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

2016

OMB No 1545-0052

Department of the Treasury Internal Revenue Service

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Open to Public Inspection

For cal	enda	r year 2016 or ta	x year beginning		<u>, 2016</u>	, and ending		<u>-</u>				
	OUGLAS J. AND GENEVA H. FIFE FOUNDATION O BOX 479							A Employer identification number 45-2438377 B Telephone number (see instructions)				
		CITY, UT 8	34302				L	435-723-8456				
							С	If exemption application is	pending, check here			
G Che	Check all that apply. Initial return Initial return of a former public charity							1 Foreign organizations, che	ck here			
	Final return Amended return Address change Name change							2 Foreign organizations mee	ting the 85% test check			
H Che	Check type of organization: X Section 501(c)(3) exempt private foundation							here and attach computation				
1		ection 4947(a)(1)				orivate foundation	E	If private foundation status	s was terminated			
		et value of all assets a		Acc	counting method X C	ash Accrual	1	under section 507(b)(1)(A), check here			
(tror ►\$	n Par	t II, column (c), line 16		_	Other (specify)		JF.	If the foundation is in a 60	-month termination			
Part I		869, nalysis of Re		Part I,				under section 507(b)(1)(B)), check here			
Faiti		xpenses (The i			(a) Revenue and expenses per books	(b) Net investme income	nt	(c) Adjusted net income	(d) Disbursements for charitable			
	C	olumns (b), (c), a arily equal the an	nd (d) may not n	eces-	oxponded per books			meeme	purposes			
	(5	see instructions)))	(a)					(cash basis only)			
	1		, etc., received (attach schedu			· 💝 🕺						
	2	Check ► X if the foun	idation is not required to atta	ch Sch B				************				
	3	Interest on savings and ten	· ·									
	4	Dividends and interest from Gross rents.	n securities		43,360.	43,30	<u> 50.</u>					
		Net rental income or (loss)						·				
R E V	_	Or (IOSS) Net gain or (Ioss) from sal	le of assets not on line 10									
		Gross sales price for assets on line 6a	all		4 " .* * / :	1 3 1 4	,					
Ě	7 Capital gain net income (from Part IV, line 2)			* ,* ** : * *			57 48 5					
U	8	Net short-term capita Income modifications	-		* * * · · / *			 	* * * * * * * * * * * * * * * * * * *			
Ε	10	Gross sales less returns and				1		*				
	}	allowances h Less Cost of			3 11 1 × ×	3 3 V		1 1				
	}	goods sold				, , , , , , , , ,		*, *, *				
2017	11	Gross profit or (loss) (attain Other income (attach				<u> </u>		 	- 4.*			
©			•						,1			
•		Total Add lines 1 t			43,360.	43,30	<u>50</u> .	0.				
MAN	13 14	Other employee sala	cers, directors, trustees	, etc .	0.	 		 				
2	15	Pension plans, emplo	•					 				
NED	16	a Legal fees (attach sci	•					CIVED				
Z M	Į i	Accounting fees (atta	•	t l	550.		仁		550.			
N - S	J	Other professional fees (a)	ttach sch)					188				
PSS	17 18	Taxes (attach schedule)(se	_{e instrs)} See St	m 2	757.	33	WAY	0 4 2017 19				
R∄DR A A	19	Depreciation (attach	,		757.			<u></u>				
TRATIVE	20	schedule) and deplet Occupancy	ion				20	DENLUT				
N V G E	21	Travel, conferences,	and meetings					 				
A E N X D P	22	Printing and publicati										
A E X P E N S E S	23	Other expenses (atta	=	+ 3	2 727	2 7	יי					
Ñ S	24	ات Total operating and a	ee Statemer administrative	L 3	3,737.	3,73	57.					
E S		expenses. Add lines	13 through 23	VII	5,044.	3,73	<u>37</u> .		550.			
1	25	Contributions, gifts, grants	• -	ΛV	60,000.				60,000.			
 	26	Total expenses and of Add lines 24 and 25.	<u> </u>		65,044.	3,73	37.	0.	60,550.			
İ	27	Subtract line 26 from Excess of revenue or	-		}				1			
	'	and disbursements	•		-21,684.							
		Net investment incor	· -	-		39,62	23.					
DAA E	<u></u> '	C Adjusted net Income	(if negative, enter -0-)	<u>. </u>	<u> </u>			<u>0.</u>	<u> </u>			

