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

OMB No 1545 0052 2015

Department of the Treasury Internal Pell-nue Service

SCANNED JUN 2 2 2017,

► 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

| For cal | endar year 2015, or tax year beginning | 1/01 , 2015 | , and ending $10/$ | | |
|-----------------------|--|--|-----------------------------|---|--|
| m | DECLY PARTY POINTAGEOU THE | | A | | mber |
| THE | PESKY FAMILY FOUNDATION, INC | • | B | 22-3008373 Telephone number (see ins | (tustione) |
| | B A HARRIS, LLP BROADWAY #314 | | - | 208-424-5177 | (ructions) |
| | E, ID 83706 | | <u> </u> | 200 121 5177 | |
| DOID. | 1, 12 03/00 | | C | If exemption application is | pending, check here 🕨 📘 |
| G Che | ck all that apply Initial return | Initial return of a form | ner public charity | 1 Foreign organizations, che | cluboro 🕨 🗍 |
| | Final return | Amended return | ا ا | r roreign organizations, the | rk liele |
| | Address change | | 2 Foreign organizations mee | | |
| H Che | ck type or organization X Section 50 | (c)(3) exempt private f | oundation | here and attach computation | on - |
| ſ | Section 4947(a)(1) nonexempt charitable to | | private foundation E | | s was terminated |
| 1 Fair | market value of all assets at end of year J Acc | counting method C | ash X Accrual | under section 507(b)(1)(A |), cneck here |
| | n Part II column (c) line 16) | Other (specify) | _F | If the foundation is in a 60 | nionth termination — |
| ≻ \$ | | . column (d) must be oi | cash basis) | under section 507(b)(1)(B | |
| Partil | 图 Analysis of Revenue and | (a) Revenue and | (b) Net investment | (c) Adjusted net | (d) Disbursements |
| | Expenses (The lotal of amounts in columns (b) (c) and (d) may not neces | expenses per books | income | income | for charitable |
| | sarily equal the amounts in column (a) | | i I | | purposes (cash basis only) |
| | (see instructions)) | | | | 1 |
| | 1 Contributions gifts grants eld received (attail schedule) | 7. 2 A AL ATAETA | 到"大概"的" 这种 "。 | 了34元至30万元。 1 | 题是"记得到代验题 |
| | 2 CF ► X if the foundation is not required to attach Sch B | 第二十个所当为 的时 | 产型作业 1 | "们是是秦朝认言。小园的 | |
| | 3 Interest on saving, and temporary cash investments | 61,282 | 61,282 | | |
| | 4 Dividends and interest from securities | 71,715 | 71,715 | | 至少的一种"在"的"是"的 |
| | 5 a Gross renta | | | <u> </u> | MOTOR TO A STATE OF THE STATE O |
| R | b Net rental income or (loss) | 是,它们是是是一个 | <u>此一元,京</u> 庭、宋. 2. 7 | 图 对 | 美工馆和 公司 |
| | 6 a Net gain or (les) from sale of a sets not on line 10 | -19,674 | 萨莱 温光·思观史》 | A RESERVE MANAGEMENT | 表现的"四条"的"不 |
| R E V | b Gross sales price for all 1,236,696 | 第17 编号 18 mg | 三 | A CHURCON AND AND AND AND AND AND AND AND AND AN | 多元的新的社会 |
| | 7 Capital gain riet income (from Part IV line 2) | 代で記録がたくでは | 0 | REGENVERIE | 高。此些些可,知图 |
| E N U | Not short term capital gain Insome modifications | | | | |
| Ĕ | • ••••• | A STATE OF THE STA | | BIRTUNDA TO COTA 45 | 7. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. |
| | 10 a Gross sales IPS2 returns and allowances | 学会学生 | 学生的 | | 0.81200000000000000000000000000000000000 |
| | b Less Cost of goods sold | 第15个位置是不当 的 | 显得是江海南市 | 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| | C Gross profit or (fb.s) (attach schedule) | | 经保险事件 表面中 | GOEN, UT | 在 60000 产生活动的 |
| | 11 Other income (attach schedule) | | EE - BE B/184 | | 是"大学"的"大学"。 |
| | SEE STATEMENT 1 | -7,671 | -7,671 | | 到那次是江港 相 |
| | 12 Total Add lines 1 through 11 | 105,652 | 125,326 | 0 | 主动作说: 至 "从山田 |
| | 13 Compensation of officers directors trustees etc. | 0_ | | | |
| | 14 Other employee salaries and wages | 9,917 | 9,917 | | |
| | 15 Pension plans employee benefits | | | | <u> </u> |
| A D | 16 a Legal feeu (attach schedule) b Accounting fees (attach sch) SEE ST 2 | 7.750 | 3 750 | | |
| M | 0.00 0.00 | 7,750 | 7,750 | | |
| Ň | c Other prof (ces (attach sch) SEE ST 3 | 8,011 | 8,011 8,907 | | |
| O I P S E T | 18 Jares (attach schedule/seconatrs) SEE STM 4 | 8,907 5,692 | 5,692 | | |
| RR | 19 Depreciation (attach | 3,032 | | | THE PROPERTY OF THE PARTY OF THE PARTY. |
| ŦŤ | Schedule) and depletion | | | | 是一种是一种 |
| N V G E | 20 O cupanc, | | | | |
| | 21 Travel conferences and meetings | | | | <u> </u> |
| A E N X D P | 22 Printing and publications 23 Other expenses (attach schedule) | | | <u> </u> | |
| | SEE STATEMENT 5 | 77,315 | 77,315 | | |
| E N S E S | 24 Total operating and administrative | 11,313 | 77,010 | | |
| E S | e>penses Add lines 13 through 23 | 117,592 | 117,592 | <u> </u> | <u> </u> |
| _ | 25 Contribution, utility grans paid PART XV | | 是此类公司定证者对 | 5. 哈里斯尼亚拉克·斯坦 | 243,040 |
| | 26 Total expenses and disbursements | 260 620 | 113 500 | _ | 242 040 |
| | Add lines 24 and 25 | 360,632 | 117, 592 | 0 7. 157-15-15-16-16-16-16-16-16-16-16-16-16-16-16-16- | 243,040 |
| | 27 Subtract line 26 from line 12 a Excess of revenue over expenses | F David Control | | 小海里,海南大型 | 医一种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种种 |
| | and disbursements | -254,980 | | 自家是認识的信息 | 医运动的 |
| | b Net investment income (if negative enter 0.) | 通过不同的 | 7,734 | HALVINE CEE | 即是常用用的 |
| | C Adjusted not income (if negative lenter 0.) | 日本型企業的主張 | STALL SOLVE THE THE | <u>.a</u> | 尼亚是《西西斯里 |

