# SCANNED-NOV 0 2 2021

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

2019

OMB No 1545-0047

Department of the Treasury

► Do not enter social security numbers on this form as it may be made public Go to www.irs.gov/Form990PF for instructions and the latest information

Open to Public Inspection

For cal	endar year 2019 or tax year beginning	1.	<sup>'</sup> 01 , 2019,	and ending	3/3:	1 , 2020	Open to Fubile Inspection
<u>ror cai</u>	endar year 2019 or tax year beginning	4/	01 , 2019,	and ending	1A	Employer identification	number
THE .	WILLARD CHARITABLE FOUND	ATION.	INC			82-0470336	
	RANDY KERN, TRUSTEE	,			В	Telephone number (see	
PO B	OX 1747				<u></u>	208-523-47	41
IDAH	O FALLS, ID 83403				С	If exemption application	on is pending, check here
				<del></del>	ļ۲	п ехетрион аррисанс	on is pending, check here
G Ch	eck all that apply Initial return	— —	nitial return of a form	ner public charity	D	1 Foreign organizations,	check here ►
	Final return	—	Amended return		]	o F	
	Address change		lame change		1	here and attach compu	meeting the 85% test, check
H Ch	eck type of organization $X$ Section	on 501(c)	(3) exempt private for		Į.	nord and attack dempe	
	Section 4947(a)(1) nonexempt charita				E	If private foundation s	
		I Accour	nting method X C	ash   Accrual	ĺ	under section 507(b)(1	)(A), check here
	m Part II, column (c), line 16)		er (specify)		F		a 60-month termination
<b>►</b> \$	2/002/2001	Part I, co	lumn (d), must be or	n cash basis )	1	under section 507(b)(1	)(B), check here
Part		1	(a) Revenue and	(b) Net investme	nt	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts a columns (b), (c), and (d) may not		xpenses per books	income	110	income	for charitable purposes
	necessarily equal the amounts in						(cash basis only)
	column (a) (see instructions) )						,,,
	1 Contributions, gifts, grants, etc., received (attach sched		43,944.				
3	2 Check I if the foundation is not required to attach Si	ich B	· · · · · · · · · · · · · · · · · · ·				
f	3 Interest on savings and temporary cash investments					ท	/A
4	4 Dividends and interest from securities					<del></del>	·
	5 a Gross rents			-			
	<b>b</b> Net rental income or (loss)						
	6 a Net gain or (loss) from sale of assets not on line 10						11,
Revenue	b Gross sales price for all assets on line 6a						<u> </u>
ਙ	7 Capital gain net income (from Part IV, line	2)				·	1
₹	8 Net short-term capital gain	<u> </u>					
œ	9 Income modifications 10 a Gross sales less	<b>⊢</b>				· · · · · · · · · · · · · · · · · · ·	
	returns and allowances		•			•	1
	b Less Cost of		<del></del>				
	goods sold C Gross profit or (loss) (attach schedule).			<del></del>			
	11 Other income (attach schedule)	$\vdash$	<del></del>	·		<del></del>	1
		1					1 1
	12 Total Add lines 1 through 11	-	43,944.		0.		1
	13 Compensation of officers, directors, trustee	es, etc	0.				
penses	14 Other employee salaries and wages						
ξ	15 Pension plans, employee benefits	, <u> </u>					
8	16 a Legal fees (attach schedule) See S		175.				175.
Ä	<b>b</b> Accounting fees (attach sch) See S	<sup>2</sup> 4	1,090.				1,090.
ē	C Other professional fees (attach sch).					RECEIVED	)
÷	17 Interest	L			6		<u> </u>
Ę	18 Taxes (attach schedule)(see instrs)	<u> </u>				NOV 2 3 2020	
Ę	19 Depreciation (attach schedule) and depletion	ĺ				NO . 20 LOLO	loi l
Ē	20 Occupancy	-				0000	<u> </u>
5	21 Travel, conferences, and meetings					OGDEN, U	T
7	22 Printing and publications						
Ĕ	23 Other expenses (attach schedule)						
<u> </u>		⊢		· · · · · · · · · · · · · · · · · · ·			
Ę,	24 Total operating and administrative expenses Add lines 13 through 23		1,265.			li .	1 265
Ž	25 Contributions, gifts, grants paid Part	xv $\vdash$	42,854.	<del></del>			1,265. 42,854.
Operating and Administrative Ex	26 Total expenses and disbursements	<del> </del>	74,034.				12,031.
0	Add lines 24 and 25		44,119.		0.		44,119.
	27 Subtract line 26 from line 12.		•				1
	a Excess of revenue over expenses and disbursements		17E				
	b Net investment income (if negative, enter-	<u>,,</u> ⊢	-175.		0.		
		·	· · · · · · · · · · · · · · · · · · ·		٠.		
	C Adjusted net income (if negative, enter 0)	,					

