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## Form: 990-PF

#### **Return of Private Foundation**

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

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public.

► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Internal Revenue Service Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.								to Public Inspection		
For calendar year 2016 or tax year beginning , 2016, and ending  Name of foundation A Employer identification number									, 20	
Na	me of fou	undation						A Employe	r identification numbe	er
		nong Us, Inc							26-4682140	
				not delivered to street address)		Room	/suite	<b>B</b> Telephon	e number (see instructi	ions)
		er Rock Lane				<u> </u>	_		208-853-1279	·
	-	•	nce, country, and ZIP of	or foreign postal code				C If exempt	ion application is pend	ıng, check here ▶ 🗌
		ty, ID 83714		_ <u>_</u>						
G	Check	all that app	·		of a former	public	charity	D 1. Foreign	organizations, check	here ▶□
			☐ Final retu	= = = = = = = = = = = = = = = = = = =				2. Foreign	organizations meeting	the 85% test,
	<u> </u>		Address	<del></del>					here and attach compu foundation status was	
H				ection 501(c)(3) exempt p					07(b)(1)(A), check here	. ►
부				able trust Other tax	<del></del>					
•			of all assets at Part II, col. (c),	J Accounting method	: 🔽 Casn		ccruai		ndation is in a 60-mont	
	line 16			Other (specify)  (Part I, column (d) must be	on cach has	(c.)		under sec	tion 507(b)(1)(B), chec	Kilele P
P	art I			kpenses (The total of						(d) Disbursements
	arti			may not necessarily equal	(a) Revenue expenses			investment	(c) Adjusted net	for charitable
			n column (a) (see insti		books		l ir	come	income	purposes (cash basis only)
	1	Contribution	s gifts grants etc	received (attach schedule)	5	99,295	3.8			
	2	_		ot required to attach Sch. B				63.30		
	3			orary cash investments	220	140			vann v van ann v	
	4		and interest from	-						4: 34 V.
	5a	Gross rent	s.,							
	ь	Net rental	ncome or (loss)		184.	, Jan	1 3			18. 18. 18
ō	6a	Net gain or	(loss) from sale o	f assets not on line 10			4.66			
Revenue	b	Gross sales	orice for all assets on	line 6a		<u> </u>	15 J. 18	32.	. A. 34	
ě	7	Capital gai	n net income (fron	n Part IV, line 2)						
ď	8	Net short-t	erm capital gain .					130		The Acres
	9	Income mo	odifications				¥ ¥ .3,	<b>**</b> 2		
	10a	Gross sales	less returns and allo	wances		₩;	<b>8</b> 37 8	\$7% \$*	100	<b>₹</b> , *\
	b		_		I'm i'm	· 🎊 .	( § - )	(· 100)	<u>*                                     </u>	
3	С	-		schedule)			å r	4.00		
, כ	11			ıle)		3,166	<b> </b>	3,166		¥ . 5
∍ —-	12			<u>!</u>	6	02,461	ļ	3,166		, š. (
<b>№</b>	13	-		rectors, trustees, etc.	ļ		<b>_</b>		_ <del></del>	
osuedx √∭?	14	•	-	wages		_				<del></del>
	15	•	ans, employee bei	netits	<del> </del>		<b> </b> -			<del> </del>
Тă	16a	_	(attach schedule) J fees (attach sche	odula)	<u> </u>		<del> </del>			
	b		essional fees (atta		}		<del></del>			<del> </del>
ati	17	_	sosional rees (atta		<b>—</b>					<del></del> -
str	18		ch schedule) (see ins	RECEIVED	=		<del> </del>			
<u>=</u>	19		on (attach schedul	e) and depletion (	5 0		<b></b>			
뒫	20	Occupanc		/NO.V .2 .0 .2017.   8	<b>b</b>					
₹	21		ferences, and me		2		i			
SE SE	22	Printing an	d publications .	OCDEN. UT		231				231
9	23	Other expe	enses (attach sche	dule)						
Ē	24			ninistrative expenses.						
era			•			231				231
Operating and Administrative	25		ons, gifts, grants p		5	30,075				530,075
_	26			ents. Add lines 24 and 25	5	30,306	ļ			530,306
	27		ne 26 from line 12		ļ					]
	а			nses and disbursements	<u> </u>	72 <u>,</u> 156	<u> </u>	-		
	b		-	negative, enter -0-) .			ļ	3166		
_				ative, enter -0-)	<u> </u>		L			orm <b>990-PF</b> (2016)
FOI	rapen	work Heaucl	ion Act Notice, see	instructions.		Cat. No	o 11289X		Fo	om <b>タフリードド</b> (2016)