3 Other increases not included in line 2 (itemize) Add lines 1, 2, and 3
5 Decreases not included in line 2 (itemize) SEE STATEMENT 12
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30
6 3,455,036.

| (a) List and describ 2-story brick warehou | How acquired — Purchase — Donation | (C) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr) | | |
|---|---|---|-------------------------------|--|--------------|
| 1a SEE STATEMENT 13 | · | | Donation | <u> </u> | |
| b | | | | | ļ |
| | | | | | |
| e | | | | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis | | (h) Gain o | |
| | (or allowable) | plus expense of sale | | (e) plus (f) r | (g) |
| b | | | | | |
| | 1 | | | | |
| d | | | | | |
| е | | | | | |
| Complete only for assets sho | wing gain in column (h) and owned by | y the foundation on 12/31/69 | | (I) Gains (Co | l (h) |
| (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col (i) over col. (j), if any | | gain minus col (k), ian -0-) or Losses (| but not less |
| a | | | | | |
| b | | | | | |
| d d | | | | | - |
| e | | | | | |
| 2 Capital gain net income or (n | let capital loss) If gain, also | enter in Part I, line 7 er -0- in Part I, line 7 | 2 | | -19,674 |
| 3 Net short-term capital gain or | r (loss) as defined in sections 1222(5) | | - | - | -19,014 |
| If gain, also enter in Part I, Iii in Part I, line 8 | ne 8, column (c) (see instructions) If | (loss), enter -0- | 3 | | 0 |
| | er Section 4940(e) for Reduced | Tax on Net Investmen | | _ | |
| | ection 4942 tax on the distributable ar ialify under section 4940(e) Do not co | • • | period? | Yes | X No |
| 1 Enter the appropriate amount in | each column for each year, see the ins | tructions before making any ent | ries | | |
| (a) Base period years Calendar year (or tax year beginning in) | Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | (col | (d) Distributio (b) divided by | |
| 2014 | 205,087. | 4,024,4 | 86. | | 0.05096 |
| 2013 | 183,483. | 2,485, | | | 0.07381 |
| 2012 | 135, 357. | 2,579,4 | | | 0.05247 |
| 2011 | 215, 934. | 2,250,5 | | | 0.09594 |
| 2010 | 67,455. | 2,251,9 | 985. | | 0.02995 |
| 2 Total of line 1, column (d) | | | 2 | | 0.30314 |
| Average distribution ratio for number of years the foundation | the 5-year base period — divide the to on has been in existence if less than | otal on line 2 by 5, or by the 5 years | 3 | | 0.06063 |
| 4 Enter the net value of noncha | aritable-use assets for 2015 from Part | X, line 5 | 4 | | 3,427,851 |
| 5 Multiply line 4 by line 3 | | | 5 | | 207,831 |
| 6 Enter 1% of net investment in | ncome (1% of Part I, line 27b) | | 6 | | 77 |
| 7 Add lines 5 and 6 | | | 7 | | 207,908 |
| 8 Enter qualifying distributions | from Part XII, line 4 | | 8 | | 243,040 |
| If line 8 is equal to or greater the Part VI instructions | an line 7, check the box in Part VI, line | lb, and complete that part using | ja 1% tax r | ate See the | |

| _ | 990-PF (2015) THE PESKY FAMILY FOUNDATION, INC. 22-3008373 | | F | age 4 |
|-----|--|--------|------|--|
| | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instruction | s) | | - |
| 1 : | Exempt operating foundations described in section 4940(d)(2), check here | | | |
| | Date of ruling or determination letter (attach copy of letter if necessary — see instrs) | | | |
| 1 | Domestic foundations that meet the section 4940(e) requirements in Part V, | | | 77. |
| | check here X and enter 1% 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) | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable | | | |
| | foundations only Others enter -0-). | | | 0. |
| 3 | Add lines 1 and 2 | | | 77. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | | | 0. |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- | | | <u>77.</u> |
| 6 | Credits/Payments. | | | |
| | a 2015 estimated tax pmts and 2014 overpayment credited to 2015 | | | |
| | Exempt foreign organizations — tax withheld at source | | | |
| • | : Tax paid with application for extension of time to file (Form 8868) | | ĭ. | |
| • | Backup withholding erroneously withheld | | | |
| 7 | Total credits and payments Add lines 6a through 6d | | 2,0 | 000. |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8 | | | |
| 9 | Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed | | | 0. |
| 10 | Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | 1,9 | <u>923.</u> |
| 11 | Enter the amount of line 10 to be Credited to 2016 estimated tax | | 1,9 | 923. |
| Pai | t VII-A Statements Regarding Activities | | | |
| 1 a | 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 |
| ı | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? | 1 ь | · | |
| | | " | , | X |
| | If the answer is 'Yes' to 1a or 1b, 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 | | X |
| | 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. | | • | |
| 6 | 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 |
| 4 a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4 a | | X |
| Ł | If 'Yes,' has it filed a tax return on Form 990-T for this year? | 4 b | N | /A |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | 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 either | 1. 1 | | 1 |
| | By language in the governing instrument, or | 1 1 | | 1 |
| | 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? | 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 XV | 7 | X | |
| 8 a | Enter the states to which the foundation reports or with which it is registered (see instructions) | | | |
| | NY | | | |
| 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? If 'No,' attach explanation</i> | 8ь | 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 calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part XIV | 9 | | Х |
| 10 | Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses | 10 | | x_ |
| DAA | | rm 990 | DE / | 2015 |

