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# Form 990-PF

EXTENDED TO NOVEMBER 15, 20 Return of Private Foundation 2016

or Section 4947(a)(1) Trust Treated as Private Foundation nay be made public. t www.irs.gov/form990pf.

epartment of the Treasury	Do not enter social security numbers on this form as it m
ternal Revenue Service	▶ Information about Form 990-PF and its separate instructions is at

OMB No 1545-0052

Ē	or c	alen	dar year 2015 or tax year beginning MA	R 9, 2015	, and	ending	DEC 31, 2015	
-			foundation	<u> </u>			A Employer identification	number
	В.	AT.	ES FAMILY FOUNDATION,	INC.			47-4005922	,
	Num	ber a	nd street (or P O box number if mail is not delivered to stre	et address)		Room/suite	<b>B</b> Telephone number	
_	_7	<u>77</u>	W. MAIN ST. STE 900				208-433-12	00
-	_		own, state or province, country, and ZIP or foreign $\mathtt{SE}$ , $\mathtt{ID}$ 83702	postal code			C If exemption application is p	ending, check here
Ō			all that apply: X Initial return	=	of a former public	charity	D 1 Foreign organizations	, check here
			Final return	Amended re			2 Foreign organizations me check here and attach co	eting the 85% test,
-	<u> </u>	hack	type of organization: X Section 501(c)(3)	Name chan	<u></u>		]	
'	<u>ה</u>	_	ction 4947(a)(1) nonexempt charitable trust	Other taxable private			E If private foundation state under section 507(b)(1)	
ī	Fa			nting method:		crual	F If the foundation is in a	• •
•			Part II, col. (c), line 16)	Other (specify)			under section 507(b)(1)	
<u>n</u>	<b>&gt;</b>		155,937. (Part I, co	lumn (d) must be on	cash basis)			
SCANNED	Pa	rt I	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	(a) Revenue an expenses per bo		investment come	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
$\bar{z}$		1	Contributions, gifts, grants, etc., received	357,2	44.			
Ö		2	Check In the foundation is not required to attach Sch B					
0C7		4	Dividends and interest from securities	2,4	31.	2,431.		STATEMENT 1
		5a	Gross rents					
<b>=</b>		b	Net rental income or (loss)					
ဖေ	a	6a	Net gain or (loss) from sale of assets not on line 10	4,4	56.			
2016	evenue	b	Gross sales price for all assets on line 6a 4,456.			4 456		
وص	Re	-	Capital gain net income (from Part IV, line 2)			4,456.	-	
		8	Net short-term capital gain Income modifications		<del></del>			111
		9 10a	Gross sales less returns and allowances					
			Less Cost of goods sold					
			Gross profit or (loss)					
		11	Other income					
_		12	Total Add lines 1 through 11	364,1		6,887.	0.	
		13	Compensation of officers, directors, trustees, etc		0.	0.	0.	0.
		14	Other employee salaries and wages					
	S		Pension plans, employee benefits  Legal fees STMT 2	24,9	46.	0.	0.	24,946.
	ens		Accounting fees STMT 3	$\frac{24,5}{2,4}$		0.		2,450.
	ă		Other professional fees				_	
	ve		Interest					
	Operating and Administrative Expense	18	Taxes				ECEIVED	1
	SiLI	19	Depreciation and depletion			- <del>                                    </del>	<u>-</u>	<u></u>
	眶		Occupancy			4005	SEP 2 6 2016	
	ΑÞ	21	Travel, conferences, and meetings				1 2 2010 C	
	gar	22 23	Printing and publications Other expenses STMT 4	8	64.	140	GDEN UT O.	850.
	atiu		Total operating and administrative					
	ber		expenses Add lines 13 through 23	28,2	60.	14.	0.	28,246.
	Õ	25	Contributions, gifts, grants paid	171,0	00.			171,000.
		26	Total expenses and disbursements					100 015
			Add lines 24 and 25	199,2	60.	14.	0.	199,246.
		l	Subtract line 26 from line 12:	164,8	71			
		l .	Net investment income (if negative, enter -0-)	104,0	· / ± •	6,873.	-	
		l	Adjusted net income (if negative, enter -0-)			<u> </u>	0.	
	5235	01	LHA For Panerwork Reduction Act Notice, s	e instructions				Form <b>990-PF</b> (2015)