Part II		Balance Sheets Attached schedules and amounts in the description column		End o	of year	
		should be for end-of-year amounts only. (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash—non-interest-bearing	10,555	85,148		
	2	Savings and temporary cash investments				
	3	Accounts receivable ▶				
		Less: allowance for doubtful accounts ▶				
	4	Pledges receivable ►				
		Less: allowance for doubtful accounts ▶				
	5	Grants receivable				
1	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule) ▶		. ; * «		
		Less: allowance for doubtful accounts ▶				
ts	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments – U.S. and state government obligations (attach schedule)				
	b	Investments—corporate stock (attach schedule)				
	¢	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment. basis ▶		"		
		Less. accumulated depreciation (attach schedule) ▶				
1	12	Investments—mortgage loans	122,862	120,425		
	13	Investments—other (attach schedule)				
	14	Land, buildings, and equipment. basis ▶		4 * * * * * * * * * * * * * * * * * * *	76362333	
		Less: accumulated depreciation (attach schedule) ▶				
}	15					
	16	Total assets (to be completed by all filers-see the				
		ınstructions. Also, see page 1, item l)	133,417	205,573		
	17	Accounts payable and accrued expenses			2 4 4 4 4 4 4	
<sub>s</sub>	18	Grants payable				
Ę	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			4 W W W W W W W	
iat	21	Mortgages and other notes payable (attach schedule)				
-	22	Other liabilities (describe > Trust Account due to borrower )	17,246	17,246		
	23	Total liabilities (add lines 17 through 22)	17,246	17,246		
es		Foundations that follow SFAS 117, check here				
Balances	24	Unrestricted	ĺ			
ala	25	Temporarily restricted	<del></del>	<del></del>		
B	26	Permanently restricted	<del></del>		,	
рu		Foundations that do not follow SFAS 117, check here ▶ □			,	
Net Assets or Fun		and complete lines 27 through 31.				
ō	27	Capital stock, trust principal, or current funds				
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
SS	29	Retained earnings, accumulated income, endowment, or other funds	116,171	188,327		
t A	30	Total net assets or fund balances (see instructions)	116,171	188,327		
Ze.	31	Total liabilities and net assets/fund balances (see				
		instructions)	133,417	205,573		
	rt III	Analysis of Changes in Net Assets or Fund Balances	<del> </del>			
1		I net assets or fund balances at beginning of year-Part II, colu				
		of-year figure reported on prior year's return)	· · · · · · ·		116,171	
2		r amount from Part I, line 27a			72,156	
3	Othe	er increases not included in line 2 (itemize) ▶		3		
4	Add	lines 1, 2, and 3		4	188,327	
5	Deci	reases not included in line 2 (itemize) ► If net assets or fund balances at end of year (line 4 minus line 5)—		5		
6	rota	il net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), li	ne 30   <b>6</b>	188,327	

Part	V Capital Gains and	Losses for Tax on Investm	ent Ir	come				
		kind(s) of property sold (e.g., real estate, or common stock, 200 shs. MLC Co			(b) How acquired P-Purchase D-Donation		Date acquired o., day, yr)	(d) Date sold (mo , day, yr )
1a				_				
b				<del>.</del>				
С								
d		<del></del>						
<u>e</u>	<del></del>	<b>"</b> "		430		<u> </u>		l
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		plus expe	other basis			n or (loss) (f) minus (g)
a b								
c								
d								
е								
	Complete only for assets show	wing gain in column (h) and owned	by the f	oundation	on 12/31/69			(h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69			s of col (i) (j), if any			t less than -0-) <b>or</b> from col (h))
a				_	····			
b						<u> </u>		
C				<del>-</del>				<del></del>
d					*			
е		( If gain	also er	nter in Da	rt I, line 7	_		
2	Capital gain net income or	Inot capital local / ~ ·		-0- in Par		2		
3	Net short-term capital gair	or (loss) as defined in sections	•					
		I, line 8, column (c) (see instru						
						3		
Parl	V Qualification Und	er Section 4940(e) for Redu	iced T	ax on N	et Investment	Inco	ome	<del></del>
For c	ptional use by domestic priv	vate foundations subject to the	section	1 4940(a)	tax on net invest	tment	income.)	
f sec	tion 4940(d)(2) applies, leave	this part blank.						
		section 4942 tax on the distribu qualify under section 4940(e). D				base p	period?	☐ Yes ☐ No
1		unt in each column for each yea				akıng	any entries.	
	(a)	(b)	ĖΤ		(c)			(d)
Cal	Base period years endar year (or tax year beginning in)	Adjusted qualifying distribution	s	Net value of	nonchantable-use a	ssets		tribution ratio divided by col. (c))
	2015	45	8,818		20	2,981	<del></del>	2.26
	2014	53	3,206		15	6,600		3.40
	2013	19	8,191		25	7,221		0.77_
	2012	20	0,853		4	6,510		4.31
	2011	21	8,016		3	9,131		5.57
2	Total of line 1, column (d)						2	16.31
3		or the 5-year base period—div						
	number of years the found	ation has been in existence if le	ess thai	n 5 years		•	3	3.25
4	Enter the net value of none	charitable-use assets for 2016 f	rom Pa	art X, line	5		4	224,858
5	Multiply line 4 by line 3 .						5	733,037
6	Enter 1% of net investmen	nt income (1% of Part I, line 27t	) .				6	31.66
7	Add lines 5 and 6						7	730,069
8	Enter qualifying distribution	ns from Part XII, line 4					8	530,306
_		ter than line 7, check the box						