| _ | 1 990-PF (2015) THE PESKY FAMILY FOUNDATION, INC. | | 300837 | <u> </u> | | age 5 |
|-----|--|-------------|--------|---------------|----------|----------|
| Pai | t VII-A Statements Regarding Activities (continued) | | | 1 1 | | |
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions) | | | 11 | | Х |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified pers advisory privileges? If 'Yes,' attach statement (see instructions) | on had | | 12 | | х |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption. Website address N/A | applicat | ion? | 13 | X | |
| 14 | The books are in care of ► THE PESKY FAMILY FOUNDATION Telephone | | 208-4 | 24-5 | <u> </u> | |
| 4- | Located at > 960 BROADWAY, SUITE 314 BOISE ID ZIP + 4 > | <u>8370</u> | 76 | _N/Ā | | - |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year . | ► [1 | 15 | - N/ A | | N/A |
| 16 | At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority bank, securities, or other financial account in a foreign country? | over a | | 16 | Yes | No X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country | | | | | |
| Par | t 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 | - | Ť, | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | Yes | XNo | | | |
| | (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 | | -1 | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | П | _ | | | , |
| | for the benefit or use of a disqualified person)? | ∐Yes | X No | | | |
| | (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 | , | | |
| ŀ | If any answer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in | _ | _ | | | |
| _ | olf any answer is 'Yes' to 1a(1)-(6), did any 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) | 7 | _ | 1 b | N | /A |
| | Organizations relying on a current notice regarding disaster assistance check here . | - | | | | |
| 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 2015? | | | 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)): | | | - | | |
| ā | At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? | Yes | χNο | | | |
| | If 'Yes,' list the years ► 20 _ , 20 _ , 20 _ , 20 | □.03 | Δ. | | | |
| L | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942 | (a)(2) | | | 1 | |
| L | of the there any years listed in 2a for which the foundation is not applying the provisions of section 4942. (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942) | (a)(2) to | | | | ļi |
| | all years listed, answer 'No' and attach statement — see instructions). | | | 2 b | N | /A |
| • | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years | here. | | | ľ | |
| | ► 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 | | | |
| t | olf 'Yes,' did it have excess business holdings in 2015 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 approve | d | | | | |
| | or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approve by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or | - | | | | ļ |
| | (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015) | | | 3 b | N | /A |
| 4 a | Did the foundation invest during the year any amount in a manner that would jeopardize its | | | | | ., |
| | charitable purposes? | | | 4 a | - | X |
| t | 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? | | | 4 b | <u> </u> | <u> </u> |
| BAA | | | Fo | orm 99 | 0-PF | (2015) |

| Form 990-PF (2015) THE PESKY FAMILY F | | | 22-300 |)8373 | Page 6 |
|--|---|---|--|--------------|---------------------------|
| Part VII-B Statements Regarding Activiti | | 4720 May Be Req | uired (continued) | | |
| 5 a During the year did the foundation pay or incu | | | | | |
| (1) Carry on propaganda, or otherwise attempt | 3 | ` | Yes X | No | |
| (2) Influence the outcome of any specific publion, directly or indirectly, any voter registra | ition drive? | - | | No | |
| (3) Provide a grant to an individual for travel, | study, or other similar i | purposes? | ∐ Yes X | No | |
| (4) Provide a grant to an organization other the in section 4945(d)(4)(A)? (see instructions | nan a charıtable, etc, or i) | ganization described | Yes X | No | |
| (5) Provide for any purpose other than religion educational purposes, or for the preventio | us, charitable, scientific n of cruelty to children | , literary, or or animals? | Yes X | No | |
| b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)? | the transactions fail to o a current notice regard | qualify under the excep ding disaster assistance | tions | 5 b | N/A |
| Organizations relying on a current notice rega | rding disaster assistanc | e check here | ▶ □ | | NA |
| c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response | the foundation claim exi sibility for the grant? | emption from the | N/A Yes | No | |
| If 'Yes,' attach the statement required by Regi | ulations section 53.4945 | 5-5(d). | | | |
| 6 a Did the foundation, during the year, receive ar on a personal benefit contract? | ny funds, directly or indi | rectly, to pay premium: | s Yes X | No | |
| b Did the foundation, during the year, pay premi | iums, directly or indirec | tly, on a personal bene | fit contract? | 6 b | X |
| If 'Yes' to 6b, file Form 8870 | | | | | |
| 7 a At any time during the tax year, was the found | | | | No Z | |
| b If 'Yes,' did the foundation receive any procee Part VIII Information About Officers, Di | | | | I/A 7b | |
| and Contractors | irectors, Trustees, | roundation manag | jers, nigniy Palu b | .mpioyee: | ъ, |
| 1 List all officers, directors, trustees, foundation | n managers and their o | compensation (see inst | ructions). | | |
| (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 | | se account, illowances |
| ALAN D. PESKY | PRESIDENT | 0. | 0. | | 0. |
| PO BOX 3876 | 30.00 | | | | |
| KETCHUM, ID 83340 | | | | | |
| WENDY PESKY | CFO | 0. | 0. | | 0. |
| PO_BOX_3876 | 15.00 | | | | |
| KETCHUM, ID 83340 | | | | | |
| GREGORY PESKY | TRUSTEE | 0. | 0. | | 0. |
| 3320 IRVING AVE. S | 3.00 | | | | |
| MINNEAPOLIS, MN 55408 | | | | | |
| HEIDI WORCESTER | TRUSTEE | 0. | 0. | | 0. |
| 40 BLOOD ST | 3.00 | | | | |
| LYME, CT 06371 | | | <u> </u> | <u> </u> | |
| 2 Compensation of five highest-paid employees (of | | | | | |
| (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 | | se account, allowances |
| NONE | | | | | |
| | | | | | |
| | | | | | |
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| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | <u>L</u> | |
| Total number of other employees paid over \$50,000 | | | • | | 0 |
| | | | | Form 90/ | DE (2015) |

| Form 990-PF (2015) THE PESKY FAMILY FOUNDATION, INC. | 22-300 |)8373 Page 7 |
|--|-------------------------------|---------------------|
| Part Information About Officers, Directors, Trustees, Foundation and Contractors (continued) | n Managers, Highly Paid E | imployees, |
| 3 Five highest-paid independent contractors for professional services (see instruct | ions). If none, enter 'NONE.' | |
| (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| NONE | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Total number of others recovers 650,000 for motions of others | | ļ |
| Total number of others receiving over \$50,000 for professional services | | 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 informorganizations and other beneficiaries served, conferences convened, research papers produced, etc. | ation such as the number of | Expenses |
| 1 N/A | | |
| | | |
| 2 | | |
| * | | |
| | | |
| 3 | | |
| | | |
| 4 | | |
| | | |
| | | |
| Rart XB Summary of Program-Related Investments (see instructions |) | |
| Describe the two largest program-related investments made by the foundation during the tax ye | ar on lines 1 and 2. | Amount |
| 1 | | <u>-</u> |
| N/A | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments See instructions 3 | | |
| | | |
| | | |
| Total. Add lines 1 through 3 | • | 0. |
| BAA | | Form 990-PF (2015) |