Par	• 11	Balance Sheets Attached schedules and amounts in the description column should be for end of year amounts only	tion Beginning of year	End o	f year
Li ai	<u> </u>	(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	2	Savings and temporary cash investments	326.	151.	151.
	3	Accounts receivable			
		Less allowance for doubtful accounts			
	4	Pledges receivable			
	ł	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)			
		Less allowance for doubtful accounts			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
Assets	10 a	<ul> <li>Investments — U S and state government obligations (attach schedule)</li> </ul>			
Ş	ł	b Investments — corporate stock (attach schedule)			
	(	c Investments — corporate bonds (attach schedule)		<del></del>	
	11	Investments — land, buildings, and equipment basis ►			
		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)			
		Other assets (describe ► See Statement 3	1,230,867.	1,280,984.	1,280,984.
	16	Total assets (to be completed by all filers – see the instructions Also, see page 1, item I)	1,231,193.	1,281,135.	1,281,135.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
<u>.8</u>	19	Deferred revenue			<u>_</u>
Ę	20	Loans from officers, directors, trustees, & other disqualified persons.			
Liabilities	21	Mortgages and other notes payable (attach schedule)	\ <u></u>		
	22	Other liabilities (describe	'		<u> </u>
	23	Total liabilities (add lines 17 through 22)	0.	0.	
<b>200</b>		Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30.	•Ц		
Jalar	24	Net assets without donor restrictions			
P	25	Net assets with donor restrictions			Į
Net Assets or Fund Balance		Foundations that do not follow FASB ASC 958, check her and complete lines 26 through 30.	re X		
SOF	26	Capital stock, trust principal, or current funds	565,081.	565,081.	
ğ	27	Paid-in or capital surplus, or land, bldg , and equipment fund	666,112.	716,054.	
Ş	28	Retained earnings, accumulated income, endowment, or other funds			
ਲ	29	Total net assets or fund balances (see instructions)	1,231,193.	1,281,135.	
	30	Total liabilities and net assets/fund balances (see instructions)	1,231,193.	1,281,135.	
Par	t II <u>I</u>	Analysis of Changes in Net Assets or Fund B	alances		
1	Total	I net assets or fund balances at beginning of year - Part II	, column (a), line 29 (must agre	ee with	
	end-	of-year figure reported on prior year's return)		1	1,231,193.
		r amount from Part I, line 27a		2	-175.
3		increases not included in line 2 (itemize) See Statement	4	3	50,117.
4		lines 1, 2, and 3		4	1,281,135.
5		ases not included in line 2 (itemize)	no E) Port II solumn (h) line	5	1 201 125
_6_	rotal	net assets or fund balances at end of year (line 4 minus li	ne 5) — Fart II, column (b), line	29 6	1,281,135.

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(a) List and described 2-story brick	be the kind(s) of property sold (for example warehouse, or common stock, 200 shs	mple, real estate,	(b) How ac P — Purch D — Dona	nase	(C) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1a N/A						
b						
e					<u>[</u>	
(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	
<u>a</u>						
b c	<del>                                     </del>				<del></del>	
d	<del>                                     </del>					
e						
_ <del></del>	owing gain in column (h) and owned by	the foundation on 12/31/69	,		(I) Cours (Col	/h\
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any			(I) Gains (Col ain minus col (k), bi an -0-) <mark>or</mark> Losses (fro	ut not less
a						
b	-				<del></del>	· ···
С			_		*	··
d		<del></del>			**	
e						
2 Capital gain net income or (n	net capital loss). If gain, also e	enter in Part I, line 7 er -0- in Part I, line 7		2		
3 Net short-term capital gain o	r (loss) as defined in sections 1222(5) a	and (6)				
If gain, also enter in Part I, Ii in Part I, line 8	ne 8, column (c) See instructions If (le	oss), enter -0-		3		
art V Qualification Und	ler Section 4940(e) for Reduce	d Tax on Net Investm	nent Inc	ome	9	
'Yes,' the foundation doesn't qua	ection 4942 tax on the distributable amo	plete this part			Yes	X No
<ol> <li>Enter the appropriate amount</li> </ol>	t in each column for each year, see the	e instructions before makin	g any ent	ries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	ets		(d) Distribution (col (b) divided	
2018	20,286.	1,213	3,257.			0.01672
2017	50,000.		,539.			0.04764
2016	1,123.		104.			10.79807
2015	780.		113.			6.90265
2014	945.		15.			63.00000
2 Total of line 1, column (d)	<del></del>			2	}	80.76509
3 Average distribution ratio for	the 5-year base period — divide the totion has been in existence if less than 5	tal on line 2 by 5 0, or by the years	ne	3		16.15301
4 Enter the net value of nonch		Y line 5		4	1	
- Little the field failed of Hollette	arıtable-use assets for 2019 from Part >	A, III e u	- 1		<del></del>	,261,940
	arıtable-use assets for 2019 from Part )	A, IIIIe J		5		
5 Multiply line 4 by line 3	aritable-use assets for 2019 from Part > ncome (1% of Part I, line 27b)	A, iiile d		5		
<ul><li>Multiply line 4 by line 3</li><li>Enter 1% of net investment in</li></ul>		A, IIIIe J			20	,384,140
<ul><li>Multiply line 4 by line 3</li><li>Enter 1% of net investment in</li></ul>	ncome (1% of Part I, line 27b).	A, IIIIe J		6	20	, 261, 940 ), 384, 140 ), 384, 140 44, 119