1a Exempt operating foundations described in section 4940(c)(c), reck here ▶ and enter "NA" on line 1. Date of ning or determination letter" (cattach copy of later if necessary—see instructions) b Domestic foundations that meet the section 4940(c) requirements in Part V, chock here ▶ and other from the comment of the part I, line 12 co.l. (b). c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12 co.l. (b). part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2 Add fines 1 and 2 Subtract I from line 3. If zero or less, enter -0- 3 6.3 32 Credits*Payments: a 2016 estimated tax payments and 2015 overpayment credited to 2016 6a	Part '	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see i	nstructio	ns)				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ►   1	1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. )						
here ▶ □ 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, ed. (b).  Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  Add lines 1 and 2  Subtritle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  Tax based on investment income. Subtract line 4 from line 3, if zero or less, enter -0-  Credits/Payments:  2016 estimated tax payments and 2015 overpayment credited to 2016  Exempt foreign organizations— tax withheld at source  Tax paid with application for extension of time to file (Form 8868)  Backup withholding erroneously withheld  Total credits and payments. Add lines 6a through 68  Einter any penalty for underpayment of estimated tax. Check here □ if Form 2220 is attached  Backup withholding erroneously withheld  Total credits and payments. Add lines 6a through 68  Einter any penalty for underpayment of estimated tax. Check here □ if Form 2220 is attached  Backup withholding erroneously withheld  Total credits and payments. Add lines 6a through 68  Einter any penalty for underpayment of estimated tax. Check here □ if Form 2220 is attached  Backup withholding erroneously withheld  Total credits and payments. Add lines 6a through 68  Einter any penalty for underpayment of estimated tax. Check here □ if Form 2220 is attached  Backup withholding erroneously withheld  Total credits and payments. Add lines 6a through 68  Einter any penalty for underpayment of estimated tax. Check here □ if Form 2220 is attached  Backup withholding erroneously withheld 10 erroneously withholding erroneously erroneously lines and erroneously erroneously lines erroneously lines erroneously lines erroneously lines erroneously lines erroneously line		Date of ruling or determination letter (attach copy of letter if necessary—see instructions)						
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, cot. (b).  2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 5 Credits-Pyaments: a 2016 estimated tax payments and 2015 overpayment credited to 2016 6a	þ							
Part I, line 12, col. (b).  2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  3 Add lines 1 and 2  3 Add lines 1 and 2  4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  5 Tax based on investment income. Subtract line 4 from line 3, if zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3, if zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3, if zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3, if zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3, if zero or less, enter -0-  5 Tax based on investment income. Subtract line 4 from line 3, if zero or less, enter -0-  5 Tax based with application for extension of time to fulle (Form 8868)  6 Cata paid with application for extension of time to fulle (Form 8868)  6 Cata paid with application for extension of time to fulle (Form 8868)  6 Cata paid with application for extension of time to fulle (Form 8868)  6 Cata paid with application for extension of time to fulle (Form 8868)  6 Cata paid with application for extension of time to full (Form 8868)  6 Cata paid with application for extension of time to full (Form 8868)  7 Tax due, if the fotal of lines 5 and 8 is more than the 7, enter amount owed  9 Tax due, if the fotal of lines 5 and 8 is more than the 7, enter amount owed  10 Overpayment. If line 7 is more than the fotal of lines 5 and 8, enter the amount overpaid  10 Tester the amount of line 10 to be Credited to 2017 estimated tax. Check here   If Form 2220 is attached  8 Tester the amount of line 10 to be Credited to 2017 estimated tax. Check here   If Form 2220 is attached   Instruction or instruction or inspect or instr								
3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-)  Credits/Payments:  2016 estimated tax payments and 2015 overpayment credited to 2016  Exempt foreign organizations – tax withheld at source  C Tax paid with application for extension of time to file (Form 8868)  Backup withholding erroneously withheld  Total credits and payments. Add lines 6s through 6d  Enter any penalty for underpayment of estimated tax. Check here □ if Form 2220 is attached  Enter any penalty for underpayment of estimated tax. Check here □ if Form 2220 is attached  Tax due, if the total of lines 5 and 8 is more than line 7, enter amount owed  Tax due, if the total of lines 5 and 8 is more than line 7, enter amount owed  Tax due, if the total of lines 5 and 8 is more than line 7, enter amount overpaid  Total credits and payments. Hine 7 is more than the total of lines 5 and 8, enter the amount overpaid  Total credits and payments. Hine 7 is more than the total of lines 5 and 8, enter the amount overpaid  Total credits and payments. Hine 7 is more than the total of lines 5 and 8, enter the amount overpaid  Total credits and payments. Hine 7 is more than the total of lines 5 and 8, enter the amount overpaid  Total credits and payments. Hine 7 is more than the total of lines 5 and 8, enter the amount overpaid  Total credits and payments. Hine 7 is more than the total of lines 5 and 8, enter the amount overpaid  Total credits and payments. Hine 7 is more than the total of lines 5 and 8, enter the amount overpaid to the 111  Part VII-N Statements Regarding Activities  To During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it payments in the total overpaid to influence any national, state, or local legislation or did it payments. To the or the overpaid to influence any national, state, or local legislation or did it payments. To the overpaid	С		**************************************					
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6 Credits/Payments: a 2016 estimated tax payments and 2015 overpayment credited to 2016 b Exempt foreign organizations—lax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here □ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)						
a 2016 estimated tax payments and 2015 overpayment credited to 2016 b Exempt foreign organizations—tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld Total credits and payments. Add lines 6s athrough 6d Between the content of the conten	5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	43	32				
b Exempt foreign organizations—Lax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached Enter the amount of line 10 to be 'Oredited to 2017 estimated tax.'  Part VII-A Statements Regarding Activities  Line of 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?  Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?  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 mechanism of the activities.  C Did the foundation file Form 1120-POL for this year?  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 managers. ▶ \$  Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (i) On the foundation file Form 1120-POL for this year?  A bit the official or the activities of the activities.  B tas the foundation managers. ▶ \$  B Has the foundation engaged in any activities that have not previously been reported to the IRS?  If "Yes," attach a detailed description of the activities.  B take the foundation managers. ▶ \$  B Has the foundation and 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.  B take the foundation hale any changes, not previously re	6	Credits/Payments:						
c Tax paid with application for extension of time to file (Form 8668)	а		•	200. 5				
d Backup withholding erroneously withheld  7 Total credits and payments. Add ines 8a through 6d  7 Total credits and payments. Add ines 8a through 6d  7 Total credits and payment. If line 7 is more than the total of lines 5 and 8 is more than line 7, enter amount owed  9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  11 Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ Refunded ▶ 11  Part VII-A Statements Regarding Activities  1a Dunng 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?  b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?  If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities.  c Did the foundation file Form 1120-POL for this year?  d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$  e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$  2 Has the foundation engaged in any activities that have not previously been reported to the IRS?  2 Has the foundation have unrelated business gross income of \$1,000 or more during the year?  4 Did the foundation have unrelated business gross income of \$1,000 or more during the year?  5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?  5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?  6 V  17 V  18 H "Yes," attach the statement required by General Instruction 7.  18 Are the requirements of section 508(e) (relating to sections 4941 thro	b		£1 ,3					
8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 8 8 ☐ Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9 ☐ 53 32 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount owerpaid ▶ 10 11 Enter the amount of line 10 to be Credited to 2017 estimated tax ▶ Refunded ▶ 11  Part VII-A Statements Regarding Activities 1a 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?								
8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached \$ 1 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	_			الاختاب				
10 Overpayment, If line? Is more than the total of lines 5 and 8, enter the amount overpaid				<del> </del>				
10   Dverpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid   10   11				<del></del>				
The the amount of line 10 to be 'Credited to 2017 estimated tax ▶ Refunded ▶ 11  Part VII-A Statements Regarding Activities  1 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?  b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?  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.  c Did the foundation file Form 1120-POL for this year?  d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (i) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$  e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$  2 Has the foundation engaged in any activities that have not previously been reported to the IRS?  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 J If "Yes," has it filed a tax return on Form 990-T for this year?  4 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?  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  8 Enter the states to which the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction 7? If "No," attach explanation  4 J 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		<del></del>	63	32				
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c Did the foundation file Form 1120-PQL for this year?  d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year"  (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$  e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$  2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		Instructions for the definition)?	1b	✓				
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Incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3							
b If "Yes," has it filed a tax return on Form 990-T for this year?		incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	·	1				
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(or designate) of each state as required by <i>General Instruction G? If "No," attach explanation</i>		and the state to mile, the real eather reporte of the miles it is registered (see manufactions) P						
(or designate) of each state as required by <i>General Instruction G? If "No," attach explanation</i>	b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General						
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 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV			8b 🗸					
4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(i)(3) or						
Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their								
and address.		·	9	✓				
names and addresses	10	en de la companya de						
		names and addresses	10 🗸	<u> </u>				

