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

2015

OMB No 1545-0052

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

1-0	r cale	ngar	year 2015, or ta	x year beginnii	1 <u>g</u>	, 2015,	and ending					
	ת א כו א	' אים	MILY FOUND	አጥተ (N				A	Employer identifi 27~63662		nber	
			T QUAIL HE		RТ			В	Telephone numbe		uctions)	
			D 83703					<u> </u>	208-850-	8855		
								С	If exemption app	lication is	pending, ch	neck here 🟲 🔲
G	Che	ck all	that apply.	Initial return		Initial return of a form	ner public charity	D	1 Foreign organizat	tions, chec	k here	- □
				Final return		Amended return			* -			لا المحادة المحاد الا
_				Address char		Name change			2 Foreign organization of the property of t			6 test, check
Н	Che		e of organizatio	on X Sec	tion 501	(c)(3) exempt private to rust Other taxable	oundation	Ε	If private founda	tion status	was tormu	nated
_	Fair		value of all assets a			ounting method X C		-	under section 50			
'			I, column (c), line 16			Other (specify)		F	If the foundation	is in a 60-	month terr	nination
	▶ \$		2,411,	702.		column (d) must be or	cash basis)	1	under section 50	7(b)(1)(B)	, check her	e <u>►</u>
P	art I		alysis of Re			(a) Revenue and	(b) Net investme	nt	(c) Adjusted			sbursements
		col	(penses (The t lumns (b), (c), a	total of amounts and (d) may not	neces-	expenses per books	ıncome		income			charitable urposes
		sai	rily equal the am ee instructions).)	nounts ın colum	ın (a)						(cash	basis only)
_	- 1	<u> </u>	Contributions, gifts, grants,		edule)	450,221.					· · · · · · · · · · · · · · · · · · ·	
<u>a</u>		_		ndation is not required to	1						<i>)</i> .	. ,
1 7 201		3	Interest on savings and ten	mporary cash investments						N/A		مارخریا ا
_		4	Dividends and interest from			36,505.	36,5	05.			۲,	7 2 Mg
1			Gross rents Net rental income		[
		_	or (loss)			. 44 >			, 1	*		and the state of t
S	R E		Net gain or (loss) from sal Gross sales price for				.,		<u> </u>			Y'S
6.3	Ž.	7	assets on line 6a Capital gain net inco	ome (from Part IV, In	ne 2)				1	1 1		The state of the s
<u>u</u>	EZUE	8	Net short-term capita	-		19 / 4 / 13						مر کروش و احد
=	E	9	Income modifications Gross sales less	s . I		" of the space	270 (4)					3 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 /
4	_	iva	Gross sales less returns and allowances			·	į.		١.		, ,	,
SCANNED		b	Less Cost of goods sold			· () () () () () () () () () (See Mary 1		2 (21	4	1	55 3 414 / 1
U.	5		Gross profit or (loss) (atta				が 15種 株 い				A SERVICE	
		11	Other income (attack	h schedule)								
		12	Total. Add lines 1	through 11.		486,726.	36,5	05.				
_		13	Compensation of off		tees, etc	0.						
		14	Other employee sale	-								
		15	Pension plans, empl Legal fees (attach so	-	•				_			
	A D		Accounting fees (att		St. 1	985.	4	85.	1			500.
	M I N	c	Other prof fees (atta						1 RIE	1		
	O Î	17	Interest .		C+m 2				31	<u> (5/1)</u>		
	O S T R A T	18	Taxes (attach schedule)(s Depreciation (attach	•	Şţm 2	120.		<u> </u>	Of SEP	0		A Company Comments
		19	schedule) and deple					<i>y</i>	1	6 2016	270	
	N V G E	20	Occupancy .					(KORTON)	0		1.50	
		21 22	Travel, conferences. Printing and publica	•							1.5.	
	A E N X D P	23	Other expenses (att						**	- 17	-7	
	E			<u>See Statem</u>	ent 3	174.	1	74.			1	
	AND ENSES	24	Total operating and expenses. Add lines			1,279.	6	59.				500.
	5	25	Contributions, gifts, grant	_ D ~ ~	t XV	104,000			. i	, ,		500. 104,000.
		26	Total expenses and					559.				104,500.
		27	Add lines 24 and 25 Subtract line 26 from			105,279		J.J.	 			104,500.
			Excess of revenue	over expenses		000		•		1		•
			and disbursements		tor 0.3	381,447	35,8	116		, ;	-	1
		1	Net investment incom Adjusted net incom	- -			33,6	40.	<u> </u>	· · · ·		-,, -;
_		`	,			J						