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 1,407,205. b Average of monthly cash balances 1 b 263,455. c Fair market value of all other assets (see instructions) 1 c 1,809,392. d Total (add lines 1a, b, and c) 1 d 3,480,052. e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1 e O 2 Acquisition indebtedness applicable to line 1 assets 0 Subtract line 2 from line 1d 3 3,480,052 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions) 4 52,201. 5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 3,427,851. Minimum investment return. Enter 5% of line 5 6 171,393 Distributable Amount (see instructions) (Section 4942(j)(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 6 171,393. 1 2 a 2a Tax on investment income for 2015 from Part VI, line 5 77 b Income tax for 2015 (This does not include the tax from Part VI) 2 b c Add lines 2a and 2b 2 c 3 3 Distributable amount before adjustments Subtract line 2c from line 1 316. 4 Recoveries of amounts treated as qualifying distributions 5 Add lines 3 and 4 171,316 Deduction from distributable amount (see instructions) 6 7 7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 171,316 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 243,040. **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 a Suitability test (prior IRS approval required) 3 a 3 b b Cash distribution test (attach the required schedule) 4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 4 243,040. 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) 77. Adjusted qualifying distributions. Subtract line 5 from line 4 6 242,963. 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. Form 990-PF (2015) BAA

Part XIII Undistributed Income (see instructions)

| 1 Distributable amount for 2015 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2015 a Enter amount for 2014 only 0. | ,316. |
|---|---------|
| 2 Undistributed income, if any, as of the end of 2015 | ,316. |
| | |
| | |
| b Total for prior years 20 , 20 , 20 O. | |
| 3 Excess distributions carryover, if any, to 2015 | |
| a From 2010 | |
| b From 2011 103, 405. | |
| c From 2012 7,826. | |
| d From 2013 59, 418. | |
| e From 2014 5, 759. | |
| f Total of lines 3a through e 176, 408. | |
| 4 Qualifying distributions for 2015 from Part | |
| XII, line 4 ► \$ 243,040. | |
| a Applied to 2014, but not more than line 2a | |
| b Applied to undistributed income of prior years | |
| (Élection required – see instructions) | |
| c Treated as distributions out of corpus | |
| (Election required – see instructions) 0. | |
| d Applied to 2015 distributable amount | ,316. |
| e Remaining amount distributed out of corpus 71,724. | |
| 5 Excess distributions carryover applied to 2015 O. | 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: | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 248, 132. | |
| b Prior years' undistributed income Subtract line 4b from line 2b | |
| 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 | |
| | |
| e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount — see instructions | |
| | |
| f Undistributed income for 2015 Subtract lines 4d and 5 from line 1. This amount must 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 | |
| may be required — see instructions) 0. | |
| 8 Excess distributions carryover from 2010 not | |
| applied on line 5 or line 7 (see instructions) | |
| 9 Excess distributions carryover to 2016. | |
| Subtract lines 7 and 8 from line 6a 248, 132. | |
| 10 Analysis of line 9. | |
| a Excess from 2011 103, 405. | |
| b Excess from 2012 7, 826. | |
| c Excess from 2013 59, 418. | |
| d Excess from 2014 5, 759. | |
| e Excess from 2015 71,724. | (003.5) |

| Form 990-PF (2015) THE PESKY FAMILY | | | (\ /() A -1 - | 22-300837 | |
|---|-----------------------|------------------------|-------------------------|-----------------------|---------------|
| Part XIV Private Operating Foundat 1 a If the foundation has received a ruling or dete | | | | | N/A |
| is effective for 2015, enter the date of the | ruling | it is a private operat | ing loundation, and th | e ruling - | |
| b Check box to indicate whether the foundate | ion is a private ope | erating foundation o | described in section | 4942(J)(3) or | 4942(J)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum investment return from Part X for each year listed | (a) 2015 | (b) 2014 | (c) 2013 | (d) 2012 | (e) Total |
| b 85% of line 2a. | | | | | |
| 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 | | | | | |
| 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 '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 | | | | | |
| Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalities) | | i i | | | |
| (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 | | | | | |
| Part XV Supplementary Information | (Complete this | part only if the | foundation had | \$5,000 or more | in |
| assets at any time during th | | structions.) | | | |
| 1 Information Regarding Foundation Managers of the foundation who have | | nan 2% of the total c | ontributions received | by the foundation bef | ore the |
| close of any tax year (but only if they have NONE | contributed more | than \$5,000). (See | section 507(d)(2)) | , | |
| b List any managers of the foundation who own | 10% or more of the | stock of a corporation | on (or an equally large | portion of the owner | ship of |
| a parthership or other entity) of which the NONE | foundation has a 1 | 0% or greater inter | est. | | |
| 2 Information Regarding Contribution, Gran | t Gift Loan Scho | larshin etc Progr | ams: | | |
| Check here ☐ If the foundation only ma requests for funds If the foundation make | kes contributions to | preselected charitab | le organizations and d | | |
| complete items 2a, b, c, and d a The name, address, and telephone number or | e-mail address of the | he person to whom a | nolications should be | addressed | , |
| a me hame, decress, and telephone number of | e man address of the | ne person to whom a | ppineation 5 should be | addi obbodi | |
| CEE CTATEMENT 14 | | | | | |
| SEE STATEMENT 14 b The form in which applications should be seem to be seem | submitted and infor | mation and materia | als they should inclu | de: | |
| • | | | | | |
| SEE STATEMENT FOR LINE 2A c Any submission deadlines | | <u></u> | | | |
| CED CHAMPAND DOD I TAY OF | | | | | |
| SEE STATEMENT FOR LINE 2A d Any restrictions or limitations on awards, s | such as by geograp | hical areas charita | ble fields kinds of i | nstitutions, or other | factors: |
| and a maid of a | at by googiup | arodo, charita | | | · · · · · |
| SEE STATEMENT FOR LINE 2A | | | | | |

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 Recipient Purpose of grant or contribution status of recipient **Amount** Name and address (home or business) a Paid during the year SEE STATEMENT 15 ► 3a 243,040. b Approved for future payment