<u>For</u>	m 99	0-PF (2015) BATES FAMILY FOUNDATION,			4005922 Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		36,449.	36,449.
	1	Savings and temporary cash investments			
	3	Accounts receivable ►			
	İ	Less: allowance for doubtful accounts			<del></del>
	4	Pledges receivable ►			
		Less allowance for doubtful accounts ▶			
	1	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
		Less: allowance for doubtful accounts			
şţ	8	Inventories for sale or use			
Assets	1	Prepaid expenses and deferred charges			- <del></del>
∢	10a	Investments - U.S and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds STMT 5	0.	39,338.	38,650.
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other STMT 6	0.	89,084.	80,838.
	14	Land, buildings, and equipment: basis ▶			
		Less accumulated depreciation			· · · · · · · · · · · · · · · · · · ·
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	0.	164,871.	<u> 155,937.</u>
	17	Accounts payable and accrued expenses			
	18	Grants payable		- <u>-</u>	
S	19	Deferred revenue			
Liabilities	20	Loans from officers, directors trustees, and other disqualified persons			
qp	21	Mortgages and other notes payable			
J	22	Other liabilities (describe )			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
	ŀ	Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26 and lines 30 and 31			
Ces	24	Unrestricted			
lan	25	Temporarily restricted			
89	26	Permanently restricted			
or Fund Balances	1	Foundations that do not follow SFAS 117, check here			
Ę		and complete lines 27 through 31			
8	27	Capital stock, trust principal, or current funds	0.	0.	
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
As	29	Retained earnings, accumulated income, endowment, or other funds	0.	164,871.	
Šet	30	Total net assets or fund balances	0.	164,871.	
	-		:		
	31	Total liabilities and net assets/fund balances	0.	164,871.	
	art	III Analysis of Changes in Net Assets or Fund Ba	alances		
	art	, and you or one ago an account of the control of t			
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
	•	st agree with end-of-year figure reported on prior year's return)		1	0.
2	Ente	r amount from Part I, line 27a		2	164,871.
3		r increases not included in line 2 (itemize)		3	0.
4		lines 1, 2, and 3		4	164,871.
5		eases not included in line 2 (itemize)	· · · · · · · · · · · · · · · · · · ·	5	0.
<u>6</u>	T <u>o</u> ta	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	164,871.
					Form <b>990-PF</b> (2015)

	ES FAMILY FOUND					47-400	5922 Page 3
Part IV Capital Gains	and Losses for Tax on I	nvestment	Income				
(a) List and desc 2-story brick wa	ribe the kind(s) of property sold (e. arehouse; or common stock, 200 sl	.g., real estate, hs. MLC Co.)		( <b>b)</b> How a P - Puro D - Dor	cquired chase lation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr)
1a CAPITAL GAINS	DIVIDENDS						
b							
C				 <del> </del>			
<u>d</u>	<del></del>			-			
<u>e</u>	(f) Depression allowed	T (=) Coo	ut or other bose	1	l	(h) Com or (loog)	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale			(h) Gain or (loss) (e) plus (f) minus (	
a 4,456.	<u> </u>						4,456.
b							-/
C							
d					•		· <del>-</del>
e							
Complete only for assets shown	ng gain in column (h) and owned by					(I) Gains (Col. (h) gain	
(ı) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col (j), if any		CC	bl. (k), but not less that Losses (from col. (	
a							4,456.
<u>b</u>							
					·		
<u>d</u>							
<u>e</u>					T		
2 Capital gain net income or (net ca	apital loss) $ \begin{cases} & \text{if gain, also ent} \\ & \text{if (loss), enter} \end{cases} $	ter in Part I, line -0- in Part I, line	7 7	} 2			4,456.
3 Net short-term capital gain or (lo		and (6):					
If gain, also enter in Part I, line 8,						NT / B	
If (loss), enter -0- in Part I, line 8  Part V Qualification U	Inder Section 4940(e) fo	or Reduced	Tax on Net	l Investi	nent In	N/A	
(For optional use by domestic privat		-				000	N/A
(i or optional use by domestic privat	e roundations subject to the section	11 4340(a) (ax 011	THE WOSTING II	11001110.7			21,7 21
If section 4940(d)(2) applies, leave t	his part blank.						
Was the foundation liable for the sec	ction 4942 tax on the distributable a	amount of any ye	ear in the base pe	riod?			Yes No
If "Yes," the foundation does not qua							
	each column for each year; see the	instructions be	fore making any e	entries.			(4)
(a) Base period years	(b) Adjusted qualifying d	hetributions	Net value of no	(C)	Luca accat	Distrib	(d) oution ratio
Calendar year (or tax year beginn	ing in) Adjusted qualifying d	IIST IDUTIONS	Net value of the	Jiidiailabit	. 036 83361	(coi. (b) div	ided by col. (c))
2014 2013							
2012							
2011							
2010							
2 Total of line 1, column (d)						2	
3 Average distribution ratio for the	•	al on line 2 by 5,	or by the numbe	r of years			
the foundation has been in existe	ence if less than 5 years					3	
4 Enter the net value of noncharita	blo-use assets for 2015 from Part \	Y line 5				4	
4 Enter the net value of nonchanta	Die-use assets for 2013 hottir art	Λ, ιιιίο υ				-	
5 Multiply line 4 by line 3						5	
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)					6	
7 Add lines 5 and 6						7	
	on Clark VIII. Iron 4						<del></del>
8 Enter qualifying distributions fro			-1-4-45-7		4.	8	<del></del>
If line 8 is equal to or greater that See the Part VI instructions.	in line 7, check the box in Part VI, li	rie 10, and com	piete that part usi	ng a 1% tax	raie.		
523521 11-24-15							orm <b>990-PF</b> (2015)

