	
	Located at	PO BOX 1683 DUBOIS WY ZIP+4 ▶8251	3		
15		47(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here		•	
16	At any time	e during calendar year 2017, did the foundation have an interest in or a signature or other authority over		Yes	No
	a bank, sec	curities, or other financial account in a foreign country?	16		No
		tions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts "Yes", enter the name of the foreign country			
Par	rt VII-R	Statements Regarding Activities for Which Form 4720 May Be Required			

Forn	990-PF (2017)		Page 6
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Requ	ired (Continued)	
5a	During the year did the foundation pay or incur any amount to (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955), or to carry (2) Areactly objectly any water registration drive?	☐ Yes ☑ No	
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Part VIII	Information About Officers, and Contractors	, Directors, Trustees	, Foundation Managers,	Highly Paid Employees,
Part VIII	and Contractors	, ,	,	,

1 List all officers, directors, trustee	es, foundation managers a	nd their compensation	(see instructions).	
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
LARRY L DAY	TRUSTEE 000 00	0	(0
PO BOX 1683 DUBOIS, WY 82513	000 00			
MARTHA L DAY	TRUSTEE	0		
PO BOX 1683	000 00			
DUBOIS, WY 82513				I WALCALE II
2 Compensation of five highest-pai	d employees (other than t	nose included on line 1		ne, enter "NONE."
(a) Name and address of each employee pa more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred (d) compensation	Expense account, (e) other allowances
NONE				
Total number of other employees paid ev				
Total number of other employees paid over 3 Five highest-paid independent co				
(a) Name and address of each person	<u> </u>		e of service	(c) Compensation
NONE	Para more than \$55,000	(5) 1/P	c or service	(c) compensation
		1		
		1		
Total number of others receiving over \$50				
Part IX-A Summary of Direct C	Charitable Activities			
water a first the factor of the same and the same also what the	and the second second second second second	nda valaniant statistical manner	-	
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Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes A Average monthly fair market value of securities	Form 990-PF (2017)		Page 8
purposes a Average monthly fair market value of securities. b Average of monthly cash balances. c Fair market value of all other assets (see instructions). 1 to 1,500,000 d Total (add lines 1a, b, and c). Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). Accounting in properties applicable to line 1 assets. 2	Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundation	ns,see insti	ructions)
a Average monthly fair market value of securities. b Average of monthly cash balances. c Fair market value of all other assets (see instructions). d Total (add lines 1a, b, and c). e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). Acquisition indeptedness applicable to line 1 assets. 1a 4,685,503 1b 2,005,126 1c 1,500,000 1d 8,190,629	1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc ,		
b Average of monthly cash balances. c Fair market value of all other assets (see instructions). d Total (add lines 1a, b, and c). e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). Acquisition indebtedness applicable to line 1 assets.	·		
c Fair market value of all other assets (see instructions). d Total (add lines 1a, b, and c). e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). Acquisition indebtedness applicable to line 1 assets. 2	a Average monthly fair market value of securities	1a	
d Total (add lines 1a, b, and c). Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). Acquisition indeptedness applicable to line 1 assets.		1b	2,005,126
e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	· · · · · · · · · · · · · · · · · · ·		
1c (attach detailed explanation). 1e 2	·	1d	8,190,629
Acquisition indebtedness applicable to line 1 assets.			
		-	
	Acquisition indebtedness applicable to line 1 assets.		
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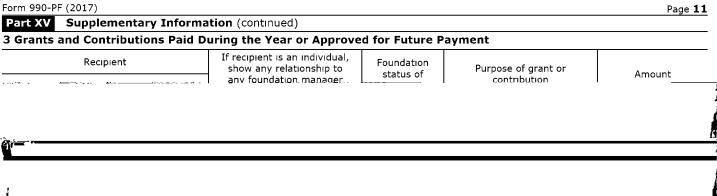
	(a) Corpus	Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				401,246
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only			363,313	
b Total for prior years 2015 , 20 , 20		157,536		
3 Excess distributions carryover, if any, to 2017				
a From 2012				
b From 2013				
c From 2014				
d From 2015				
e From 2016				
f Total of lines 3a through e				
4 Qualifying distributions for 2017 from Part				
XII, line 4 🕨 \$				
a Applied to 2016, but not more than line 2a			218,000	
b Applied to undistributed income of prior years (Election required—see instructions)				
c Treated as distributions out of corpus (Election required—see instructions)				
d Applied to 2017 distributable amount				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2017				
(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				
b Prior years' undistributed income Subtract line 4b from line 2b		157,536		
c Enter the amount of prior years' undistributed				