► 3b

Total

Form **990-PF** (2015)

Part XVI-A Analysis of Income-Producing Activities

BAA

| Enter gross amounts unless otherwise indicated | | Unrelated business income | | Excluded | by section 512, 513, or 514 | | | |
|--|--|--|---------------|--|-----------------------------|---|--|--|
| | gram service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | (e) Related or exempt function income (See instructions.) | | |
| a | , | | | Code | | | | |
| | | | | | | | | |
| _ | | | | 1 | | | | |
| - 4 | | | | | | | | |
| е | | | ·-·········· | | | | | |
| f | | | | | | | | |
| g Fees | and contracts from government agencies | | | 1 | | | | |
| | bership dues and assessments | | | | | | | |
| | st on savings and temporary cash investments | | <u> </u> | 14 | 61,282. | | | |
| | dends and interest from securities | | | 14 | 71,715. | | | |
| | rental income or (loss) from real estate: | | ı | 7 7 | 71,713. | · · · · · · · · · · · · · · · · · · · | | |
| | -financed property | | | 1 | | | | |
| | debt-financed property | | | + | | | | |
| | ental income or (loss) from personal property | | | + + | | | | |
| | r investment income | | <u> </u> | 14 | -7,671. | | | |
| | or (loss) from sales of assets other than inventory | | | 18 | -19,674. | _ | | |
| | ncome or (loss) from special events | | | 10 | -19,674. | | | |
| | s profit or (loss) from sales of inventory | | | + | | | | |
| | r revenue | - | | , , | 1647 2 7 7 7 7 | 2 2 3 | | |
| | | | , | <u> </u> | <u></u> | * 2x | | |
| b | | | | + | | | | |
| _ | | | | | | | | |
| d | | | ···· | | <u> </u> | | | |
| e | | - | TO. 8 | + | | | | |
| | *************************************** | | | 1738 | 105 650 | | | |
| 12 Subt | otal Add columns (b) (d) and (a) | 1 1 | | | | | | |
| | otal Add columns (b), (d), and (e) | 4 6 | | , , , | 105,652. | 105 650 | | |
| 13 Tota | I. Add line 12, columns (b), (d), and (e) | | | <u> </u> | 105,652. | 105,652. | | |
| 13 Tota (See works | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. | ons) | | 1 | 13 | 105,652. | | |
| 13 Tota (See works | I. Add line 12, columns (b), (d), and (e) | ons) | hment of Exem | 1 | 13 | 105,652. | | |
| 13 Tota (See works | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See works | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See works Part XV) Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |
| 13 Tota (See work: Part XV Line No. | I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation. -B Relationship of Activities to the | ons) Accomplis | | pt Purpo | ses | | | |

TEEA0502L 10/13/15

No

Yes

Form 990-PF (2015) THE PESKY FAMILY FOUNDATION, INC. 22-3008373 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

| 1 Did the | oroomischien directly. | | | | | | | res | NO |
|----------------------------------|--|--|---|----------------------------------|---|--|--------------------------|----------|----------|
| 1 Did the describ relating | organization directly ed in section 501(c) o i to political organizati | or indirectly engag of the Code (other t ions? | e in any of the follow han section 501(c)(3 | ving with ang 3) organization | y other organization ons) or in section | on 527, | | | |
| a Transfe | ers from the reporting | foundation to a no | ncharitable exempt o | organization | of. | | | | |
| (1) Cas | | | | | | | 1 a (1) | | X |
| (2) Oth | er assets | | | | | | 1 a (2) | | X |
| b Other to | ransactions | | | | | | | | |
| (1) Sal | es of assets to a nond | charitable exempt o | organization | | | | 1 b (1) | | X |
| (2) Pur | chases of assets from | n a noncharitable e | xempt organization | | | | 1 b (2) | | X |
| (3) Rer | ntal of facilities, equip | ment, or other asso | ets | | | | 1 b (3) | | X |
| (4) Rei | mbursement arranger | ments | | | | | 1 b (4) | | X |
| (5) Loa | ins or loan guarantees | s | | | | | 1 b (5) | | X |
| (6) Per | formance of services | or membership or | fundraising solicitation | ons | | | 1 b (6) | | X |
| c Sharing | of facilities, equipme | ent, mailing lists, of | her assets, or paid e | employees | | | 1 c | | Х |
| any trai | nswer to any of the atds, other assets, or services | rangement, show i | n column (d) the val | ue of the go | umn (b) should alv n received less that ods, other assets, | vays show the fair m fair market value in or services received | narket vali | ue of | |
| (a) Line no | (b) Amount involved | (c) Name of nonc | haritable exempt organiza | tion | (d) Description of tran | sfers, transactions, and s | sharing arrar | gement | s |
| N/A | | · · · · · · · · · · · · · · · · · · · | | | | | | | |
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| <u> </u> | | | | · | | . | | | |
| | | | | | | | | | |
| describe b If 'Yes,' | undation directly or indied in section 501(c) of complete the followin Name of organizatio | f the Code (other thing schedule. | nan section 501(c)(3 |)) or in sect | ion 527? | N December of rela | Yes | X | No |
| N/A | Traine of organization | <u></u> | (b) Type of organ | ization | (c |) Description of rela | nonsnip | | |
| | | | | | | | | | |
| | | - | ,,,,,, | | | | | | |
| | | | | | | | | | |
| ~ | | | | | | | | | |
| Under p correct, | penalties of perjury, I declare and complete Declaration of | that I have examined this foreparer (other than tax | s return, including accompa cpayer) is based on all info | anying schedule | h preparer has any know | o the best of my knowledge ledge | May the I | RS disci | uss e |
| | (Kiny / | · · · · · · · · · · · · · · · · · · · | <u> 6(13</u> | 117 | PRESIDENT | | preparer : (see instr | uctions) | elow |
| Signa | | - | Date Date | | Title | | انتلساد | Yes | No |
| | Print/Type preparer's name | | Reparer's signature | ul " | Date | Check Uii | PTIN | | |
| Paid | | ARRIS | dumma | yeurs | 1/1/2/10 | | P00148 | 095 | |
| reparer | | | LLP | <u>'</u> | · | Firm's EIN ► 46-43 | <u> 364096</u> | | |
| lse Only | | 60 BROADWAY, | SUITE 314 | | | | | | |
| | l BC | DISE, ID 837 | 06 | | | Phone no (208) | | | |
| AA | | | | | | | Form 99 0 |)-PF (| 2015) |
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FEDERAL STATEMENTS