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Part	VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruction	ns)		
1 a E	exempt operating foundations described in section 4940(d)(2), check here			
	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,			0.
C	check here ► and enter 1% of Part I, line 27b			1
c A	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2 1	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			
	oundations only, others, enter -0-)			0.
	Add lines 1 and 2			0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.
	Fax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			0.
	Credits/Payments			l
	2019 estimated tax pymts and 2018 overpayment credited to 2019			
	Exempt foreign organizations — tax withheld at source 6 b		•	į
	Tax paid with application for extension of time to file (Form 8868)			
	Backup withholding erroneously withheld			
	Total credits and payments Add lines 6a through 6d			<u>0.</u>
	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached 8			
	Fax due If the total of lines 5 and 8 is more than line 7, enter amount owed			<u>0.</u>
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
	inter the amount of line 10 to be Credited to 2020 estimated tax			
Part	VII-A Statements Regarding Activities			
	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	Yes	No X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1 ь		Х
	f the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			
	Did the foundation file Form 1120-POL for this year?	1 c		<u> </u>
	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
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on oundation managers   \$ ()			- {
	oundation managers	2		<u>l</u>
	f 'Yes,' attach a detailed description of the activities	-	-	<u> </u>
3 F	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		<u></u>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		X
	f 'Yes,' has it filed a tax return on Form 990-T for this year?	4 b	N	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	f 'Yes,' attach the statement required by General Instruction T	<del> </del>		<u> </u>
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			1
	<ul> <li>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?</li> </ul>	6	Х	
	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	Х	
8 a E	Enter the states to which the foundation reports or with which it is registered. See instructions.	_i i	ľ	1
_	<u>ID</u>		Į	ķ
	f 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 <i>General Instruction G</i> <sup>2</sup> If 'No,' attach explanation	8 b	Х	<u>_</u>
9 j	s the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) or calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If 'Yes,' complete Part XIV	9		<del></del> 12
	or calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV 11 Yes, complete Part XIV  Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names	3		
a	and addresses	10		X
BAA	F	orm <b>99</b> 0	J-PF (2	2019)

Form 990-PF (2019) THE WILLARD CHARITABLE FOUNDATION, INC  Part VII-A Statements Regarding Activities (continued)  11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity			
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity			
	11	Yes	No X
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement See instructions	12		Х
	13	Х	
14 The books are in care of ► MILES WILLARD COMPANY  Located at ► PO BOX 1747 IDAHO FALLS ID  Telephone no ► 208-523  ZIP + 4 ► 83403	3- <u>4</u> 7	41_	
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here	N/A		
and enter the amount of tax-exempt interest received or accrued during the year  16 At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a		Yes	N/A No
bank, securities, or other financial account in a foreign country?	16		Х
See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country.			
Part 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 X No			
(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	l		
(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	.	٠.	
(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 X No			.
<b>b</b> If 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.	
Organizations relying on a current notice regarding disaster assistance, check here			. 1
c 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 2019?	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)).			
a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for tax year(s) beginning before 2019?  If 'Yes,' list the years ▶ 20 , 20 , 20 , 20			
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.)	2 b	N	/A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here  20 , 20 , 20 , 20			
3 a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No			
b If 'Yes,' did it have excess business holdings in 2019 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 Form 4720, Schedule C, to			
determine if the foundation had excess business holdings in 2019)  4a Did the foundation invest during the year any amount in a manner that would jeopardize its	3 b	N	<u>'A_</u>
charitable purposes?	4 a		X
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	41		
the tax year beginning in 2019?  BAA  Forn	4 b	.PF /	X 2019)