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	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see i	nstru	CTIO	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.					
	Date of ruling or determination letter. (attach copy of letter if necessary-see instructions)				_	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here   and enter 1%	1_	<del>                                     </del>			<u>37.</u>
	of Part I, line 27b					
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)		1			^
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	+			<u>0.</u>
3	Add lines 1 and 2	3_			<u>_</u>	<u>37.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	+		- 1	0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5	+			<u>37.</u>
6	Credits/Payments:					
	2015 estimated tax payments and 2014 overpayment credited to 2015  6a	-				
	Exempt foreign organizations - tax withheld at source  Tax paid with application for extension of time to file (Form 8868)  6c  137	$\dashv$				
		•				
	Backup withholding erroneously withheld 6d	┥,			1	37.
_	Total credits and payments. Add lines 6a through 6d	7	<del></del>			<u> </u>
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached	8	+	<del></del>		0.
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	10	+			<u> </u>
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  Enter the amount of line 10 to be: Credited to 2016 estimated tax	11	+			
	Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ Refunded ▶  art 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 intervei	ne in			Yes	No
ıa	any political campaign?			1a		X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition	n)?		1b		X
Ü	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publis.					
	distributed by the foundation in connection with the activities					
c	Did the foundation file Form 1120-POL for this year?			1c		Х
	I 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.	•				
ε	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
	managers ▶ \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
	If "Yes," attach a detailed description of the activities					
3	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		_X_
48	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		_X_
t	olf "Yes," has it filed a tax return on Form 990-T for this year?	1	A\N	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		<u>X</u>
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or					
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state of the state	ite law				
	remain in the governing instrument?			6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part 2	(V		7	X	
88	Enter the states to which the foundation reports or with which it is registered (see instructions)	-				
	ID					
١	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)			0.	v	
_	of each state as required by General Instruction G? If "No," attach explanation	Jandar		8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calculations are 2015 or the toyoble year harmonic in 2015 (see particulations for Part XIV/2 if "You " complete Part XIV/2	nenuar		9		Х
40	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV  Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	STM	r 7	10	X	
10	DID ATTY PELSONIS DECORDED SUBSTRICTION OF THE HOLD SUBSTRICTION OF THE	<u>. 11</u>	<del>*</del>	10		

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Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be F	Required (continu	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire	ectly,		
any voter registration drive?		Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
4945(d)(4)(A)? (see instructions)		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or	for		
the prevention of cruelty to children or animals?		Ye	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	ın Regulations		
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	ere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	om the tax because it mainta	ıned		
expenditure responsibility for the grant?			s 🗀 No	
If "Yes," attach the statement required by Regulations section 53 4945	5-5(d)			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	, , ,	☐ Ye	s X No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870				-
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	☐ Ye	s X No	
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attribu				7b
Part VIII Information About Officers, Directors, Trust		nagers. Highly		
Paid Employees, and Contractors			•	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
			·	
SEE STATEMENT 8		0.	0.	0.
	İ			
	-			
	-			
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."		
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE	dovoted to position		compensason	4,1017411000
1401415	-			
	-			
		<del> </del>		
	-	1		
		<del></del>		
***************************************	-			
	-			
Total number of other employees paid over \$50,000	<u> </u>			

