No. C 136063		Due	2. Registered	2. Registered Agent and Address (NO PO BOX)				
Return to:		Annual Report Form			SCOTT A SCOTT A. TSCHIRGI, CHARTERED 401 W FRONT ST STE 401 BOISE ID 83702 3. New Registered Agent Signature:*			
SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080		1. Mailing Address: Correct in this box if needed. SUSAN T. PARKINSON FOUNDATION, INC. SCOTT A TSCHIRGI 401 WEST FRONT STREET SUITE 401 BOISE ID 83702		BOISE ID				
NO FILING FEE IF RECEIVED BY DUE DATE								
4. Corporations: Enter Name	s and Busin	ess Addresses of P	resident, Secretary, and Directors. Trea	asurer (optional).				
Office Held N	Name		Street or PO Address	City	State	Country	Postal Code	
DIRECTOR H	ECTOR HEATHER J PARKINSON		109 AUDUBON 109 AUDUBON 109 AUDUBON	HAILEY HAILEY HAILEY	ID ID ID	USA USA USA	83333 83333 83333	
5. Organized Under the Laws of:		6. Annual Report must be signed.*						
ID		Signature: Scott A. Tschirgi		Da	Date: 08/20/2018			
C 136063		Name (type or print): Scott A. Tschirgi		Tit	Title: Registered Agent			
Processed 08/20/2018	% Electronically provided signatures are accepted as original signatures.							