PAGE 1

THE PESKY FAMILY FOUNDATION, INC. C/O B.A. HARRIS, LLP

22-3008373

| STATEMENT 1 | |
|-----------------------------|---|
| FORM 990-PF, PART I, LINE 1 | 1 |
| OTHER INCOME | |

(A) REVENUE PER BOOKS

(B) NET INVÉSTMENT INCOME

(C) ADJUSTED NET INCOME

OTHER INVESTMENT INCOME

-7,671. -7,671. -7,671. \$ -7,671. \$ TOTAL \$

STATEMENT 2 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES

| | | (A) ENSES BOOKS | | NET STMENT COME | ADJ NET | (C) JUSTED INCOME_ | _ | (D) HARITABLE PURPOSES |
|--------|----------|-----------------------|----------|-----------------------|------------|--------------------------|---|------------------------------|
| тотат. | \$ \$ | 7,750. | \$ \$ | 7,750. | Ś | 0. | Š | 0. |

STATEMENT 3 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES

| | | EXP PER | PENSES BOOKS | INV | ESTMENT NCOME | ADJUSTED NET INCOME | CHARITABLE PURPOSES |
|------------|-------|------------|------------------|-----|------------------|------------------------|---------------------|
| LEGAL FEES | TOTAL | \$ | 8,011. 8,011. | \$ | 8,011. 8,011. | \$ 0. | <u>\$ 0.</u> |

STATEMENT 4 FORM 990-PF, PART I, LINE 18 **TAXES**

| | | (A) EXPENSE PER BOO | | (B) NET INVESTMENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|---|-------|---------------------------|--------------------------------|----------------------------------|-------------------------------|-------------------------------|
| FEDERAL TAX FOREIGN TAXES PAYROLL TAXES | TOTAL | 8 | 99. \$ 70. 23. 92. \$ | 3,899. 870. 923. 5,692. | <u>\$</u> 0. | \$ 0. |

FEDERAL STATEMENTS

THE PESKY FAMILY FOUNDATION, INC. C/O B.A. HARRIS, LLP

22-3008373

PAGE 2

STATEMENT 5 FORM 990-PF, PART I, LINE 23 OTHER EXPENSES

| | (A) EXPENSES PER BOOKS | (B) NET INVESTMENT INCOME | (C) ADJUSTED NET INCOME | (D) CHARITABLE PURPOSES |
|-----------------------------------|------------------------------|---------------------------|-------------------------------|-------------------------------|
| BANK FEES | \$ 68. | | | |
| CUSTODIAL FEES | 35,369. | 35,369. | | |
| DUES AND SUBSCRIPTIONS | 81. | 81. | | |
| K-1 CONTRIBUTIONS | 26. | 26. | | |
| K-1 OTHER DEDUCTIONS | 348. | 348. | | |
| K-1 PORTFOLIO DEDUCTIONS | 36,392. | 36,392. | | |
| K-1 ROYALTY DEDUCTIONS | 71. | 71. | | |
| K-1 SECTION 59(E)(2) EXPENDITURES | 426. | 426. | | |
| NYS FILING FEE | 250. | 250. | | |
| OFFICE EXPENSES | 1,299. | 1,299. | | |
| RENTAL EXPENSES | <u>2,985.</u> | 2,985. | | |
| TOTAL | \$ 77,315. | \$ 77,315. | \$ 0. | <u>\$ 0.</u> |

STATEMENT 6 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

| CORPORATE STOCKS | VALUATION METHOD | BOOK VALUE | FAIR MARKETVALUE |
|--|---|---|--|
| CHARLES SCHWAB MANAGED ACCT #4098-0378 CHARLES SCHWAB MANAGED ACCT #2091-8104 CHARLES SCHWAB MANAGED ACCT 5200-0386 IDAHO FIRST BANK CHARLES SCHWAB MANAGED ACCT #1094-7117 CHARLES SCHWAB MANAGED ACCT #5308-1791 CHARLES SCHWAB MANAGED ACCT #6891-8795 CHARLES SCHWAB MANAGED ACCT #5083-5458 | COST COST COST COST COST COST COST COST | \$ 0. 0. 0. 74,992. 0. 0. 0. 1,132,485. \$ 1,207,477. | \$ 0. 0. 0. 4,534. 0. 0. 0. 1,107,520. \$ 1,112,054. |

STATEMENT 7 FORM 990-PF, PART II, LINE 10C INVESTMENTS - CORPORATE BONDS

| CORPORATE BONDS | VALUATION METHOD | BOOK VALUE | FAIR MARKET VALUE |
|--|---------------------|----------------------|----------------------------|
| CHARLES SCHWAB MANAGED ACCT #5083-5458 | COST \$ | 250,000. 250,000. | \$ 253,188. \$ 253,188. |

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| STATEMENT 8 | |
|-------------------------------|--|
| FORM 990-PF, PART II, LINE 13 | |
| INVESTMENTS - OTHER | |

| OTHER INVESTMENTS | VALUATION <u>METHOD</u> | BOOK VALUE | FAIR MARKET VALUE | |
|---|----------------------------|---------------|----------------------|--|
| OTHER INVESTMENTS INVESTMENTS IN LIMITED PARTNERSHIPS | COST | \$ 1,580,446. | \$ 1,580,446. | |
| | TOTAL | \$ 1,580,446. | \$ 1,580,446. | |

STATEMENT 9 FORM 990-PF, PART II, LINE 14 LAND, BUILDINGS, AND EQUIPMENT

| CATEGORY | | | BASIS | | ACCUM. DEPREC. | | BOOK VALUE | FAIR V | MARKET ALUE |
|------------------------|-------|----------|------------------|----------|-------------------|----------|---------------|-----------|----------------|
| FURNITURE AND FIXTURES | TOTAL | \$ \$ | 5,438. 5,438. | \$ \$ | 5,438. 5,438. | \$ \$ | 0. 0. | \$ | 0. |

STATEMENT 10 FORM 990-PF, PART II, LINE 15 OTHER ASSETS

| | | BOOK | VALUE | FAIR MARK VALUE | ET |
|--------------|-------|------|------------|--------------------|----|
| OTHER ASSETS | TOTAL | \$ | 32. 32. | \$ | 0. |