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

6

Page 3

(a) List and descr	ibe the kind(s) of property sold (e.g., rouse; or common stock, 200 shares ML	eal estate,	b) How acquire P — Purchase D — Donation	d (C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
la N/A			D — Conation		
b					
c					
d					
е					
(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	
а					
b					
c					· · · · · · · · · · · · · · · · · · ·
<u>d</u>					
Complete only for accets of	owing gain in column (h) and owned t	by the foundation on 12/21/6	:0		
(i) F.M V	(i) Adjusted basis	(k) Excess of col. (i)		(I) Gains (Col gain minus col. (k), t	
as of 12/31/69	as of 12/31/69	over col. (j), if any	1	than -0-) or Losses (f	
a					
b					-
С					
d					
е					
2 Capital gain net income or	(net capital loss). [If gain, also If (loss), en	enter in Part I, line 7 ter -0- in Part I, line 7	2		
3 Net short-term capital gain	or (loss) as defined in sections 1222(5) and (6)			
If gain, also enter in Part I, in Part I, line 8	line 8, column (c) (see instructions). I	f (loss), enter -0-	3		
Part V Qualification Une	der Section 4940(e) for Reduce	d Tax on Net Investme	ent Incom	e	
If 'Yes,' the foundation does not 1 Enter the appropriate amount	section 4942 tax on the distributable a qualify under section 4940(e). Do not on each column for each year; see the in	complete this part	·	. []Yes	X No
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	ets (co	(d) Distribution Distribution Di. (b) divided by	
2014	54,765.	1,987	,951.		0.027548
2013	50,372.	1,166	,274.		0.043191
2012	35,478.		,147.		0.038938
2011	42,355.		,182.		0.045632
2010	1,446.	652	,945.		0.002215
2 Total of line 1, column (d)			2		0.157524
3 Average distribution ratio for number of years the foundary	or the 5-year base period — divide the ation has been in existence if less than	total on line 2 by 5, or by th n 5 years .	e		0.031505
4 Enter the net value of nonc	charitable-use assets for 2015 from Pai	rt X, line 5	4		2,278,356.
5 Multiply line 4 by line 3	•		5		71,780.
6 Enter 1% of net investmen	t income (1% of Part I, line 27b)		. 6		358.
7 Add lines 5 and 6.			. 7		72,138.
8 Enter qualifying distribution	ns from Part XII, line 4		_ 8		104,500.
If line 8 is equal to or greater Part VI instructions	then line 7, shoot the house Dest VI, line	. 16		rata Can tha	·

Form :	990-PF (2015) HARAD FAMILY FOUNDATION	27-0	6366249		P	age 4
Part	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e)	e), or 4948 – see	instruction	15)		
	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1	٦	_ =	, 		
	Date of ruling or determination letter (attach copy of letter if necessary — see inst	trs)				
	Domestic foundations that meet the section 4940(e) requirements in Part V,		1		3	<u> 358.</u>
	check here. ► X and enter 1% of Part I, line 27b		7, 4-		4	,
C	: All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		·			4
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable					_
	foundations only Others enter -0-)		2			0.
	Add lines 1 and 2		3			358.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Oth	ners enter -U-).	5			0.
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	•	3			358.
	Credits/Payments 2015 estimated tax pmts and 2014 overpayment credited to 2015	1.5	h			
	2015 estimated tax pmts and 2014 overpayment credited to 2015 Exempt foreign organizations — tax withheld at source 6 b	15.	- 3.7	•	-	
	Tax paid with application for extension of time to file (Form 8868) 6c					
	Backup withholding erroneously withheld 6d		The second	د دام دو سهد اعلی		ا مواجع
	Total credits and payments Add lines 6a through 6d		7	******		15.
	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attach	ned	8			15.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed See Statemer		9			343.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	→	10			
		efunded >	11			
	t VII-A Statements Regarding Activities					
	a During the tax year, did the foundation attempt to influence any national, state, or local legis	slation or did it			Yes	No
14	participate or intervene in any political campaign?	nation of all it		1 a		X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purpose	es				
	(see Instructions for the definition)?		•	1 Ь		<u>X</u>
	If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any mater or distributed by the foundation in connection with the activities	rals published				ئذيــــــــــــــــــــــــــــــــــــ
c	c Did the foundation file Form 1120-POL for this year?			1 c		X
	the Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the (1) On the foundation \$\Bigs\\$ 0 (2) On foundation managers	year. ►\$	0		[; - 1
	(1) On the foundation S 0. (2) On foundation managers Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax	T	0.	- `}.		,
	foundation managers >\$ 0.	•		<i>7-</i> -	, -	4
2	Has the foundation engaged in any activities that have not previously been reported to the IF	RS? .		2		X
	If 'Yes,' attach a detailed description of the activities			· (
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrume	nt, articles		25 5 4 5	9	A. T.
	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of	of the changes		3		<u>X</u>
	a Did the foundation have unrelated business gross income of \$1,000 or more during the year	?		4a		<u>X</u>
	b If 'Yes,' has it filed a tax return on Form 990-T for this year?			4 b	N	
5	, , ,	•		5	(3)2 1	X
_	If 'Yes,' attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eith	ner:				
	By language in the governing instrument, or					a a
	 By state legislation that effectively amends the governing instrument so that no mandatory directively with the state law remain in the governing instrument? 	ons that conflict		6	X	EL MANAGE
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 Pa	art XV		7	Х	
8 a	a Enter the states to which the foundation reports or with which it is registered (see instruction	ns) 🕨		7.3	1333	-* (
	ID					' ' '
b	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 <i>General Instruction G</i> ? If 'No,' attach explanation			8 b	x-	
9	Is the foundation claiming status as a private operating foundation within the meaning of sector calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)?	ction 4942(j)(3) o ? If 'Yes,' complet	r 4942(j)(5) te Part XIV.	9		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule list and addresses	ting their names		10		Х
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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 the tax year beginning in 2015?
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charitable purposes?