orm 990-PF (2019) THE WILLARD CHARI				<u> 170336</u>		Page
Part VII-B   Statements Regarding Activit		n 4720 May Be Red	quired (continued	)		
5a During the year, did the foundation pay or incu		(	г., г	, l	- Ye	es No
<ul><li>(1) Carry on propaganda, or otherwise attemp</li><li>(2) Influence the outcome of any specific publication</li></ul>	ic election (see section		∐ Yes ∑	∐ No		
on, directly or indirectly, any voter registra	tion drive?			No		
(3) Provide a grant to an individual for travel,	•	•	∐ Yes ∑	∐ No		.
(4) Provide a grant to an organization other the in section 4945(d)(4)(A)? See instructions			Yes	ON [		
(5) Provide for any purpose other than religiou educational purposes, or for the prevention	n of cruelty to children of	or animals?		No No		
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53 4945 or in See instructions	the transactions fail to c a current notice regardi	qualify under the except ing disaster assistance?	tions	-	5 b	N/A
Organizations relying on a current notice regar	ding disaster assistance	e, check here	▶ [	] [		.1
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response If 'Yes,' attach the statement required by Regu	sibility for the grant?	•	N/A Yes	No		.
6 a Did the foundation, during the year, receive an	ny funds, directly or indir	rectly, to pay premiums		_		
on a personal benefit contract?  b Did the foundation, during the year, pay premi	ums, directly or indirect	ly, on a personal benefi		S)No	6 b	$\frac{1}{x}$
If 'Yes' to 6b, file Form 8870	•		. —	, [		
7 a At any time during the tax year, was the found b if 'Yes,' did the foundation receive any proceed				∐No N/A	7 b	<del> </del>
8 Is the foundation subject to the section 4960 ta	•		muneration	_ [		<u> </u>
or excess parachute payment(s) during the year	ar <sup>?</sup>		Yes 2	No L	<u>_</u> _	
Part VIII Information About Officers, Direction and Contractors	ectors, Trustees, Fo	undation Managers	s, Highly Paid Emp	loyees,		
1 List all officers, directors, trustees, and found	ation managers and the	ir compensation. See in	structions.			
(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	1 ' ' - 11	pense a ner allov	eccount, vances
Louise Nelson	Director	0.	0			0.
455 Gustafson	1.00					
Idaho Falls, ID 83402  Virginia Willard  154 East 49th South Idaho Falls, ID 83404	Director 1.00	0.	0			0.
Randy Kern	Director	0.	0			0.
2230 East Greenbrier Idaho Falls, ID 83404	1.00					
2 Compensation of five highest-paid employees		ded on line 1 – see ins	tructions). If none, ent	er 'NONE	::"	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	1	pense a per allov	ccount, vances
None				+		
		· · · · · · · · · · · · · · · · · · ·				
				-		
Total number of other employees paid over \$50,000	·			•		0

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		ge <b>7</b>
PartiVIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid and Contractors (continued)	d Employees,	
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	n
None		_
	<del>-  </del>	
Table who of the same and \$50,000 for a few and and \$50,00		
Total number of others receiving over \$50,000 for professional services	1	
PartilX:A1 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	Expenses	
organizations and other beneficiaries served, conferences convened, research papers produced, etc		
1 <u>N/A</u>		
2	<del></del>	
·		
3		
4		
PartilX:Bi 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	2 Amount	—
1 N/A	7,000	—
. NCV		
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	<u> </u>	0.
BAA	Form <b>990-PF</b> (20	