Part	VII-A Statements Regarding Activities (continued)			
			Yes	No
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	ļ	<b>↓</b> ✓
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	1		
	person had advisory privileges? If "Yes," attach statement (see instructions)	12	<del> </del>	<del>                                     </del>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	<b>✓</b>	
4.4	Website address ▶ aauinc.org		4070	
14	7/0.4	208-853		
4.	Located at ► 10151 River Rock Lane Garden City, ID ZIP+4 ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	8371		<u> </u>
15	and enter the amount of tax-exempt interest received or accrued during the year		•	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other author	itv	Yes	No
10	over a bank, securities, or other financial account in a foreign country?	16	1	1
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name		<u> </u>	1
	the foreign country ▶			
Parl	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<del></del>
_	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Ĭ.	Yes	No
1a	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? $\square$ Yes $\square$ No	·   ////		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			4
	disqualified person?	98° 83		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes	1" '32		l g
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes V. No.	<b>'</b>		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			\$25
	(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.)	,		
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations	3		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	88 5 A.S.,	
	Organizations relying on a current notice regarding disaster assistance check here ▶□		13. 4	1
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	t [		
	were not corrected before the first day of the tax year beginning in 2016?	1c		1
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	<b>)</b>		
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	14:	* * * *	
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2016?	)		`
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	,   ,		
U	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b	_	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.		<b>†</b>	1
_	<b>▶</b> 20 ,20 ,20 ,20			
За	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?	י		
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation of			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the	∍		
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			}
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		_	
	foundation had excess business holdings in 2016.)	3b	+	<del> </del>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		/
Þ	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize it charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016			
	- Sharkable parpose that had not been femoted from jeopardy beliefe the hist day of the tax year beginning in zero	. 140	1	I 4