4 a

Part VII-B Statements Regarding Activition	es for Which Form	4/20 May Be Requ	uirea (continuea)	
5 a During the year did the foundation pay or incur	-	(section 4945(e))?	□voc ▽	No ,
(1) Carry on propaganda, or otherwise attemp	_		∐ Yes X	NO ' -
(2) Influence the outcome of any specific publion, directly or indirectly, any voter registra(3) Provide a grant to an individual for travel,	tion drive?		\vdash	No service provide
(4) Provide a grant to an organization other th	•	•		
in section 4945(d)(4)(A) ⁵ (see instructions)		Yes X	No
(5) Provide for any purpose other than religious educational purposes, or for the prevention	n of cruelty to children	or animals? .		No
b If any answer is 'Yes' to 5a(1)-(5), did any of t described in Regulations section 53.4945 or in (see instructions)?	he transactions fail to c a current notice regard	quality under the excep- ling disaster assistance	tions	5 b N/A
Organizations relying on a current notice regains	rding disaster assistanc	e check here	▶	
c If the answer is 'Yes' to question 5a(4), does t tax because it maintained expenditure respons	sibility for the grant?.		N/A Yes	No Diagram
If 'Yes,' attach the statement required by Regu				
6 a Did the foundation, during the year, receive ar on a personal benefit contract?b Did the foundation, during the year, pay premi			Yes X	No 6b X
If 'Yes' to 6b, file Form 8870				
7a At any time during the tax year, was the found b If 'Yes,' did the foundation receive any procee				No 3. 7b
Part VIII Information About Officers, Di				· · / · · · · · · · · · · · · · · · · ·
and Contractors		<u> </u>		
1 List all officers, directors, trustees, foundation				T
(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	(e) Expense account, other allowances
GEORGE J. HARAD	Trustee	0.	0.	0
3675 W. Quail Heights Ct.	2.00		,	
Boise, ID 83703	Thurst and			
BEVERLY M. HARAD 3675 W. Quail Heights Ct.	Trustee 2.00	0.	0.	0
BOISE, ID 83703	2.00			
2 Compensation of five highest-paid employees (or	ther than those included	on line 1 – see instructio	ns). If none, enter '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	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
None			compensation	
Total number of other employees and over \$50.000		L		<u> </u>
Total number of other employees paid over \$50,000	TEEA0306L 1	.0/13/15		Form 990-PF (2015)
~ 00	ILEAU300L I			

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Form 990-PF (2015) HARAD FAMILY FOUNDATION

orm 990-PF (2015) HARAD FAMILY FOUNDATION Part VIII Information About Officers, Directors, Trustees, Four	27-636	
and Contractors (continued)	idation managers, riiging raid E	трюуссэ,
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
Jone		
W 4 m		
otal number of others receiving over \$50,000 for professional services	▶	0
Part IX-A Summary of Direct Charitable Activities		
at the foundation's four largest direct should be attuited during the tay year. Include relevant statict	ical information each as the number of	
ist the foundation's four largest direct charitable activities during the tax year. Include relevant statist rganizations and other beneficiaries served, conferences convened, research papers produced, etc	teal fill of matter as the number of	Expenses
1 N/A		
2		
3		"
4		
B SALVADA C	unational .	
Part IX-B Summary of Program-Related Investments (see Instr	uctions)	
Describe the traction of a second related in restments made by the foundation diving		Amount

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	-
All other program-related investments. See instructions	
3	-
Total, Add lines 1 through 3	0.