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) 1 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 1 a b Average of monthly cash balances 1 b 173. c Fair market value of all other assets (see instructions) 1 c ,280,984. 1 d d Total (add lines 1a, b, and c) 281, 157 e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1 e 0 2 2 Acquisition indebtedness applicable to line 1 assets 0. Subtract line 2 from line 1d 3 281 , 157 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions) 19,217. 4 5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4. 261,940. Minimum investment return. Enter 5% of line 5 6 63,097 Distributable Amount (see instructions) (Section 4942(i)(3) and (j)(5) private operating foundations and certain foreign organizations, check here and do not complete this part.) Minimum investment return from Part X, line 6 63,097. 1 2 a 2a Tax on investment income for 2019 from Part VI, line 5 b Income tax for 2019 (This does not include the tax from Part VI) 2 b c Add lines 2a and 2b 20 3 Distributable amount before adjustments Subtract line 2c from line 1 3 63,097. 4 Recoveries of amounts treated as qualifying distributions 5 63,097Add lines 3 and 4 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 63,097 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26 1 a 44,119. **b** Program-related investments - total from Part IX-B 1 b 2 2 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 3 a a Suitability test (prior IRS approval required) 3 b b 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 4 44,119. Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income 5 Enter 1% of Part I, line 27b See instructions Adjusted qualifying distributions. Subtract line 5 from line 4 6 44,119.

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

BAA

Form **990-PF** (2019)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	<b>(c)</b> 2018	<b>(d)</b> 2019
Distributable amount for 2019 from Part XI, line 7				63,097.
2 Undistributed income, if any, as of the end of 2019				03,057.
a Enter amount for 2018 only		j	42,854.	
<b>b</b> Total for prior years 20 , 20 , 20		0.	12/034.	
3 Excess distributions carryover, if any, to 2019				
<b>a</b> From 2014				
<b>b</b> From 2015				
c From 2016				
d From 2017				
e From 2018				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2019 from Part				
XII, line 4 ► \$ 44,119.				
a Applied to 2018, but not more than line 2a			42,854.	
			42,034.	
<b>b</b> Applied to undistributed income of prior years (Election required — see instructions)	<del></del>	0.		
c Treated as distributions out of corpus (Election required — see instructions)	0.			
d Applied to 2019 distributable amount				1,265.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:			·····	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
, , ,				i
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
<b>d</b> Subtract line 6c from line 6b Taxable amount — see instructions		0.		
e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2019 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2020				61,832.
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)	0.			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2015		}		
b Excess from 2016		ļ		
c Excess from 2017				
d Excess from 2018				
e Excess from 2019				

Form 990 PF (2019) THE WILLARD CHAR				82-0470336	
Part XIV Private Operating Foundate					N/A
1 a If the foundation has received a ruling or d is effective for 2019, enter the date of the r	uling				<del>/</del>
<b>b</b> Check box to indicate whether the foundation		rating foundation de		4942(J)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	4.0010	Prior 3 years	1 10/2015	(e) Total
investment return from Part X for each year listed	(a) 2019	<b>(b)</b> 2018	(c) 2017	(d) 2016	<del> </del>
<b>b</b> 85% of line 2a		-	<del> </del>		
c Qualifying distributions from Part XII, line 4, for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets	·		<u> </u>	ļ	
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			<u> </u>		
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	<del></del> _				
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income	7				
Part XV Supplementary Information assets at any time during the	(Complete this le vear – see in	s part only if the nstructions.)	e foundation ha	ad \$5,000 or mor	e in
1 Information Regarding Foundation Manage		,			
a List any managers of the foundation who h close of any tax year (but only if they have	ave contributed mo	ore than 2% of the t	otal contributions re	ceived by the founda	tion before the
Virginia Willard	contributed more	(Jee	section 307(d)(2)		
<b>b</b> List any managers of the foundation who o	wn 10% or more of	f the stock of a corp	poration (or an equa	lly large portion of the	e ownership of
a partnership or other entity) of which the f	oundation has a 10	0% or greater intere	est		
2 Information Regarding Contribution, Grant Check here ☐ If the foundation only m requests for funds. If the foundation makes 2a, b, c, and d. See instructions	akes contributions	to preselected char	rıtable organızatıons		
a The name, address, and telephone number	r or email address	of the person to wh	nom applications sho	ould be addressed	
See Statement 5					
b The form in which applications should be s	ubmitted and inforr	mation and material	s they should includ	le	
See Statement for Line 2a					
c Any submission deadlines			<u> </u>		
See Statement for Line 2a					<u> </u>
<b>d</b> Any restrictions or limitations on awards, s	uch as by geograpl	hical areas, charitat	ble fields, kinds of ir	nstitutions, or other fa	ctors
See Statement for Line 2a					
		<del></del>			000 55 (0010)

3 Grants and Contributions Paid During the	If recipient is an individual,	Foundation			
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	or substantial contributor	recipient			
a Paid during the year					
See Statement 6					
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		!!!			
Total		<u> </u>	► 3a	42,854	
<b>b</b> Approved for future payment			···	/	
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	}				
	Ì			1	
		<u> </u>			
Total			► 3b	i e	