Page	6

Part	VII-B Statements Regarding Activities	for W	hich Form	4720 l	May Be R	equire	<b>d</b> (contin	ued)		
5a	During the year did the foundation pay or incur ar						_			
•	(1) Carry on propaganda, or otherwise attempt to						☐ Yes	✓ No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,									
	directly or indirectly, any voter registration drive?									
	(3) Provide a grant to an individual for travel, study, or other similar purposes?									
	(4) Provide a grant to an organization other than a charitable, etc., organization described in									
	section 4945(d)(4)(A)? (see instructions)									
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational									
	purposes, or for the prevention of cruelty to cl						∐Yes	V No		
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53.4945 or in a current notice r							ibea in		
	<del>-</del>	-	_				• • •	 	5b	% zal
•	Organizations relying on a current notice regarding the answer is "Yes" to question 5a(4), does the					• •				
C	because it maintained expenditure responsibility						□Yes	□N₀		
	If "Yes," attach the statement required by Regulat		-				☐ 1€3	140		
6a	Did the foundation, during the year, receive any f					emiums				
•	on a personal benefit contract?						∏Yes	✓ No		
b	Did the foundation, during the year, pay premium	s, dire	ctly or indired	ctly, on	a personal	benefit	contract	? .	6b	
	If "Yes" to 6b, file Form 8870.		·	-					9.3	33 3
	At any time during the tax year, was the foundation a						☐ Yes	✓ No		
_	If "Yes," did the foundation receive any proceeds								7b	
Par	VIII Information About Officers, Direct	ors, I	rustees, Fo	bunda	tion Mana	agers,	Highly F	'aid Ei	mploye	es,
	and Contractors  List all officers, directors, trustees, foundation		gara and th	oir 000	noncation	· (noo ii	actmuotio:	26)		
_1_	List all officers, directors, trustees, foundation		e, and average		npensation		Contributions		(-) F	
	(a) Name and address	hou	rs per week ed to position	i (If n	ot paid, ter -0-)		yee benefit erred compe			nse account, Ilowances
Angie	Harrison	Preside	·	-					-	
	W River Rock Lane Garden City, ID 83714	riesiue	;iit - 3							
Ambe	r Mallet	Secreta	arv - 1							
4820	Bond St Boise, ID 83706									
Sharo	n Burke	Treasu	rer - 1			}		1		
1415 i	Fort St Boise, ID 83712									
Kirsti	n Heffner	Vice P	resident - 1			}				
	McMullen St Boise, ID 83709	- /- 41-						<del></del>	-\ <b>16</b>	
	Compensation of five highest-paid employee "NONE."	es (oth	er than thos	se incii	uaea on II	ne 1 —	see instr	uction:	s). IT no	ne, enter
	(a) Name and address of each employee paid more than \$50,000	0	(b) Title, and a		(c) Compe	nsation	(d) Contribi employee plans and d	benefit		nse account,
			devoted to p	osition			compens			
							<del></del>			
			ł				:			
			-							
			1							
			<del> </del>							
			1		Ì					
Total	number of other employees paid over \$50,000 .		<u> </u>	· · ·	<u> </u>	<u>· · ·</u>	<u>· · · · </u>	. ▶		DE (2016)
									~ CACM	1-W- /2010

Part VIII	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid E and Contractors (continued)	imployees,
3 Five	highest-paid independent contractors for professional services (see instructions). If none, enter "NC	NE."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
		İ
fotal numb	per of others receiving over \$50,000 for professional services	
Part IX-A	Summary of Direct Charitable Activities	
	- Summary of Direct Characteristics	
	undation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number ones and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
		-
	,	-
2		
		-
		-
3		
		- }
4		
		_
Part IX-E	Summary of Program-Related Investments (see instructions)	
Describe t	ne two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1		_
2		
		_ [
All other p	rogram-related investments. See instructions	
3		
		1
Fotal. Add	lines 1 through 3	
		Form 990-PF (2016