STATEMENT 11 FORM 990-PF, PART II, LINE 22 OTHER LIABILITIES

PAYROLL LIABILITIES

| | \$ 151. |
|-------|------------|
| TOTAL | \$ 151. |

STATEMENT 12 FORM 990-PF, PART III, LINE 5 OTHER DECREASES

PASSTHROUGH NON-DEDUCTIBLE EXPENSES

| | \$ 169. |
|-------|------------|
| TOTAL | \$ 169. |

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STATEMENT 13 FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

| | | | | | (B) | HOW (C | DATE | (D) DATE |
|------|-------------|-------------|-----------|----------|----------|-----------|-----------|---------------|
| ITEM | | (A) DES | SCRIPTION | | ACQU | IREDAC | OUIRED _ | SOLD |
| 1 | RIVER HILL | INVESTMEN' | TS LLC | | PURCH | ASED | VARIOUS | 10/31/2016 |
| 2 | PAC WEST TI | ECHNOLOGY 1 | FUND I LP | | PURCH | ASED | VARIOUS | 10/31/2016 |
| 3 | CHARLES SCI | HWAB #8795 | | | PURCH | ASED | VARIOUS | VARIOUS |
| 4 | CHARLES SCI | HWAB #8104 | | | PURCH | ASED | VARIOUS | VARIOUS |
| 5 | CHARLES SCI | HWAB #0378 | | | PURCH | ASED | VARIOUS | VARIOUS |
| 6 | CHARLES SCI | HWAB #5458 | | | PURCH | ASED | VARIOUS | VARIOUS |
| 7 | CHARLES SCI | HWAB #1791 | | | PURCH | ASED | VARIOUS | VARIOUS |
| 8 | PASS THROUG | GH 1231 GA | IN | | PURCH | ASED | VARIOUS | VARIOUS |
| 9 | PASS THROUG | | | | PURCH | | VARIOUS | VARIOUS |
| 10 | PASS THROUG | GH LT CAPI' | TAL LOSS | | PURCH | ASED | VARIOUS | VARIOUS |
| | | | | | | | | |
| | (E) | (F) | (G) | (H) | (I) | (J) | (K) | (L) |
| | GROSS | DEPREC. | COST | GAIN | FMV | ADJ. BAS. | EXCESS | GAIN |
| ITEM | SALES | _ALLOWED | BASIS | (LOSS) | 12/31/69 | 12/31/69 | (I) - (J) | <u>(LOSS)</u> |
| 1 | 0. | | 12,713. | -12,713. | | | | \$ -12,713. |
| 2 | 41,952. | | 0. | 41,952. | | | | 41,952. |
| 3 | 286,597. | | 319,904. | -33,307. | | | | -33,307. |
| 4 | 202,611. | | 204,742. | -2,131. | | | | -2,131. |
| 5 | 409,297. | | 361,561. | 47,736. | | | | 47,736. |
| 6 | 213,761. | | 246,278. | -32,517. | | | | -32,517. |
| 7 | 74,207. | | 100,432. | -26,225. | | | | -26,225. |
| 8 | 3,087. | | 0. | 3,087. | | | | 3,087. |
| 9 | 5,184. | | 0. | 5,184. | | | | 5,184. |
| 10 | 0. | | 10,740. | -10,740. | | | | -10,740. |
| | | | | | | | TOTAL | \$ -19,674. |
| | | | | | | | | |

STATEMENT 14 FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

PESKY FAMILY FOUNDATION - APPLICATIONS

ALAN & WENDY PESKY

NAME: CARE OF:

STREET ADDRESS:

P O BOX 3876

CITY, STATE, ZIP CODE:

KETCHUM, ID 83340

TELEPHONE:

E-MAIL ADDRESS:

FORM AND CONTENT:

SUBMISSION DEADLINES:

N/A N/A

RESTRICTIONS ON AWARDS:

N/A

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| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|---------------------------------------|-----------------------|---------------------------|-----------------------|--------------|
| AMERICAN FRIENDS OF THE ISRAEL MUSEUM | | | FOR UNRESTRICTED USE. | \$ 1,000. |
| CENTRAL PARK CONSERVANCY | | | FOR UNRESTRICTED USE. | 125. |
| BOISE STATE RADIO | | | FOR UNRESTRICTED USE. | 200. |
| CHOATE ROSEMARY | | | FOR UNRESTRICTED USE. | 1,000. |
| BOSTON AREA RAPE | | | FOR UNRESTRICTED USE. | 100. |
| BOISE STATE UNIVERSITY FOUNDATION | | | FOR UNRESTRICTED USE. | 25,000. |
| CRISIS HOTLINE | | | FOR UNRESTRICTED USE. | 150. |
| CENTER FOR HUMAN RIGHTS | | | FOR UNRESTRICTED USE. | 250. |
| CARITAS CHORALE | | | FOR UNRESTRICTED USE. | 100. |
| COLORADO COLLEGE | | | FOR UNRESTRICTED USE. | 1,000. |
| COMMON CAUSE | | | FOR UNRESTRICTED USE. | 50. |
| EDUCATION ALLIANCE | | | FOR UNRESTRICTED USE. | 500. |
| ENVIRONMENTAL RESOURCE CENTER | | | FOR UNRESTRICTED USE. | 250. |
| ERC | | | FOR UNRESTRICTED USE. | 100. |
| ERIC BATEMANS | | | FOR UNRESTRICTED USE. | 1,000. |
| FRIENDS OF NATHANIEL WITHERELL | | | FOR UNRESTRICTED USE. | 1,000. |
| GLOBAL GRASSROOTS | | | FOR UNRESTRICTED USE. | 1,000. |