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Part VIII Information About Officers, Directors, Trustees, Foundation Ma Paid Employees, and Contractors (continued)	anagers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE.	u	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	-	
	<del></del>	
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical inform number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	lation such as the	Expenses
1 N/A		
2		
<u></u>		
3		
4		
Dort IV B O		
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and	12.	Amount
1 N/A		
2		
All other everyone related proceedings. Con instructions		
All other program-related investments. See instructions.  3		
v		
Total. Add lines 1 through 3	<b>&gt;</b>	0.
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Pa	Minimum Investment Return (All domestic foundations must comple	te this part. Foreign found	dations, se	ee instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purpos	ses.		
	Average monthly fair market value of securities		1a	39,563.
	Average of monthly cash balances		1b	15,843.
	Fair market value of all other assets	Ĺ	10	
d	Total (add lines 1a, b, and c)		1d	55,406.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	55,406.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instruction	ons)	4	83 <u>1</u> .
	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line		5	54,575.
6	Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TA	X PERIOD	6	2,228.
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) priva foreign organizations check here and do not complete this part.)		l certain	
1	Minimum investment return from Part X, line 6		1	2,228.
2a	Tax on investment income for 2015 from Part VI, line 5	137.		
	Income tax for 2015. (This does not include the tax from Part VI)			
	Add lines 2a and 2b	_	2c	137.
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	2,091.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	2,091.
6	Deduction from distributable amount (see instructions)		6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1		7	2,091.
Pa	Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		10	199,246.
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	-	1a	199,240.
	Program-related investments - total from Part IX-B	h	2	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purp	oses		···
3	Amounts set aside for specific charitable projects that satisfy the:		.	
	Suitability test (prior IRS approval required)	-	3a	
	Cash distribution test (attach the required schedule)	4		199,246.
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, II	ne 4	4	133,440.
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	L	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	I	6	199,246.

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4940(e) reduction of tax in those years

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

	(a) Corpus	(b) Years prior to 2014	(c) 2014	( <b>d)</b> 2015
1 Distributable amount for 2015 from Part XI,				
line 7				2,091.
2 Undistributed income, if any, as of the end of 2015				-
a Enter amount for 2014 only			0.	
<b>b</b> Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2015				
<b>a</b> From 2010				
<b>b</b> From 2011				
<b>c</b> From 2012				
<b>d</b> From 2013				
e From 2014	0	}		
f Total of lines 3a through e	0.	······································		
4 Qualifying distributions for 2015 from Part XII, line 4: ▶ \$ 199, 246.				
· ————————————————————————————————————			0.	
<b>a</b> Applied to 2014, but not more than line 2a <b>b</b> Applied to undistributed income of prior			0.	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		<u></u>		-
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				2,091.
e Remaining amount distributed out of corpus	197,155.			
5 Excess distributions carryover applied to 2015	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a) )				
6 Enter the net total of each column as indicated below:	105 155			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	197,155.		1	
b Prior years' undistributed income. Subtract		0.		
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.		
d Subtract line 6c from line 6b. Taxable				·
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must		Tis		
be distributed in 2016				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	0			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016				
Subtract lines 7 and 8 from line 6a	197,155.			
10 Analysis of line 9:	131,11331			
a Excess from 2011				
b Excess from 2012				
c Excess from 2013				
d Excess from 2014				
e Excess from 2015 197, 155.	_ <del></del>	<u> </u>		Form 990-PE (2015)