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei	gn foun	dations,
	see instructions.)		
` 1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	107,487
C	Fair market value of all other assets (see instructions)	1c	120,425
d	<b>Total</b> (add lines 1a, b, and c)	1d	227,912
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	227,912
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	3054
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	224,858
6	Minimum investment return. Enter 5% of line 5	6	11,242
Part .	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations check here ► ☐ and do not complete this part.)	oundati	ons
1	Minimum investment return from Part X, line 6	1	11,242
2a	Tax on investment income for 2016 from Part VI, line 5	1 1	
b	Income tax for 2016. (This does not include the tax from Part VI.) 2b	\$ A	
С	Add lines 2a and 2b	2c	11,305
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	11,305
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7	11,305
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	530,306
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		<del></del>
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	530,306
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	530,306
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	g wheth	er the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		
			QQA-DE (0016)

art 2	Undistributed Income (see instruction	ns)			
1	Distributable amount for 2016 from Part XI,	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
	line 7				11,305
2	Undistributed income, if any, as of the end of 2016.				
а	Enter amount for 2015 only				
b	Total for prior years: 20,20,20				
3	Excess distributions carryover, if any, to 2016:				
а	From 2011			, , , , ,	, 7, 1 , 1, 1).
b	From 2012		•	, <b>%</b> 34	
C	From 2013				
d	From 2014				
е	From 2015				
f	Total of lines 3a through e			4.3 2. 38a 22	* * * * * * * * * * * * * * * * * * * *
4	Qualifying distributions for 2016 from Part XII,		. ,		
	line 4: ▶ \$				
a	Applied to 2015, but not more than line 2a.  Applied to undistributed income of prior years		***** 4, 7,		
b	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election	* * * XX	19		
Ü	required—see instructions)				
d	Applied to 2016 distributable amount	34 × 458 × 9		23 A C	
e	Remaining amount distributed out of corpus		37 37 5	4 44	
5	Excess distributions carryover applied to 2016		10 Page 10 Pag		
•	(If an amount appears in column (d), the same		337	1.4	
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5		300 300 300	A Section 1	
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		,		
d	Subtract line 6c from line 6b. Taxable	** ***********************************	*		
_	amount-see instructions	( ) ( ) ( ) ( ) ( )			
е	Undistributed income for 2015. Subtract line		,		1 1 1
	4a from line 2a. Taxable amount-see		* *		1 1
	instructions				50 100
f	Undistributed income for 2016. Subtract lines				
	4d and 5 from line 1. This amount must be			,	
	distributed in 2017				
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)				
8	Excess distributions carryover from 2011 not				
Ü	applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2017.				
_	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9.				-
а	Excess from 2012	_			
b	Excess from 2013	_			
C	Excess from 2014	_			
d	Excess from 2015	4			
e	Excess from 2016		<u></u>	<del></del>	Form <b>990-PF</b> (2016)
					Form <b>330-FF</b> (2016)

art	XIV Private Operating Foundar	ions (see instri	ictions and Part	VII-A question 9)		
	If the foundation has received a ruling					
	foundation, and the ruling is effective for					
b	Check box to indicate whether the four			<u>_</u>	tion 4942(j)(	3) or  4942(j)(
	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) 2016	<b>(b)</b> 2015	(c) 2014	(d) 2013	(e) Total
b	85% of line 2a					
С	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					
е	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:					
а	"Assets" alternative test - enter.		}	]		
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
þ	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
С	"Support" afternative 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					
art	XV Supplementary Information	n (Complete ti	nis part only if	the foundation ha	d \$5,000 or m	ore in assets
-	any time during the year-	see instruction	ns.)			
1	Information Regarding Foundation	Managers:				
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	nly if they have c	ontributed more t	han \$5,000). (See se	ction 507(d)(2).)	
ngie	Harrison					
b	List any managers of the foundation ownership of a partnership or other er					rge portion of t
2	Information Regarding Contribution	Grant Gift Los	an Scholarshin	etc Programs		
_	Check here ► ☐ if the foundation				rganizations and	does not acce
	unsolicited requests for funds. If the fother conditions, complete items 2a,	oundation makes				
а	The name, address, and telephone nu		ddress of the per	son to whom applica	tions should be a	ddressed:
	e Harrison 10151 W. River Rock Lane Bois			applica		

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

c Any submission deadlines:

factors:

Part	XV Supplementary Information (cont	tinued)							
3 Grants and Contributions Paid During the Year or Approved for Future Payment									
	Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or	Amount				
	Name and address (home or business)	or substantial contributor	recipient	contribution					
а	Paid during the year	-							
Attac	hed List								
			1						
			:						
			[						
			•						
	Total		<u> </u>	▶ 3a					
b	Approved for future payment	1							
		1							
	•								
	Total			▶ 3ь					