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| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|--|-----------------------|---------------------------|-----------------------|---------|
| HARVARD UNIVERSITY | | | FOR UNRESTRICTED USE. | \$ 500. |
| HIGHER GROUND SUN VALLEY | | | FOR UNRESTRICTED USE. | 1,000. |
| HOSPICE & PALLIATIVE CARE OF WOOD RIVER | | | FOR UNRESTRICTED USE. | 250. |
| HEMMINGWAY PLAYGROUND | | | FOR UNRESTRICTED USE. | 50. |
| HUNTER COLLEGE FOUNDATION | | | FOR UNRESTRICTED USE. | 5,000. |
| IDAHO COMMUNITY FOUNDATION | | | FOR UNRESTRICTED USE. | 1,600. |
| IDAHO PUBLIC TELEVISION | | | FOR UNRESTRICTED USE. | 235. |
| IDAHO HUMANITIES COUNCIL | | | FOR UNRESTRICTED USE. | 200. |
| KLHT ANNUAL FUND | | | FOR UNRESTRICTED USE. | 50. |
| LAFAYETTE COLLEGE | | | FOR UNRESTRICTED USE. | 1,350. |
| LEE PESKY LEARNING CENTER | | | FOR UNRESTRICTED USE. | 77,300. |
| LEUKEMIA & LYMPHOMA SOCIETY | | | FOR UNRESTRICTED USE. | 100. |
| LINCOLN CENTER THEATER | | | FOR UNRESTRICTED USE. | 1,269. |
| LIVING WITH WOLVES | | | FOR UNRESTRICTED USE. | 250. |
| LLE FUNDRAISING | | | FOR UNRESTRICTED USE. | 750. |
| MINNESOTA PUBLIC RADIO | | | FOR UNRESTRICTED USE. | 100. |
| METROPOLITAN MUSEUM OF ART | | | FOR UNRESTRICTED USE. | 50. |

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| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|---|-----------------------|---------------------------|-----------------------|---------|
| MINNEAPOLIS JEWISH | | | FOR UNRESTRICTED USE. | \$ 50. |
| NATIONAL CENTER FOR LEARNING DISABILITIE | | | FOR UNRESTRICTED USE. | 1,500. |
| NEW YORK HISTORICAL SOCIETY | | | FOR UNRESTRICTED USE. | 5,000. |
| NYC SALT | | | FOR UNRESTRICTED USE. | 1,550. |
| SENIOR CONNECTION | | | FOR UNRESTRICTED USE. | 200. |
| STATE VOICES | | | FOR UNRESTRICTED USE. | 5,000. |
| PLANNED PARENTHOOD | | | FOR UNRESTRICTED USE. | 1,500. |
| PUBLICOLOR | | | FOR UNRESTRICTED USE. | 500. |
| RAZOODONATIONS.ORG | | | FOR UNRESTRICTED USE. | 525. |
| SCAN-NY | | | FOR UNRESTRICTED USE. | 500. |
| SUN VALLEY CENTER FOR THE ARTS | | | FOR UNRESTRICTED USE. | 56,422. |
| SUN VALLEY OPERA | | | FOR UNRESTRICTED USE. | 200. |
| TEMPLE ISRAEL | | | FOR UNRESTRICTED USE. | 4,100. |
| THE ADVOCATES | | | FOR UNRESTRICTED USE. | 200. |
| SUN VALLEY WRITERS CONFERENCE | | | FOR UNRESTRICTED USE. | 4,900. |
| THE COMMUNITY LIBRARY | | | FOR UNRESTRICTED USE. | 1,000. |
| THE COUNTRY SCHOOL | | | FOR UNRESTRICTED USE. | 400. |
| | | | | |

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| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|--|-----------------------|---------------------------|-----------------------|-----------|
| TUCK ANNUAL GIVING | | | FOR UNRESTRICTED USE. | \$ 3,000. |
| URBAN YOUTH | | | FOR UNRESTRICTED USE. | 150. |
| WOOD RIVER WOMEN'S CHARITABLE FOUND | | | FOR UNRESTRICTED USE. | 1,100. |
| WSHU | | | FOR UNRESTRICTED USE. | 250. |
| WOOD RIVER LAND TRUST | | | FOR UNRESTRICTED USE. | 7,500. |
| THIRTEEN | | | FOR UNRESTRICTED USE. | 100. |
| TRUST FOR PUBLIC LAND | | | FOR UNRESTRICTED USE. | 50. |
| STOP CANCER | | | FOR UNRESTRICTED USE. | 1,000. |
| MEMORIAL SLOAN-KETTERING | | | FOR UNRESTRICTED USE. | 200. |
| NATIONAL GAUCHER FOUNDATION, INC. | | | FOR UNRESTRICTED USE. | 250. |
| NETWORK FOR GOOD | | | FOR UNRESTRICTED USE. | 548. |
| NU GIVING | | | FOR UNRESTRICTED USE. | 500. |
| ST LUKE'S WOOD RIVER FOUNDATION | | | FOR UNRESTRICTED USE. | 500. |
| PREPARE PROSPER | | | FOR UNRESTRICTED USE. | 1,250. |
| SOUTHERN POVERTY LAW CENTER | | | FOR UNRESTRICTED USE. | 150. |
| COM FOR ENVIRONMENTALLY SOUND DEVELOP | | | FOR UNRESTRICTED USE. | 100. |
| THE CONNECTION | | | FOR UNRESTRICTED USE. | 250. |

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| NAME AND ADDRESS | DONEE RELATIONSHIP | FOUND- ATION STATUS | PURPOSE OF GRANT | AMOUNT |
|------------------------------------|-----------------------|---------------------------|-----------------------|-------------|
| THE WORKS | | | FOR UNRESTRICTED USE. | \$ 50. |
| UNIVERSITY OF MICHIGAN | | | FOR UNRESTRICTED USE. | 500. |
| WIKIMEDIA | | | FOR UNRESTRICTED USE. | 30. |
| WOMEN DELIVER | | | FOR UNRESTRICTED USE. | 1,000. |
| WOOD RIVER JEWISH COMMUNITY | | | FOR UNRESTRICTED USE. | 1,186. |
| FRIENDS OF HENNEPIN LIBRARY | | | FOR UNRESTRICTED USE. | 200. |
| BOISE STATE UNIVERSITY | | | FOR UNRESTRICTED USE. | 11,500. |
| SUN VALLEY SUMMER SYMPHONY | | | FOR UNRESTRICTED USE. | 2,500. |
| THE BLAKE SCHOOL | | | FOR UNRESTRICTED USE. | 2,000. |
| ACTBLUE AMER RESP | | | FOR UNRESTRICTED USE. | 300. |
| AMERICAN FOR RESPONSIBLE SOLUTIONS | | | FOR UNRESTRICTED USE. | 100. |
| ANIMAL SHELTER | | | FOR UNRESTRICTED USE. | 100. |
| EVERYTOWN FOR GUN | | | FOR UNRESTRICTED USE. | 250. |
| | | | TOTAL | \$ 243,040. |