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Form **990-PF** (2015)

1 are	see instructions.)		
1 a	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes Average monthly fair market value of securities.	1 a	2,298,253.
b	Average of monthly cash balances	1 b	14,799.
С	Fair market value of all other assets (see instructions)	1 c	
d	Total (add lines 1a, b, and c)	1 d	2,313,052.
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation) 1 e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d .	3	2,313,052.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4	34,696.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	2,278,356.
	Minimum investment return. Enter 5% of line 5	6	113,918.
Par	XI, Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operation and certain foreign organizations check here ► and do not complete this part.)	ting fo	oundations
1	Minimum investment return from Part X, line 6	1	113,918.
2 a	Tax on investment income for 2015 from Part VI, line 5 . 2a 358.	,	
b	Income tax for 2015 (This does not include the tax from Part VI) 2 b		
c	Add lines 2a and 2b	2 c	358.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	113,560.
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4 .	5	113,560.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	113,560.
Par	t XII Qualifying Distributions (see instructions)	· · · · ·	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes.	1 a	104,500.
	Expenses, contributions, gifts, etc — total from Part I, column (d), line 26 Program-related investments — total from Part IX-B	1 b	104,500.
	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
		 -+	
ē	Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required)	3a	
	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	104,500.
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	358.
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	104,142.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundatines for the section 4940(e) reduction of tax in those years.	ndatior	1

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Form 990-PF (2015)

Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
Distributable amount for 2015 from Part XI,				
line 7		·	· · · · · · · · · · · · · · · · · · ·	113,560.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			96,667.	<u> </u>
b Total for prior years: 20, 20, 20		0.		<u> </u>
3 Excess distributions carryover, if any, to 2015.			, , ,	
a From 2010	,		•	
b From 2011				,
c From 2012			1	
d From 2013		!	1	, se
e From 2014			N 76 N 11	3)
f Total of lines 3a through e.	0.	一大大学 教育 できれる	· · · · · · · · · · · · · · · · · · ·	· 沙·
4 Qualifying distributions for 2015 from Part		Les Brokers Brokers Line	THE STATE OF THE S	A STATE OF THE STA
XII, line 4: * \$ 104,500.				
a Applied to 2014, but not more than line 2a		, ,	96,667.	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
b Applied to undistributed income of prior years				
(Election required — see instructions)		0.	1, 1, 2, 2, 2, 1, 1, 1, 2	13-4
c Treated as distributions out of corpus		-		
(Election required – see instructions)	0.		· Marian	
d Applied to 2015 distributable amount		, , ,	- / - VI	7,833.
e Remaining amount distributed out of corpus	0.	, , , , , , , , , , , , , , , , , , , ,	te the second	
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the	0.			0.
same amount must be shown in column (a).)		• ,		1
			The state of	10 10 10 10 10 10 10 10 10 10 10 10 10 1
6 Enter the net total of each column as			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
indicated below:		3 ,	the state of the s	4.
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.	, ,	,40, 1	
b Prior years' undistributed income. Subtract line 4b from line 2b		0.	a se rederitar de la	
c Enter the amount of prior years' undistributed	,,		And a top the water	3, 4, 5, 4, 5, 5
income for which a notice of deficiency has been issued, or on which the section 4942(a)			Company of the Compan	Application of the second
tax has been previously assessed .	The state of the state of the state of the	0.		A CONTRACTOR
d Subtract line 6c from line 6b Taxable				
amount - see instructions.		l o.		
e Undistributed income for 2014. Subtract line 4a from	"我就是一个我们就	Sugar State State of the		as the said was too to
line 2a. Taxable amount — see instructions	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	1. Car 1. St. 1. Car 1.	0.	
6 0015 0 14 14	工作的图像 	THE PARTY OF THE P		
f Undistributed income for 2015. Subtract lines 4d and 5 from line 1. This amount must be	The state of the s			
distributed in 2016				105,727.
7 Amounts treated as distributions out of		A TEXT OF THE PARTY OF THE PART	THE PERSON NAMED IN	A SHARE THE STATE OF THE STATE
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.	1715年,自然大阪	THE PROPERTY.	Shind Att Water Light 1 . "
8 Excess distributions carryover from 2010 not				,
applied on line 5 or line 7 (see instructions)	0.	·	<u>'</u>	
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	0.	- -	٠ ,	
10 Analysis of line 9.	7.			
a Excess from 2011			B war you	1 3
b Excess from 2012	T	F 1	1	
c Excess from 2013	1			
d Excess from 2014	1 : 5			, · · ·
e Excess from 2015	1 , , ,			
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Form 990-PF (2015) HAR				 	27-6366249	
	perating Foundat					N/A
	enter the date of the	ruling				14040
b Check box to indicat		<u></u> -	rating foundation d		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the income from Part I of		Tax year		Prior 3 years	T () 0010	/-> T - + 1
investment return fro each year listed	om Part X for	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
b 85% of line 2a						
c Qualifying distributio line 4 for each year	listed					· · · · · · · · · · · · · · · · · · ·
d Amounts included in line a for active conduct of exem						
e Qualifying distribution for active conduct of Subtract line 2d from	exempt activities. I line 2c					
3 Complete 3a, b, or of alternative test relied	: for the d upon					
a 'Assets' alternative t	est – enter		[
(1) Value of all asse						
(2) Value of assets section 4942(j)(3	3)(B)(i)					
b 'Endowment' alternative to minimum investment retu line 6 for each year listed						
c 'Support' alternative	test - enter					<u> </u>
 Total support of investment incordividends, rents on securities loa 512(a)(5)), or ro 	me (interest, , payments ins (section					
(2) Support from genera more exempt organiz in section 4942(j)(3)	ations as provided					
(3) Largest amount an exempt orga	of support from nization					
(4) Gross investmen				<u> </u>		
Part XV Suppleme assets at a	ntary Information any time during th	(Complete this e year — see in	part only if the structions.)	foundation had	d \$5,000 or more	in
1 Information Regard	ing Foundation Mana	gers:				
 a List any managers of close of any tax yea None 	the foundation who haver (but only if they have	e contributed more t e contributed more	han 2% of the total c than \$5,000) (See	ontributions received section 507(d)(2))	by the foundation before	ore the
b List any managers of	the foundation who own	100/ or more of the	stock of a porporation	on (or an equally larg	o portion of the owner	ship of
a partnership or oth None	er entity) of which the	foundation has a 1	0% or greater inter	est.	e portion of the owner.	anip oi
			landia di B			
Check here ► X requests for funds	ing Contribution, Gra f the foundation only ma If the foundation make	akes contributions to	preselected charitab	le organizations and		
a The name, address, a		or e-mail address of t	he person to whom a	applications should be	e addressed.	
a frie flame, address, c	and telephone number o	we man address or t	ne person to mome	ppiloditorio oriodia bi	3 444.0000	
b The form in which a	ipplications should be	submitted and info	rmation and materi	als they should incl	ude	
c Any submission dea	adlines:					
d Any restrictions or I	imitations on awards,	such as by geogra	phical areas, charita	able fields, kinds of	institutions, or other	factors
RAA		т.	EE A03101 10/13/15			orm 990-PF (2015)

Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation status of recipient Recipient Purpose of grant or contribution **Amount** Name and address (home or business) a Paid during the year See Statement 9 3 a 104,000. Total **b** Approved for future payment 3 b

Total

Part XVI-A	Analysis	of Income-Producing	Activities

- no gross	s amounts unless otherwise indicated.	Unrelate	d business income		section 512, 513, or 514	(e)
, 1 Progr	ram service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)
a a				code		
L				 		
_						
۵						
f		<u> </u>				
	and contracts from government agencies					
	bership dues and assessments			 		· · · · · · · · · · · · · · · · · · ·
	st on savings and temporary cash investments ends and interest from securities			14	36,505.	
	ental income or (loss) from real estate	. 21/21 AFR	and the second			1888 といくかりはなから
	-financed property	× > 1/2 - 4/2		5-4-07 × 1	A CALL SAMESTER	the desired of the second of t
	lebt-financed property			 		· · · · · · · · _
	ntal income or (loss) from personal property			 		
	r investment income					
8 Gain o	r (loss) from sales of assets other than inventory					
9 Net ii	ncome or (loss) from special events					
	s profit or (loss) from sales of inventory					
11 Other	r revenue	C (F) X 1	**,,	17 4 77	* * * * * * * * * * * * * * * * * * *	Af A
a				ļ. <u> </u>		
b						
ċ		 .				
d				 		
12 Subt	etal Add ealymas (b) (d) and (a)	- , " -		1	26 505	
12 Subto	otal. Add columns (b), (d), and (e)	2" ,		1 -	36,505.	36 505
12 Subto	I. Add line 12, columns (b), (d), and (e)			y <u>-</u>	36,505. 13	36,505.
12 Subto 13 Total (See works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated	tions.)	:		13	36,505.
12 Subto 13 Total (See works	I. Add line 12, columns (b), (d), and (e)	tions.)	lishment of Exem		13	36,505.
12 Subto 13 Total (See works	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated	e Accomp		pt Purpos	13 es	
12 Subto 13 Total (See works Part;XVI	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated. Relationship of Activities to the	e Accomp		pt Purpos	13 es	
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12 Subto 13 Total (See works Part:XVI	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated. Relationship of Activities to the	e Accomp		pt Purpos	13 es	
12 Subto 13 Total (See works Part:XVI	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated. Relationship of Activities to the	e Accomp		pt Purpos	13 es	
12 Subto 13 Total (See works Part:XVI	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated. Relationship of Activities to the	e Accomp		pt Purpos	13 es	
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12 Subto 13 Total (See works Part:XVI	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated. Relationship of Activities to the	e Accomp		pt Purpos	13 es	
12 Subto 13 Total (See works Part:XVI	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated. Relationship of Activities to the	e Accomp		pt Purpos	13 es	
12 Subto 13 Total (See works Part:XVI	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated. Relationship of Activities to the	e Accomp		pt Purpos	13 es	
12 Subto 13 Total (See works Part:XVI	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated. Relationship of Activities to the	e Accomp		pt Purpos	13 es	
12 Subto 13 Total (See works Part:XVI	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated. Relationship of Activities to the	e Accomp		pt Purpos	13 es	
12 Subto 13 Total (See works Part:XVI	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated. Relationship of Activities to the	e Accomp		pt Purpos	13 es	
12 Subto 13 Total (See works Part:XVI	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated. Relationship of Activities to the	e Accomp		pt Purpos	13 es	
12 Subto 13 Total (See works Part;XVI	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated. Relationship of Activities to the	e Accomp		pt Purpos	13 es	
12 Subto 13 Total (See works Part:XVI	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated. Relationship of Activities to the	e Accomp		pt Purpos	13 es	36,505.
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12 Subto 13 Total (See works Part;XVI	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated. Relationship of Activities to the	e Accomp		pt Purpos	13 es	