	-A   Analysis of Income-Producing samounts unless otherwise indicated	-	business income	Excluded	by section 512, 513, or 514	1
•	, amounts amoss outsimise massive	(a) Business	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Progr	ram service revenue	code		code		(See instructions)
b		<del>                                     </del>		<del>                                     </del>		
~		+		<u> </u>		
ď			<del></del>	+		
- e		1		<del>                                     </del>		
, —		1		<u> </u>		
a Fees	and contracts from government agencies	+ - +		1		
_	bership dues and assessments		<del></del>	<del> </del>	· · · · ·	
	it on savings and temporary cash investments			<u> </u>		
	ends and interest from securities .	<b>+</b>		<u> </u>	<u>.</u> .	
	ental income or (loss) from real estate	,	A	1	,	
	financed property	<del>                                     </del>		<del></del>	1	<del></del>
	lebt-financed property	<del>                                     </del>	<del></del>	<del>                                     </del>		
	ntal income or (loss) from personal property	-		<del> </del>		
	r investment income			-		
	r (loss) from sales of assets other than inventory					
	ncome or (loss) from special events		***	<u> </u>		<del> </del>
	` '	<b> </b>	<del></del>			
	s profit or (loss) from sales of inventory		н .	<del></del>		
	r revenue	<del>                                     </del>		-		2 "
	<del></del>	1		+	-	
ь		+ +		_		
°.——		+ +		-		
d		1		<u> </u>		
е						ļ
10 0 11	4 1 8 1 4 4 4 4 1 4 1 4 1 4 1 4 1 4 1 4	1 2			1	
	otal Add columns (b), (d), and (e)	'.		4	12	
13 Total	. Add line 12, columns (b), (d), and (e)	-		4	13	0.
13 Total (See works	. Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation	ns)	nment of Event	at Durne		0.
13 Total (See works Part XVI	. Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation  -B Relationship of Activities to the	ns) e Accomplis	····································	•	oses	0 .
13 Total (See works	. Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation	ns) e Accomplis	I in column (e) of Pa	rt XVI-A	oses	o the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation  B Relationship of Activities to the Explain below how each activity for which in	ns) e Accomplis	I in column (e) of Pa	rt XVI-A	oses	o the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation  B Relationship of Activities to the Explain below how each activity for which in	ns) e Accomplis	I in column (e) of Pa	rt XVI-A	oses	o the
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13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation  B Relationship of Activities to the Explain below how each activity for which in	ns) e Accomplis	I in column (e) of Pa	rt XVI-A	oses	o the
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13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation  B Relationship of Activities to the Explain below how each activity for which in	ns) e Accomplis	I in column (e) of Pa	rt XVI-A	oses	o the
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) heet in line 13 instructions to verify calculation  B Relationship of Activities to the Explain below how each activity for which in	ns) e Accomplis	I in column (e) of Pa	rt XVI-A	oses	o the

# Form 990-PF (2019) THE WILLARD CHARITABLE FOUNDATION, INC 82-0470336 Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable

	Exempt Organiz	ations								
described	organization directly of d in section 501(c) (o o political organizatio	ther than sec	ngage in any of tion 501(c)(3) o	the following with rganizations) or in	any oth	ier organization i 527,			Yes	No
-	s from the reporting f		a noncharitable	exempt organiza	tion of					
(1) Cash	, ,							1 a (1)	1 1	
(2) Othe								1 a (2)	<del></del>	$\frac{x}{X}$
<b>b</b> Other tra								1 4 (2)	++	
	s of assets to a nonc	haritahla ayai	mnt organizatio	'n				1 b (1)	╅┷╅	<del>-v</del>
• •	hases of assets from		, -					1 b (2)	+	<u>X</u>
• •			, ,	anization					-	
` ' _	al of facilities, equipr		asseis					1 b (3)	+	<u>X</u>
	nbursement arrangen							1 b (4)	+-+	_ <u>X</u> _
	is or loan guarantees							1 b (5)	$\longmapsto$	<u>X</u>
<b>\</b> ->	ormance of services			•				1 b (6)	$\longmapsto$	X
c Sharing i	of facilities, equipme	nt, mailing lis	ts, other assets	, or paid employe	es			1 c	11	X
<b>d</b> If the and the good any trans	swer to any of the ab s, other assets, or se saction or sharing arr	oove is 'Yes,' o ervices given rangement, sh	complete the fo by the reporting now in column (	llowing schedule g foundation if the (d) the value of the	Column e founda e goods,	(b) should alwa ition received le other assets, o	nys show the ss than fair i or services re	fair market valu market value in eceived	e of	
(a) Line no	(b) Amount involved	(c) Name o	of noncharitable exe	empt organization	(d)	Description of tran	sfers, transactio	ons, and sharing arra	ngements	
N/A							•			
								-		
					1					
					<u> </u>					
-										
	· · · · · ·				<del>                                     </del>					
+					<del> </del>					
+					<del> </del>		-			—
+				<del></del>		<del></del>				—
+										—
1										<del></del>
2 a Is the fou	undation directly or ind in section 501(c) (o	ndirectly affilia	ited with, or rela	ated to, one or mo	ore tax-e	exempt organiza	tions	∏Ye	s XI	No
	complete the following		(1011 301(0)(3))	or in section 327				□	, V.	••
	Name of organizatio		(b) Tyr	oe of organization		(6)	Nescription	of relationship		—
	Name of organizatio		(6) 191	oc or organization		(C	Description	r or relationship		—
N/A										
					•		<del>-</del>			
						<u> </u>				
	<del></del>									
111-4			d the control of the				af and beautades	and hallof it in the		—
Sign Here	enalties of perjury, I declare the and complete Declaration	of preparer (other	than taxpayer) is ba	ased on all information	<u>.</u> ▶ <u>1</u>	Director	or my knowledge vledge	May the this return preparer See insi	IRS discu rn with the shown beli	e l
Signat	ure of officer or trustee	<u> </u>	<u> </u>	Date*	Т.	itle			Yes	No
aid	Print/Type preparér's nám E. Chris Goo		2	rsignature ITIS Goode,	CPA	Date 11/12/2	Check self emplo	uf PTIN Ped P0095	2536	
Preparer	Firm's name P	ulliam &	Associate	s Chartered	1		Firm's EIN	82-0419604		
Jse Only			merald Str							_
	_		83704				Phone no	(208) 322-	8525	
BAA								Form 9		2019)
									•	

### Schedule B

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

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545 0047

2019

Employer identification number

Name of the organization THE WI	LLARD CHARITABLE FOUNDATION, INC	Employer identification number				
C/O RA	NDY KERN, TRUSTEE	82-0470336				
Organization type (check one	)					
Filers of:	Section:					
Form 990 or 990-EZ	501(c)( ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a pro-	rivate foundation				
Form 990-PF	527 political organization					
	X 501(c)(3) exempt private foundation	X 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private	te foundation				
	501(c)(3) taxable private foundation					
, ,	covered by the <b>General Rule</b> or a <b>Special Rule.</b> ), (8), or (10) organization can check boxes for both the General	I Rule and a Special Rule See instructions				
General Rule						
	filing Form 990, 990-EZ, or 990-PF that received, during the yearny one contributor. Complete Parts I and II. See instructions for					
Special Rules						
under sections 509( received from any o	described in section 501(c)(3) filing Form 990 or 990-EZ that me (a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 one contributor, during the year, total contributions of the greater, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	or 990-EZ), Part II, line 13, 16a, or 16b, and that				
during the year, total	described in section 501(c)(7), (8), or (10) filing Form 990 or 99 all contributions of more than \$1,000 exclusively for religious, charge prevention of cruelty to children or animals. Complete Parts I, I	aritable, scientific, literary, or educational				
during the year, coi \$1,000 If this box is charitable, etc., pur	described in section 501(c)(7), (8), or (10) filing Form 990 or 99 ntributions exclusively for religious, charitable, etc., purposes, but so checked, enter here the total contributions that were received prose. Don't complete any of the parts unless the <b>General Rule</b> ausively religious, charitable, etc., contributions totaling \$5,000 or	ut no such contributions totaled more than during the year for an exclusively religious, applies to this organization because				
990-PF), but it must answer '	isn't covered by the General Rule and/or the Special Rules doe No' on Part IV, line 2, of its Form 990, or check the box on line I doesn't meet the filing requirements of Schedule B (Form 990, S	H of its Form 990-EZ or on its Form 990-PF,				