Part XIV Private Operating For	OUNDAMILY FOUND.			N/A	-4005922 Page 10
1 a If the foundation has received a ruling of			171, 4800110110)	N/A	<del></del>
foundation, and the ruling is effective for					
<b>b</b> Check box to indicate whether the found	•	•	in section	4942(J)(3) or	4942(J)(5)
2 a Enter the lesser of the adjusted net	Tax year	g louridation described	Prior 3 years	1 4042(J/(U) UI L	1042())(0)
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for	(2)	ν-,	(-, -	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(1,711111111111111111111111111111111111
each year listed					
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not			<u> </u>	· · <del>  · · · · · · · · · · · · · · · · ·</del>	
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					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
<b>b</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					
(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	1			1 45 000	
Part XV Supplementary Info			if the foundatio	n had \$5,000 o	r more in assets
at any time during t		uctions.)			<del></del>
1 Information Regarding Foundation	_				L l
a List any managers of the foundation wh year (but only if they have contributed r	io nave contributed more nore than \$5 000) (See s	tnan 2% of the total cor ection 507(d)(2),)	tributions received by tr	ie touridation defore t	ne close of any tax
	11010 111111 40,000): (000 0	000000000000000000000000000000000000000			
SEE STATEMENT 9  b List any managers of the foundation wh	o own 109/ or more of th	us stock of a corporation	/or an aqually large por	tion of the ownerchin	of a partnership or
other entity) of which the foundation ha			(or an equally large por	tion of the ownership	of a partificiantly of
NONE	J				
2 Information Regarding Contribut	ion Grant Gift Loan	Scholarship etc. F	rograms:		· · · · · · · · · · · · · · · · · · ·
Check here <b>X</b> If the foundation of				not accept unsolicite	d requests for funds. If
the foundation makes gifts, grants, etc.					
a The name, address, and telephone num					
		, app			
<b>b</b> The form in which applications should	be submitted and informa	tion and materials they	should include;		
c Any submission deadlines.					
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields	s, kınds of ınstitutions, o	r other factors:	
523601 11-24-15					Form <b>990-PF</b> (2015)

BATES FAMILY FOUNDATION, INC.

NONE

If recipient is an individual,

show any relationship to

any foundation manager

or substantial contributor

Foundation status of

recipient

PC

Supplementary Information (continued)

Recipient

Name and address (home or business)

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

**▶** 3b

Total

Form 990-PF (2015)

a Paid during the year

LATTER-DAY SAINTS

THE CHURCH OF JESUS CHRIST OF

50 E NORTH TEMPLE ST FL 15

SALT LAKE CITY , UT 84150

Part XV

101111 000 11 (2010)		1 OUNDITIES.	.,
Part XVI-A	Analysis of Income-Pro	oducing Activition	es
Enter gross amounts un	less otherwise indicated	Unrelated	business ir
Emor grood amounts an	ioos cirioi wiso indicatou.	(2)	

	Uprolated	business income	- Evaluated by	section 512, 513, or 514	
Enter gross amounts unless otherwise indicated.	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	74110011	TEMOCION MODINE
ab	<del>   </del>		<del>                                     </del>		····
· · · · · · · · · · · · · · · · · · ·			<del>      -</del>	-	
	I I	<del></del> -			··· <u>-</u>
e					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	2,431.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					· · · · · · · · · · · · · · · · · · ·
6 Net rental income or (loss) from personal					
property					
7 Other investment income	-				
8 Gain or (loss) from sales of assets other			1 4	1 156	
than inventory			14	4,456.	
Net income or (loss) from special events     Gross profit or (loss) from sales of inventory	<del></del>	-			
11 Other revenue:			<del></del>		· .
a b					***
c	1				
d	T I				
e					
12 Subtotal. Add columns (b), (d), and (e)		(	0.	6,887.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	6,887.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accor	nplishment of	Exempt Pu	ırposes	
Line No. Explain below how each activity for which income the foundation's exempt purposes (other than				importantly to the accom-	plishment of
the realisation a exempt purposes (exist that	. sy promeing terms	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		<del></del>		-	
				<u></u> -	
					<u></u>
			-		
	<u>.</u>				
					<del></del>
	<del></del>	<del></del>			<del>- 12</del>
			<del>-</del>		
				<del>-</del>	<u> </u>
					<del></del>
	<del></del>			****	
					<del></del>