Ente	r gro	ss amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by section	on 512, 513, or 514	(e)
•			(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions.)
1		gram service revenue.			<del> </del>		<del> </del>
	a		<del></del>		<del> </del>	<del>-</del>	<del></del> -
	b		<b> </b>		<del> </del>		
	Ç		<b> </b>		<del> </del>		<del> </del>
	d		<del></del>		<del> </del>		<del> </del>
	e f		<b> </b>		<del> </del>		<u> </u>
	<u>'</u>	Face and contracts from accomment accompany	<u> </u>		<del> </del>		<del> </del>
_	_	Fees and contracts from government agencies	ļ		<del> </del>		<del> </del>
2		mbership dues and assessments	<del></del>	-	<del>                                     </del>	<del></del>	<del> </del>
3		rest on savings and temporary cash investments idends and interest from securities	<del></del>		<del> </del>		<del> </del>
4				, š, ,	· * 6 1		11/2
5		rental income or (loss) from real estate:	<u>*                                    </u>	<u>. ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~</u>	\$ 27 .	3	***
		Debt-financed property	<del></del>		<del>                                     </del>		<del> </del>
		Not debt-financed property					<del> </del>
6		rental income or (loss) from personal property per investment income	<del> </del>		<del> </del>		<del> </del>
7 8		n or (loss) from sales of assets other than inventory	<del></del>		<del> </del>		<del> </del>
		nor (loss) from special events	<del></del>		<del>   </del>		<del> </del>
9		oss profit or (loss) from sales of inventory	<del></del>		<del> </del>		<del> </del>
10 11					<del> </del>		<del> </del>
• • •	b	<del></del>	<del></del>	<del> </del>	<del> </del>		<del> </del>
					+		<del> </del>
	c d		<b></b>		<del>                                     </del>		<del> </del>
	e			<del></del>	<del>                                     </del>		<del>                                     </del>
12	-	ototal. Add columns (b), (d), and (e)			i X. S. i		<del> </del>
						13	<del></del>
10							
		, ,, ,, ,,				10	
(See	WOI	ksheet in line 13 instructions to verify calculation	ns.)				
(See	WOI	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the
(See	wol	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the ctions.)
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the ctions.)
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the ctions.)
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the ctions.)
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the ctions.)
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the ctions.)
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the ctions.)
(See	wor t X e No	ksheet in line 13 instructions to verify calculation VI-B Relationship of Activities to the A	ns.) <b>Accomplishm</b>	ent of Exemp	ot Purposes		importantly to the ctions.)

Form 99	90-PF (2	2016)										Pa	ge <b>13</b>
Part	XVII	Exempt Or	n Regarding Tr ganizations								ritabl		
•1	ın se		directly or indirectline Code (other that									Yes	No
а	Trans	sfers from the rep	porting foundation	to a nonch	narıtable exer	npt orga	anızatıon o	f:					
	(1) C	Cash									1a(1)		_
		Other assets .									1a(2)		
b		r transactions:									41. (4)		
			a noncharitable e	-							1b(1) 1b(2)		
			ets from a noncha , equipment, or ot		· •						1b(3)		
			rrangements								1b(4)		
			rantees								1b(5)		<u></u>
		-	ervices or member								1b(6)		L
C	Shar	ing of facilities, e	quipment, mailing	lists, other	assets, or p	aid emp	loyees .				1c		<u></u>
đ			of the above is "\										
	value	e of the goods, o	ther assets, or se	rvices givei	n by the repo	orting fo	undation, I	If the found	lation rece	ived less	than	fair m	arket
			on or sharing arra					tion of transfe					
(a) Lin	e no	(b) Amount involved	(c) Name of no	oncharitable ex	empt organization	on	(a) Descrip	tion of transfe	ers, transaction	ns, and shar	ing arra	angeme	
	+		<del></del>		<del> </del>	+		<del></del>					
			<del> </del>		· · · · · -		<del></del>						
					<del></del>								
						+							
		<del></del>	<del> </del>										
												_	
			1										
								_					
2a b	desc	cribed in section (	ectly or indirectly 501(c) of the Code e following schedi	e (other tha							] Yes		No
		(a) Name of organ	lization	-	(b) Type of org	anization			(c) Description	on of relation	nship	<del>.</del>	
					· · · · · · · · · · · · · · · · · · ·								
	10	tor possibles of second	I dealare that I have a	mined this set	n includes ses	2020::22	abadulas sad	totomosts ==	to the best of	my kenyled	00 000	holief -	un troop
Sigr		ect, and complete. Deci	I declare that I have exar laration of preparer (other	mmed this returner than taxpayer	n, including accord ) is based on all in	formation of	of which prepa	rer has any kno	wledge.	<u> </u>			$\overline{}$
Here	e	See	Burk	U	11/16/1-	7	Trea	sure	1_	May the IF with the p (see instruction	reparer	shown	below
	ــــــــــــــــــــــــــــــــــــــ	Print/Type prepare		Prenare	Date r's signature	Title		Date	<del></del>		TIN	===	
Paid			, Granic	Trepare	, o signature			Jane	Chec	k lif lifemployed			
Prep								L	Firm's EIN				
Use	Only	Firm's name Firm's address >							Phone no				
		1 3 4407633 2	<del></del>						1 1.0.10 110	Fo	m 99	0-PF	(2016)

#### Schedule B

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

**Schedule of Contributors** 

OMB No 1545-0047

2016

Department of the Treasury Internal Revenue Service

► 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.irs.gov/form990.