No

Yes

	· · · · / · · · · · · · · · · · · · · ·	1 001.21111101.		
Part XVII	Information Regarding	Transfers To and	Transactions and Relationships V	Vith Noncharitable
	Exempt Organizations			

1 D	ıd the or	ganization directly	or indirectly en	ngage in any	of the following	ng with any ot	her organizatio	n_	*	Yes	No
d€	escribed	in section 501(c) o political organizat	of the Code (oth	her than sect	ion 501(c)(3)	organizations) or in section 5	527,	ļ _v -	-	- 1
		from the reporting		a noncharitat	ole exempt or	ganization of			4.	,	
) Cash					-			1 a (1)		Х
(2) Other	assets							1 a (2)		X
b O	ther trai	nsactions		•							
(1) Sales	of assets to a non	charitable exer	mpt organizat	tion			•	1 b (1)	-	X
(2	Purch	nases of assets from	m a noncharitat	ble exempt o	rganızatıon				1 b (2)		X
(3	B) Renta	al of facilities, equip	oment, or other	assets					1 b (3)		_X
(4) Reim	bursement arrange	ments						1 b (4)		_X
•	•	s or loan guarantee							1 b (5)		X
•	•	rmance of services		•	-				1 b (6)		<u>X</u>
c S	haring c	of facilities, equipm	ent, mailing list	ts, other asse	ets, or paid en	npioyees.			1 c		<u>X</u>
d If th a	the ans ne goods ny trans	wer to any of the a , other assets, or sel action or sharing a	above is 'Yes,' orvices given by the rangement, sh	complete the he reporting fo now in columi	following schoundation. If the name of the contraction of the value of the contraction of	edule. Columi e foundation re e of the goods	n (b) should alw eceived less than s, other assets,	vays show the fair in fair market value in or services receive	market val ed.	ue of	
(a) Line	e no	(b) Amount involved	(c) Name of	f noncharitable e	exempt organization	on (d)	Description of tran	sfers, transactions, and	sharing arrai	ngement	s
N/A											
~		·									<u>_</u>
			<u> </u>								
		•	<u> </u>								
											
			-								
			 				 	· · · · · · · · · · · · · · · · · · ·			
											
			 								
		·									
d	lescribe	ndation directly or in d in section 501(c) complete the follow	of the Code (of	d with, or relat ther than sec	ted to, one or nation 501(c)(3)	nore tax-exemp) or in section	. 527? .		Yes	X	No
	(a)	Name of organizat	ion	(b) T	ype of organi	zation	(0) Description of rel	ationship		
<u>N/A</u>		· · · · · · · · · · · · · · · · · · ·									
-							 				
			· · · · · · · · · · · · · · · · · · ·	· 			 				
				··· - -	··		 				
	Under pe	enalties of perjury, I decla	are that I have exam	ined this return, i	including accompa	nying schedules a	nd statements, and t	o the best of my knowled	ge and belief,	ıt ıs true	
Sign	correct,	and complete Declaration	n of preparer (other	than taxpayer) is	based on all infor	mation of which pi	reparer has any knov	vledge			
Here	Signal	ture of officer or profice	Mai	De	9/8	/16	ThusTR	u	May the this return preparer (see insti	n with th shown b	e elow ?
		Print/Type preparer's na	ame	Prepai	er's signature	<u> </u>	Date /	Check If	PTIN	162	No
מי: ב		E. Chris Go		1 2	Chris Goo	ode, CPA	8/25/	self-employed	P00952	536	
Paid	2222		Pulliam &					1	419604	.550	
Prepa			7235 W. En				····	02-0	-1170U4		
Use (Jilly	_		83704-86		TCE A		Phone no (208	3) 322-	3525	
BAA		1 4	JU130, 1D	00104 00				1200	Form 99		2015)
_,									. 5.711 55	(,

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.

Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Name of the organization		Employer identification number
HARAD FAMILY FOUNDATION		27-6366249
Organization type (check one)		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treate	ed as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as	s a private foundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the General	al Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (10) org	ganization can check boxes for both the General Rule	and a Special Rule. See instructions
General Rule		·
	Z, or 990-PF that received, during the year, contribution to Parts I and II. See instructions for determining a contribution of the contribution o	ons totaling \$5,000 or more (in money or
property) from any one contributor. Compl	ete Parts I and II. See instructions for determining a c	contributor's total contributions.
Special Rules		
For an organization described in section 5	01(c)(3) filing Form 990 or 990-EZ that met the 33-1/3, that checked Schedule A (Form 990 or 990-EZ), Part II, I	% support test of the regulations
received from any one contributor, during	the year, total contributions of the greater of (1) \$5,00 90-EZ, line 1 Complete Parts I and II	00 or (2) 2% of the amount on (i)
Form 990, Part VIII, line 1h, or (ii) Form 99	90-EZ, line 1 Complete Parts I and II	
For an organization described in section 5	01(c)(7), (8), or (10) filing Form 990 or 990-EZ that re-	ceived from any one contributor.
during the year, total contributions of more	01(c)(7), (8), or (10) filing Form 990 or 990-EZ that ree than \$1,000 exclusively for religious, charitable, screto children or animals. Complete Parts I, II, and III.	ntific, literary, or educational
purposes, or for the prevention of cruenty t	to children of animals. Complete Faits 1, 11, and 111.	
Ter on example then described in section 6	.01(c)(7), (8), or (10) filing Form 990 or 990-EZ that re	could from any one contributor
during the year, contributions exclusively f	for religious, charitable, etc., purposes, but no such co	ontributions totaled more than
\$1,000 If this box is checked, enter here to	the total contributions that were received during the ye	ear for an <i>exclusively</i> religious,
	any of the parts unless the General Rule applies to tlable, etc., contributions totaling \$5,000 or more during	
it received <i>nonexclusivery</i> religious, chante	able, etc., contributions totaling \$5,000 or more during	the year
Caution. An organization that is not covered b	by the General Rule and/or the Special Rules does not line 2, of its Form 990, or check the box on line H of it	file Schedule B (Form 990, 990-EZ, or
990-PF), but it must answer 'No' on Part IV, line 2 to certify that it does not meet to	ine 2, of its Form 990, or check the box on line H of it he filing requirements of Schedule B (Form 990, 990-E	s Form 990-EZ or on its Form 990-PF, FZ or 990-PF)
BAA For Paperwork Reduction Act Notice, see the Inst		dule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of orga		1 -	er identification number
	FAMILY FOUNDATION		366249
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space	is needed	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	George J. & Beverly M. Harad 3675 W. Quail Heights Ct.	\$425,221.	Person Payroll Noncash
	Boise, ID 83703	1	(Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	Beverly M. Harad 3675 W. Quail Heights Ct. Boise, ID 83703	\$12,500.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	George J. Harad 3675 W. Quail Heights Ct. Boise, ID 83703	\$12,500.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$\$	Person Payroll Complete Part II for noncash contributions)

1 of Part I

Page

1 of

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

1

of Part II

Name of organization

HARAD FAMILY FOUNDATION

27-6366249

Employer identification number

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional s	pace is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	400,000 Sh Bank of America Bonds	\$425,221.	
(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	nedule B (Form 990, 990-F)	7 or 990 PE) (2015)