157,536

income for which a notice of deficiency has been issued, or on which the section 4942(a)

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factors



ter gross amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	n 512, 513, or 514	(e) Related or exemp
. Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions
a					
b					
c					
d e					
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					20.03
investments					28,83
Net rental income or (loss) from real estate					307.1
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal property					
Other investment income					29
Gain or (loss) from sales of assets other than inventory					3,56
Net income or (loss) from special events					5,50
Gross profit or (loss) from sales of inventory					
Other revenue a See Additional Data Table					
b					
с					
d					
0					
e Subtotal Add columns (b), (d), and (e).					212.87
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)			1	3	
Subtotal Add columns (b), (d), and (e). Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculart XVI-B Relationship of Activities to the	lations) ie Accomplisi	hment of Exem	pt Purposes	3	212,87
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the	lations) IE Accomplisi Income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ited importantly to	212,87
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the Relationship of Activity for which the accomplishment of the foundation's expression of the second sec	lations) IE Accomplisi Income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ited importantly to	212,87
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the Relationship of Activity for which the accomplishment of the foundation's expenses.	lations) IE Accomplisi Income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ited importantly to	212,87
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculated and the second	lations) IE Accomplisi Income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ited importantly to	212,87
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculated and the second	lations) IE Accomplisi Income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ited importantly to	212,87
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate to the second se	lations) IE Accomplisi Income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ited importantly to	212,87
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the Relationship of Activity for which the accomplishment of the foundation's expenses.	lations) IE Accomplisi Income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ited importantly to	212,87
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the Relationship of Activity for which the accomplishment of the foundation's expression of the second sec	lations) IE Accomplisi Income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ited importantly to	212,87
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Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the Relationship of Activity for which the accomplishment of the foundation's expression.	lations) IE Accomplisi Income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ited importantly to	212,87
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the Relationship of Activity for which the accomplishment of the foundation's expression of the second sec	lations) IE Accomplisi Income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ited importantly to	212,87
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Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the Relationship of Activity for which the accomplishment of the foundation's expression of the second section of the section of the second section of the section of the second section of the section of the second section of the section of th	lations) IE Accomplisi Income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ited importantly to	212,87
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculant XVI-B Relationship of Activities to the Relationship of Activity for which the accomplishment of the foundation's expression of the second section of the section of the second section of the section of the second section of the section of the second section of the section of th	lations) IE Accomplisi Income is report	hment of Exem	pt Purposes f Part XVI-A contribu	ited importantly to	212,87

Fo	orm 990-PF (2017)		Pa	ge 13
	Part XVII Information Regarding Transfers To and Transactions and Relationships With Nonchari Exempt Organizations	table		
1	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?		Yes	No
a	a Transfers from the reporting foundation to a noncharitable exempt organization of			
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Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

CENTER FOR ARIZONA POLICY 771 E NORTHERN AVE PHOENIX, AZ 85020		OPERATIONS	17,000
SALVATION ARMY 615 SLATERS LN PO BOX 269		OPERATIONS	3,000

615 SLATERS LN PO BOX 269 ALEXANDRIA, VA 22313	OPERATIONS	3,000
SCOTTSDALE CHRISTIAN ACADEMY 14400 N TATUM BLVD BHOENIX AZ 85032	OPERATIONS	5,000

CCOTTCDALE CUDICTIAN ACADEMY		ODEDATIONS	F 000
SCOTTSDALE CHRISTIAN ACADEMY 14400 N TATUM BLVD PHOENIX, AZ 85032		OPERATIONS	5,000
Total			218 000

Total	 	 218.000
14400 N TATUM BLVD PHOENIX, AZ 85032		·

3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year ST JUDE CHILDRENS RESEARCH **OPERATIONS** 10,000 HOSPITAL 262 DANNY THOMAS PLACE