**Employer identification number** Name of the organization 26-4682140 Angels Among Us, Inc Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions. **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)	Page <b>2</b>
Name of organization	Employer identification number

Part I	Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.							
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
1	Angie Harrison 10151 W River Rock Ln Boise, ID 83714	\$\$ 	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					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Moncash Complete Part II for noncash contributions.)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		<b>\$</b>	Person					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$ 	Person					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person					

Employer identification number

Part II	Noncash Property (See instructions). Use duplicate cop	ies of Part II if additional spa	ce is needed.
(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
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		   \$	

(d) Description of how gift is held

Schedule B (Form 990, 990-EZ, or 990-PF) (2016)

(a) No.

(b) Purpose of gift

Name of organization **Employer identification number** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or Part III (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ Use duplicate copies of Part III if additional space is needed. (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

from Part I	(b) Purpose of gift	(c) Use of gi	ft 	(d) Description of how gift is held
-		(e) Transfer o	f aift	
	Transferee's name, address, an	• •	_	ship of transferor to transferee
			••••••	
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held
	Tunnofauro's normal adduses ou	(e) Transfer o		ahin of tunnafaror to transferre
}	Transferee's name, address, an	u zir + 4	Helation	ship of transferor to transferee

(c) Use of gift

# Angels Among Us, Inc. 2016 Form 990 PF

Part XV Suplemental Information: Grants and Contributions Paid During the Year

Organization	Relationship	Status	Purpose	Amount
Donation 4 Paws for Ability Inc	None	501(c)(3)	Social Service	1,000 00
Donation Agua Muisne Corporation	None	501(c)(3)	Social Service	1,000 00
Donation Alzheimer's Association	None	501(c)(3)	Health	1,000 00
Donation American Heart Association	None	501(c)(3)	Health	500 00
Donation Big Brothers Big Sisters of Southwest Idaho	None	501(c)(3)	Social Service	1,940 00
Donation Birthright	None	501(c)(3)	Social Service	10,536 60
Donation BK	None	501(c) (3)	Education	117,125 27
Donation Boise Rescue Mission Ministries	None	501(c)(3)	Social Service	957 98
Donation Boise State University	None	501(c)(3)	Education	1,000 00
Donation Boys & Girls Club of Ada County	None	501(c)(3)	Social Service	5,950 00
Donation Capstone Missions	None	501(c)(3)	Religious	720 00
Donation Catholic Charities of Idaho	None	501(c)(3)	Religious	4,700 00
Donation Church Builders Incorporated	None	501(c)(3)	Religious	1,000 00
Donation Desert Sage Elementary School	None	501(c)(3)	Education	500 00
Donation Fellowship of Catholic University Students	None	501(c ) (3)	Religious	10,000 00
Donation Genesis World Mission	None	501(c)(3)	Health	25,240 00
Donation Holy Apostles	None	501(c)(3)	Religious	100,000 00
Donation Hope House	None	501(c)(3)	Social Service	10,000 00
Donation Idaho Catholic Foundation	None	501(c)(3)	Religious	30,005 60
Donation Idaho Diaper Bank	None	501(c)(3)	Social Service	1,000 00
Donation Idaho Voices for Children Foundation, Inc.	None	501(c)(3)	Social Service	5,000 00
Donation Knights of Columbus	None	501(c)(3)	Religious	5,000 00
Donation Life's Kıtchen	None	501(c)(3)	Social Service	480 00
Donation Make-A-Wish Foundation of America	None	501(c)(3)	Social Service	1,000 00
Donation Movin' With the Spirit, Inc. Haiti180	None	501(c)(3)	Social Service	120,000 00
Donation One Stone	None	501(c)(3)	Education	1,000 00
Donation Saint Alphonsus Foundation	None	501(c ) (3)	Health	1,500 00
Donation Saint Paul's Outreach	None	501(c)(3)	Religious	5,000 00
Donation Salt and Light Radio	None	501(c)(3)	Religious	14,083 60
Donation Salvation Army	None	501(c ) (3)	Social Service	1,000 00
Donation Small Village Foundation	None	501(c)(3)	Social Service	4,802 10
Donation Society of St. Vincent de Paul	None	501(c)(3)	Religious	6,584 02
Donation Spinner Publications, Inc.	None	501(c)(3)	Social Service	1,000 00
Donation St. Luke Foundation for Haiti	None	501(c)(3)	Social Service	10,249 31
Donation St. Mary's Church	None	501(c ) (3)	Religious	20,700 00
Donation St. Paul Center for Biblical Theology	None	501(c ) (3)	Religious	2,500 00
Donation St. Raymond Catholic Church	None	501(c ) (3)	Religious	6,000 00
Total				530,074.48