Page

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

2015	Federal Statements	Page 1
Client 13805	HARAD FAMILY FOUNDATION	27-6366249
9/08/16		09 40AM
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees		
Accoutning & Tax Prepara	(a) (b) Net (c) Expenses Investment Adjusted Net Income Ation Total \$ 985. \$ 485. \$ 485.	(d) Charitable Purposes \$ 500. \$ 500.
Statement 2 Form 990-PF, Part I, Line 18 Taxes		
Excise Tax	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 120. Total \$ 120. \$ 0.	(d) Charitable Purposes \$ 0.
Statement 3 Form 990-PF, Part I, Line 23 Other Expenses Investment Expenses	(a) (b) Net (c) Expenses Investment Adjusted Net Income \$ 174. \$ 174. Total \$ 174. \$ 174.	(d) Charitable Purposes \$ 0.
Statement 4 Form 990-PF, Part II, Line 7 Other Notes and Loans Recei Notes and Loans Reporte Borrower's Name:	Fair Market	Doubtful Accounts Allowance
Borrower's Title: Date of Note: Maturity Date: Repayment Terms: Interest Rate: Security Provided: Purpose of Loan: Borrower Relationship: Consideration: Consideration FMV: Original Amount: Balance Due: Doubtful Acct. Allow.:	501(c)(3) Org 9/25/2015 9/25/2016 0.43% Assist in purchasing land GRANTEE \$ 16,000. \$ 16,000. \$ 16,000.	\$ 0.

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2015	Federal Statements	Page 2
Client 13805	HARAD FAMILY FOUNDATION	27-6366249
9/08/16 Statement 4 (continued) Form 990-PF, Part II, Line 7 Other Notes and Loans Receivable		09 40AM
	Total \$ 16,000. \$ 16,000.	
	Allowance for Doubtful Accounts Net Other Notes/Loans Rec Book Value	
Statement 5 Form 990-PF, Part II, Line 10b Investments - Corporate Stocks		
Corporate Stocks	Valuation Book <u>Method</u> Value	Fair Market Value
5,000 Sh BAIDU 4,200 Sh Apple, Inc. 2,650 Sh SPDR DIA	Cost \$ 205,892. Cost 287,386. Cost 428,982. Total \$ 922,260.	442,092. 461,073.
Statement 6 Form 990-PF, Part II, Line 10c Investments - Corporate Bonds		
Corporate Bonds	Valuation Book <u>Method</u> Value	Fair Market Value
400,000 Sh BOA Bonds	Cost $\frac{$}{$}$ $\frac{425,221}{425,221}$	\$ 415,851. \$ 415,851.
Statement 7 Form 990-PF, Part II, Line 13 Investments - Other		
	Valuation Book <u>Method</u> Value	Fair Market Value
Other Publicly Traded Securit	ies	
3,425 Sh IShares MSCI	Cost \$ 141,281.	\$ 131,486.
	Total \$ 141,281.	\$ 131,486.
Statement 8 Form 990-PF, Part VI, Penalty and In Balance Due	terest	
Tax Due Late Payment Penalty		\$ 343. 7.

2015	Federal Stat	Page 3		
Client 13805	HARAD FAMILY FO	27-6366249		
9/08/16				09 40AM
Statement 8 (continued) Form 990-PF, Part VI, Penalty and In Balance Due	terest			
Late Interest			Total \$	3. 353.
Statement 9 Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
Boise Public Schools Foundation 8169 West Victory Road Boise ID 83709	None	Pub. Char	General Support	\$ 25,500.
Boise Art Museum 670 Julia Davis Drive Boise ID 83702	None	PC	Anna Fidler Exhibit	13,200.
Idaho Non-Profit Center 5440 W Franklin Road, Suite 202 Boise ID 83705	None	PC	Idaho Gives Day	10,000.
Learning Lab 308 East 36th Street Boise ID 83714	None	Pub. Char	General Support	5,000.
Discovery Center of Idaho 131 W Myrtle St Boise ID 83702	None	PC	Geneal Support	5,900.
Boys & Girls Club of Ada County 610 E 42nd St Garden City ID 83714	None	PC	General Support	14,400.
Idaho Shakespeare Festival PO Box 9365 Boise ID 83707	None	PC	General Support	16,000.
Julia Davis Park Fund at	None	PC	General support	4,000.
ICF 210 W State Street Boise ID 83702				
St Luke's Health Foundation 190 E Bannock Street Boise ID 83712	None	PC	General support	10,000.
			Tota	1 \$ 104,000.

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2015	Federal Worksheets		Page 1
Client 13805	HARAD FAMILY FOUNDATION		27-6366249
9/08/16			09 40AN
Late Payment Penalty (For	m 990-PF)		
Tax due 4 month(s) late x 0.0 Late payment penalty	005 (0.250 max)	<u>x</u>	343. .020 7.
Interest on Late Filing (Fo	rm 990-PF)		
Tax due Late filing penalty Total amount subject	to interest	343. 0. 343.	
5/16/16 - 6/30/16 (Amount subject to inf Rate factor Interest	45 days @ 3%) terest	343.00 x .003695184	1.27
7/01/16 - 9/15/16 ('Compounded amount Rate factor Interest	77 days @ 3%)	344.27 x .006331174	2.18
Total Interest on La	te Filing (rounded)	=	3.