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

MEMPHIS, TN 38105			
ST MARY'S FOOD BANK 2831 N 31ST AVE PHOENIX, AZ 85009		OPERATIONS	2,000

PHOENIX, AZ 85009			
ARIZONA CHRISTIAN UNIVERSITY 2625 E CACTUS ROAD PHOENIX. AZ 85032		OPERATIONS	5,000

2625 E CACTUS ROAD PHOENIX, AZ 85032		3,0
Total	 	 218.000

3a

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year TEEN CHALLENGE1515 GRAND AVE 5,000 OPERATIONS PHOENIX. AZ 85007

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

WOUNDED WARRIOR PROJECT 4150 N DRINKWATER BLVD SCOTTSDALE, AZ 85251	OPERATIONS	2,000
SOJOURNER CENTERPO BOX 20156	OPERATIONS	10,000

Total . 3a 218,000

Recipient		If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
	ـ.∡	a <u>nv fo</u> undation manager	lrecipient		l
-					

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
THE USOPO BOX 96860 WASHINGTON, DC 20077			OPERATIONS	2,000	
MOODY BIBLE INSTITUTE 820 N LASALLE DR CHICAGO, IL 60610			OPERATIONS	5,000	
MAKE A WISH ARIZONA 2901 NORTH 78TH STREET SCOTTSDALE, AZ 85251			OPERATIONS	12,000	
Total				218,000	

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

OPERATIONS

30,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

DAVID FOSTER FOUNDATION

212 HENRY STREET VICTORIA CA			
GATEWAY FOR CANCER RESEARCH		OPERATIONS	5

GATEWAY FOR CANCER RESEARCH 500 REMINGTON RD SCHAUMBURG, IL 60173		OPERATIONS	5,000
DUBOIS RURAL FIRE DEPT8 3RD ST		OPERATIONS	4,000

Tatal			218.000
DUBOIS RURAL FIRE DEPT8 3RD ST DUBOIS, WY 82513		OPERATIONS	4,000
SCHAONBOKG, IL 00175			

DUBOIS RURAL FIRE DEPT8 3RD ST DUBOIS, WY 82513	OPERATIONS	4,00
Total	 	218,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager

or cubetantial contributor

Name and address (home or business)

3а

recipient

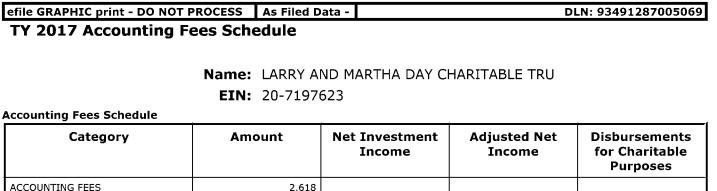
	or substantial contributor		
a Paid during the year			
FREEMONT COUNTY SEARCH & RESCUE		OPERATIONS	7,000

CANON CITY, CO 81212

Total. 218,000

Enter gross amounts unless otherwise indicated Unrelated business income Excluded by section 512, 513, or 514 (e) Related or exempt (d) (a) (b) (c) function income Business Amount Exclusion code Amount (See the 11 Other revenue code instructions) a BLACKSTONE GROUP LP-RENT IN 1,514 8,086 **b** BLACKSTONE GROUP LP-SEC 123 F BLACKSTONE GROUP LP-OTHER T 46,341

Form 990PF Part XVI-A Line 11 - Other revenue:



Note: To capture the full content of this document, please select landscape mode (11" \times 8.5") when printing.
TY 2017 Depreciation Schedule

DLN: 93491287005069

Name: LARRY AND MARTHA DAY CHARITABLE TRU

ETN: 20 7107622

EIN: 20-7197023									
Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
HOUSE	2008-12-31	270,000	87,955	S/L	27 5000	9,818			
COMPUTER	2010-06-01	3,175	3,175	200DB	5 0000				
POOL	2011-01-21	48,158	17,385	S/L	15 0000	2,052			

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TY 2017 Investments Corporate Bonds Schedule						
Name:	LARRY AND MART	HA DAY CHARITABLE TRU				
EIN:	20-7197623					
Investments Corporate Bonds Schedule	1					