			DATION, INC.		05922	<u>Pa</u>	ge 13
Part X	VII Information Re Exempt Organ		s To and Transactions ar	nd Relationships With Nonc	haritable		
1 Did t	he organization directly or indir	ectly engage in any of the	following with any other organization	described in section 501(c) of		Yes	No
		• • • •	ction 527, relating to political organiz				
	sfers from the reporting founda						
(1)	·		. •		1a(1)		X
, ,	Other assets				1a(2)	`	Х
, ,	r transactions:						
(1)	Sales of assets to a noncharital	ole exempt organization			16(1)		Х
	Purchases of assets from a nor		ation		1b(2)		X
	Rental of facilities, equipment,	· -			1b(3)		Х
	Reimbursement arrangements				1b(4)		X
	Loans or loan guarantees				1b(5)	T	X
	Performance of services or me	mbership or fundraising so	olicitations		1b(6)	ľ	X
• •	ing of facilities, equipment, ma				1c	1	X
		-		ays show the fair market value of the good		ts.	
	` <del>'</del>	·		e in any transaction or sharing arrangemer		·	
	mn (d) the value of the goods,						
(a) Line no	(b) Amount involved		naritable exempt organization	(d) Description of transfers, transactions, a	and sharing arra	ngemer	nts
		N	1/A				
	<u> </u>						
						20.00	
		1					
	e foundation directly or indirection 501(c) of the Code (othe		to, one or more tax-exempt organiz	ations described	Yes	x	] No
	es," complete the following sch		1 117 50511017 527		100		,
	(a) Name of org		(b) Type of organization	(c) Description of relation	onship		
	N/A		1, 2		· ·		
	<del></del>						
	Under penalties of perjury, I declare	that I have examined this return	n, including accompanying schedules and s	statements, and to the best of my knowledge	May the IRS di	ecuee ti	bie
Sign Here	and belief, it is true, correct, and cor	mplete Doctoration of preparer	(other than taxpayer) is based on all information		return with the shown below (s	prepare	er
	Signature of officer or trustee	()	7 160922 Date	Title	163		1110
	Print/Type preparer's na			Date Check If PT	IN		
	MICHAEL R.		ind la hale	self- employed			
Paid	LINDSTROM	MIT	CHAEL R. LINDST	' '	012697	764	
Prepa		E BAILLY LL		Firm's EIN ▶ 45-			
Use C	1 11 11 11 11 11 11 11 11 11 11 11 11 1		-	1,111,05,111,0			
	Firm's address ▶ 87	7 W. MAIN ST	r. STE. 800				
		OISE, ID 837		Phone no. 208-	344-71	L50	
		<u> </u>	<del></del>			<del></del>	

### 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, or 990-PF) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047

2015

Name of the organization

**Employer identification number** 

Organization type (check of	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 private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
General Rule  X For an organizatio	)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ri on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling y one contributor. Complete Parts I and II. See instructions for determining a contributor	g \$5,000 or more (in money or
Special Rules		
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a or, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount, line 1 Complete Parts I and II	, or 16b, and that received from
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990·EZ that received from utions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educately to children or animals. Complete Parts I, II, and III	
year, contribution is checked, enter purpose Do not c	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from as exclusively for religious, charitable, etc., purposes, but no such contributions totaled in here the total contributions that were received during the year for an exclusively religious complete any of the parts unless the <b>General Rule</b> applies to this organization because site, etc., contributions totaling \$5,000 or more during the year	nore than \$1,000 If this box s, charitable, etc ,
but it must answer "No" or	that is not covered by the General Rule and/or the Special Rules does not file Schedule in Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Feet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	

Name of organization

Employer identification number

### BATES FAMILY FOUNDATION, INC.

47-4005922

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

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DOUGLAS & BROOKE BATES  4333 E WILD HORSE  BOISE, ID 83712	\$ 274,794.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	DOUGLAS & BROOKE BATES  4333 E WILD HORSE  BOISE, ID 83712	\$ 82,350.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part If for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions )

Employer identification number

### BATES FAMILY FOUNDATION, INC.

47-4005922

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if	additional space is needed.	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	1,422.034 SHARES OF JANUS INVESTMENT FUND GLOBAL LIFE SCIENCES FD	\$82,350.	09/04/15
(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
		.   \$	90, 990-EZ, or 990-PF) (2015