	B (Form 990, 990-EZ, or 990-PF) (2019)		1	1 Page <b>2</b>	
Name of org	anization LLARD CHARITABLE FOUNDATION, INC		r identification numbe	r	
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional sp				
(a) No.	(b) (c) Name, address, and ZIP + 4 Total contributions		(d) Type of contribution		
1	Virginia Willard  154 East 49th South  Idaho Falls, ID 83404	\$43,944.	Person Payroll Noncash (Complete Part noncash contrib	X	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	tribution	
		\$	Person Payroll Noncash (Complete Part noncash contrib	Il for outions )	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution	
		\$	Person Payroll Noncash (Complete Part noncash contrib	Il for utions )	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution	
		\$	Person Payroll Noncash (Complete Part noncash contrib		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	ribution	
		\$	Person Payroll Noncash (Complete Part noncash contrib	Il for outions )	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of cont	tribution	

(Complete Part II for noncash contributions)

Person Payroll Noncash

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)
Name of organization. THE WILLARD CHARITABLE FOUNDATION, INC

Employer identification number

82-0470336

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional spa	ace is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A	\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	, 
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
BAA	Sch	l nedule B (Form 990, 990-E	Z, or 990-PF) (2019)

Name of organization
THE WILLARD CHARITABLE FOUNDATION, INC

Employer identification number 82-0470336

Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)    \$\int \frac{1}{2} \] Use duplicate copies of Part III if additional space is needed.					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	N/A					
(a) No. from Part I	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship of transferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	<b></b>			<del> </del>		
	(e) Transfer of gift Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee		
	<u></u>					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
	(e) Transfer of gift Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held		
			L			
	(e) Transfer of gift Transferee's name, address, and ZIP + 4			Relationship of transferor to transferee		

Page 1 2019 **Federal Statements** THE WILLARD CHARITABLE FOUNDATION, INC C/O RANDY KERN, TRUSTEE 82-0470336 **Client 60088** 10 46AM 11/12/20 Statement 1 Form 990-PF, Part I, Line 16a Legal Fees (c) (d) (a) (b) Net Adjusted Charitable Investment Expenses Purposes Per Books Income Net Income 175. Legal Fees Total \$ <u> 175.</u> \$ 175. Statement 2 Form 990-PF, Part I, Line 16b Accounting Fees (d) (b) Net (c) (a) Expenses Investment Adjusted Charitable per Books Income Net Income Purposes ,09<u>0.</u> ,090. Tax Preparation Fees Total \$ 1,090. 1,090. Statement 3 Form 990-PF, Part II, Line 15 Other Assets Fair Market Book Value <u>Value</u> 1,280,984. Cash Surrender Value Life Insurance-Net ,280,984. Cash Value of Life Insurance 1,280,984. Total \$ 1,280,984. Statement 4 Form 990-PF, Part III, Line 3 Other Increases 50,117. CSV Valuation Increase Per Books Total 🕏 50,117.

### Statement 5 Form 990-PF, Part XV, Line 2a-d Application Submission Information

Name of Grant Program:

Name:

Randy Kern, Trustee

Care Of:

Street Address:

PO Box 1747

City, State, Zip Code:

Idaho Falls, ID 83402

Telephone:

208-523-4741

E-Mail Address: Form and Content:

Letter containing the amount requested and the charitable

purpose for the funds awarded.

2019

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

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11/12/20

**Client 60088** 

10 46AM

Statement 5 (continued) Form 990-PF, Part XV, Line 2a-d Application Submission Information

Submission Deadlines:

None

Restrictions on Awards:

For educational, humanitarian, religious or relief of

economically disadvantaged persons only.

### Statement 6 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of <u>Grant</u>		Amount	
Idaho Falls Arts Council 498 A Street Idaho Falls ID 83402	NONE	PC	General	Support	\$	32,774.
Idaho Falls Symphony 440 N Capital Avenue Idaho Falls ID 83402	NONE	PC	General	Support		3,000.
Idaho Falls Music Club PO Box 50700 Idaho Falls ID 83405	NONE	PC	General	Support		500.
Snake River Animal Shelter 1425 Higham Street Suite 250	NONE	PC	General	Support		3,000.
Idaho Falls ID 83402						;
Idaho Falls Unitarian Church 555 East Street Idaho Falls ID 83402	NONE	PC	General	Support		1,000.
Idaho Public Television 1455 N Orchard Street Boise ID 83706	NONE	PC .	General	Support		1,000.
East Idaho Music Teachers' Association 2482 Blue Canyon Court Idaho Falls ID 83402	NONE	PC	General	Support		1,080.
East Idaho Spay Neuter Coalition 970 Escalante Ave Idaho Falls ID 83404	NONE	PC	General	Support		500.
				Total	\$	42,854.