Investments Corporate Bonds Schedule				
Name of Bond	End of Year Book Value	End of Year Fair Market Value		
INVESTMENTS - CORP BONDS	127			

Name: LARRY AND MARTHA DAY CHARITABLE TRU

EIN: 20-7197623	I
Name of Stock	End of Year Book Value

INVESTMENTS - CORP STOCK

INVESTMENT - NEODYNE

3,200,840

1,735,823

End of Year Fair **Market Value**

4,633,990

1,500,000

DLN: 93491287005069

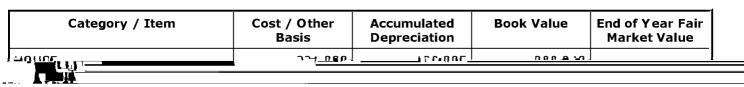
efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491287005069
TY 2017 Investments - Other S	Schedule	
Name:	LARRY AND MARTHA DAY CHA	ARITABLE TRU
EIN:	20-7197623	
Investments Other Schedule 2		,
Cątegorv/ Item	Listed at Cost or	Book Value

TY 2017 Land, Etc.
Schedule

Name: LARRY AND MARTHA DAY CHARITABLE TRU

DLN: 93491287005069

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EIN: 20-7197623

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	l: 93491287005069		
TY 2017 Other Expenses Schedule						
Name:	LARRY AND MA	RTHA DAY CHARI	TABLE TRU			
EIN:	EIN: 20-7197623					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
EXPENSES						
FACILITIES EXPENSE	1,480					
UTILITIES	4,113					
LANDSCAPING	2,165					

TY 2017 Other Income Schedule

Name: LARRY AND MARTHA DAY CHARITABLE TRU

EIN: 20-7197623

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
BLACKSTONE ROYALTIES	291	291	291
BLACKSTONE GROUP LP-RENT INC	1,514	1,514	1,514
BLACKSTONE GROUP LP-SEC 1231	8,086	8,086	8,086
ALINE OF ENDOUGHE OF THE PARTY TAKE	4 5-0-1 1	+ 11.00.11	4 0,00 4 1

efile GRAPHIC print - DO NOT PROCE	SS As Filed Data	-	DL	N: 93491287005069			
TY 2017 Taxes Schedule							
Name: LARRY AND MARTHA DAY CHARITABLE TRU							
EIN: 20-7197623							
Category	Amount	Net Investment	Adjusted Net	Disbursements			
Category	Amount	Income	Income	for Charitable Purposes			
TAXES - FOREIGN	65						

efile GRAPHIC print -	DO NOT PROCESS As Filed Data -		DLN: 93491287005069			
Schedule B (Form 990, 990-EZ,	Schedule of Contributors		OMB No 1545-0047			
or 990-PF) Department of the Treasury Internal Revenue Service	► Attach to Form 990, 990-EZ, or 990-PF ► Information about Schedule B (Form 990, 990-EZ, or 990-PF) at <u>www irs gov/form990</u> .	▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at				
Name of the organizat LARRY AND MARTHA DA		Employer id	lentification number			
Organization type (ch	eck one)	20-7197623				
Filers of:	Section:					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a p	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization					
Form 990-PF	✓ 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a priva	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	☐ 501(c)(3) taxable private foundation	501(c)(3) taxable private foundation				
money or othe contributions Special Rules	exation filing Form 990, 990-EZ, or 990-PF that received, during the year property) from any one contributor. Complete Parts I and II. See in a section described in section 501(c)(3) filing Form 990 or 990-EZ that m	nstructions for determining a	a contributor's total			
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			772)			

ame of organization ARRY AND MARTHA DAY CHARITABLE TRU		Employer identification 20-7197623	Employer identification number 20-7197623		
Part I	Contributors (See instructions) Use duplicate copies of Part I if a	dditional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	LARRY L MARTHA L DAY 114 UPHILL ROAD	\$ 251,569	Person Payroll Noncash		
	DUBOIS, WY82513		(Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
-			Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) N o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
			Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) N o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
-		\$	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a)	(b)	(c)	(d)		
	.l				
1	7				

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)