Employer identification number

BATES Part III	FAMILY FOUNDATION, INC. Exclusively religious, charitable, etc., contri	butions to organizations described in s	section 501(c)(7), (8), or (1	47-4005922 0) that total more than \$1,000 for				
	the year from any one contributor. Complete concompleting Part III, enter the total of exclusively religious	olumns (a) through (e) and the following , charitable, etc , contributions of \$1,000 or less	O line entry For organizations					
(a) No.	Use duplicate copies of Part III if additiona							
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
				<u>-</u>				
			_	<del></del>				
			_					
		(e) Transfer of gift						
	Transferee's name, address, an	d <b>7</b> ID : <i>A</i>	Relationship of trans	forer to transferee				
	Transferee's flame, address, an	U ZIF + 4	nelationship of trails	ieror to transferee				
(a) No.			405					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descri	otion of how gift is held				
		1						
			_					
_								
		(e) Transfer of gift						
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee					
	<del></del>							
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Descri	ption of how gift is held				
Part I	(b) Furpose of gift		(0) 200011	Ston of now gire it its				
		(e) Transfer of gift						
		(e) Transier of gift						
_	Transferee's name, address, ar	d ZIP + 4	Relationship of trans	feror to transferee				
1								
			····					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Descri	ption of how gift is held				
Parti								
			_					
			_	<u></u>				
-		(e) Transfer of gift						
}	Transferee's name, address, ar	nd ZIP + 4	Relationship of trans	sferor to transferee				
}								
			<del></del>					

FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SECUR	ITIES ST	TATEMENT 1
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
JANUS INVESTMENT FUND US BANK	6,734 153		6. 2,278. 0. 153.		2,278. 153.
TO PART I, LINE 4	6,887	4,45	2,431.	2,431.	2,431.
FORM 990-PF		LEGAL	FEES	Si	CATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
LEGAL	<del></del>	24,946.	0.	0.	24,946.
TO FM 990-PF, PG 1,	LN 16A =	24,946.	0.	0.	24,946.
FORM 990-PF		ACCOUNTI	NG FEES	Si	PATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	<del></del>	2,450.	0.	0.	2,450.
TO FORM 990-PF, PG	1, LN 16B =	2,450.	0.	0.	2,450.
FORM 990-PF		OTHER EXPENSES		STATEMENT	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES MISCELLANEOUS	-	14. 850.		0.	0. 850.
TO FORM 990-PF, PG	1, LN 23	864.	14.	0.	850.
	=				

FORM 990-PF	CORPO	RATE BONDS		·-····	STATEMENT	5
DESCRIPTION			BOOK V	/ALUE	FAIR MARKE VALUE	т
AT&T INC. VERIZON CATERPILLAR CITIGROUP INC. JP MORGAN CHASE JOHN DEERE			-	3,034. 3,057. 3,043. 3,054. 3,306. 23,844.	3,0 3,0 3,0 3,0 3,1 23,4	19. 08. 26. 83.
TOTAL TO FORM 990-PF, PA	RT II, LINE 1	0C		39,338.	38,6	50.
FORM 990-PF	OTHER	INVESTMENTS			STATEMENT	6
DESCRIPTION		VALUATION METHOD	BOOK V	<b>VALUE</b>	FAIR MARKE	т
JANUS INVESTMENT FUND GLOSCIENCES	OBAL LIFE	FMV		39,084.	80,8	38.
TOTAL TO FORM 990-PF, PA	RT II, LINE 1	.3		89,084.	80,8	38.
FORM 990-PF LI	ST OF SUBSTAN PART VII-	TIAL CONTRIB	UTORS		STATEMENT	7
NAME OF CONTRIBUTOR	F	ADDRESS				
DOUGLAS & BROOKE BATES		H333 E WILDHO BOISE, ID 837		Ε		

FORM 990-PF	PART VIII - LIS TRUSTEES ANI	STATEMENT			
NAME AND ADDRESS		TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
DOUGLAS K. BATES 777 W. MAIN ST. ST BOISE, ID 83702	E 900	PRESIDENT/TREA	ASURER 0.	0.	0.
BROOKE B. BATES 777 W. MAIN ST. ST BOISE, ID 83702	E 900	VICE PRESIDENT 1.00	0.	0.	0.
MICHAEL R. LINDSTR 777 W. MAIN ST. ST BOISE, ID 83702	_	SECRETARY 1.00	0.	0.	0.
BRYNNE BATES HIGLE 777 W. MAIN ST. ST BOISE, ID 83702		ASSISTANT SECF	RETARY 0.	0.	0.
KATIE BATES 777 W. MAIN ST. ST BOISE, ID 83702	'E 900	ASSISTANT SECF	RETARY 0.	0.	0.
TOTALS INCLUDED ON	1 990-PF, PAGE (	6, PART VIII	0.	0.	0.
FORM 990-PF		r XV - Line 1A FOUNDATION MANAGE	ers	STATI	EMENT 9

NAME OF MANAGER

DOUGLAS K. BATES BROOKE B. BATES