Parl	art II Balance Sheets 1 Cash – non-intere		Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		End of year		
			(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	[_					
	2		ary cash investments	57,241.	_35,557.	35,557.		
	3	Accounts receivable						
	١.	Less. allowance for	doubtful accounts =					
	4	Pledges receivable Less allowance for	doubtful accounts					
	5	Grants receivable				 		
	Ι.		nava divastava triistaaa and athar					
	6		cers, directors, trustees, and other ch schedule) (see instructions)					
Δ	7	Other notes and loans rec						
ŝ		Less: allowance for						
A S E T	8	Inventories for sale						
	9	Prepaid expenses a	nd deterred charges					
S	l		and state government statement 4	818,787.	806,812.	834,359.		
	l	Investments — corporate	,					
	l	Investments — corporate	,					
	11	Investments – land, equipment basis)				
		Less accumulated deprect (attach schedule)	ıatıon	,				
	12	Investments - morto	gage loans					
	13	Investments - other	(attach schedule)					
	14	Less. accumulated deprec						
		(attach schedule)	·					
		Other assets (descri Total assets (to be a see the instructions.	be completed by all filers —) Also, see page 1, item I)	876,028.	842,369.	869,916.		
L	17		nd accrued expenses	070,020.	042,309.	/* (* &* M*) 1		
I	l	Grants payable						
A B	19							
Ľ	20	Loans from officers, direct	tors, trustees, & other disqualified persons	-				
Ī	21	Mortgages and other notes	s payable (attach schedule)			1		
ı	22	Other liabilities (des	cribe)			· •		
E S	23		lines 17 through 22)	0.	0.			
			llow SFAS 117, check here 24 through 26 and lines 30 and 31.			,		
NF	24	Unrestricted	·			!		
Ë U T N	25	Temporarily restricte	ed			1		
D	26	Permanently restrict	ed			1		
A B S A E L A		Foundations that do and complete lines 2	not follow SFAS 117, check here ►X 27 through 31.					
EL	27	Capital stock, trust p	orincipal, or current funds			1		
SN	28	Paid-in or capital surplus,	or land, bldg., and equipment fund		- -	1		
O E	29	Retained earnings, accumi	ulated income, endowment, or other funds	876,028.	842,369.]		
RS	30		und balances (see instructions)	876,028.	842,369.]		
	31	Total liabilities and (see instructions)	net assets/fund balances	876,028.	842,369.			
Part	111	<u> </u>	ges in Net Assets or Fund Balance		042,005.	<u> </u>		
			alances at beginning of year - Part II, colu		aree with			
1	end-	of-year figure reported	d on prior year's return)	iiiii (a), iiile 30 (must ai	gree with	876,028.		
2	Ente	r amount from Part I,	line 27a .		2	-21,684.		
3	Other	increases not included in lin	ne 2 (itemize)		3			
		lines 1, 2, and 3			4	854,344.		
		ases not included in line 2 (5	11,975.		
6	Total	net assets or fund ba	alances at end of year (line 4 minus line 5)	- Part II, column (b), I	ine 30 6	842,369.		

BAA

Form 990-PF (2016)

(a) List and describ	be the kind(s) of property sold (e.g., rehouse; or common stock, 200 shares	real estate, (b)	How acquired — Purchase — Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a N/A					
b					
C					
d					
e				<u> </u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) m	
a b			- -		
С					-
	 	- · · · · · · · · · · · · · · · · · · ·		·	_
e	-				
	owing gain in column (h) and owned b	by the foundation on 12/31/69	-	(I) Cours (Col	(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		(I) Gains (Col ain minus col. (k), b an -0-) or Losses (fr	ut not less
					
b			<u> </u>		
c			·		
d					
e					
2 Capital gain net income or (r		enter in Part I, line 7 ter -0- in Part I, line 7	2		
3 Net short-term capital gain o	r (loss) as defined in sections 1222(5) and (6).			
If gain, also enter in Part I, I in Part I, line 8	ine 8, column (c) (see instructions)	f (loss), enter -0-	3		
Part V Qualification Und	er Section 4940(e) for Reduce	d Tax on Net Investmen	t Income		
If 'Yes,' the foundation does not q	section 4942 tax on the distributable a ualify under section 4940(e) Do not on each column for each year, see the in	complete this part		Yes	X No
	1		1165.	(4)	
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use assets		(d) Distributior (col (b) divided	
2015	48,000.	898,8	342.		0.053402
2014	48,000.	957,9	978.		0.05010
2013	65,000.	923,3	360.		0.070395
2012	15,000.	36,9	942.	_ <u></u>	0.406042
2011					
2 Total of line 1, column (d)			2		0.579945
3 Average distribution ratio for number of years the foundat	the 5-year base period — divide the ion has been in existence if less than	total on line 2 by 5, or by the 5 years	3		0.144986
4 Enter the net value of nonch	arıtable-use assets for 2016 from Par	t X, line 5	4		875,431
5 Multiply line 4 by line 3			5		126,925
6 Enter 1% of net investment	income (1% of Part I, line 27b)	•	6	 	396
7 Add lines 5 and 6 .			. 7		127, 321
8 Enter qualifying distributions	from Part XII, line 4		8	<u> </u>	60,550.
If line 8 is equal to or greater t Part VI instructions	han line 7, check the box in Part VI, line	1b, and complete that part using	g a 1% tax r	ate See the	

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		438377		F	age 4
Pai	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in	nstruction	ıs)		
1 a	a Exempt operating foundations described in section 4940(d)(2), check here.				
	Date of ruling or determination letter (attach copy of letter if necessary – see instructions)				
ı	b Domestic foundations that meet the section 4940(e) requirements in Part V,	1			792.
	check here. ► and enter 1% of Part I, line 27b				
•	c 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-)	2			<u>0.</u>
3	Add lines 1 and 2	3		7	<u>792.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		7	<u> 792.</u>
ь	Credits/Payments:				
	a 2016 estimated tax pmts and 2015 overpayment credited to 2016.				
	b Exempt foreign organizations — tax withheld at source 6b				
	c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 6 d 6 d	-		<	
7	d Backup withholding erroneously withheld Total credits and payments Add lines 6a through 6d				
8	Enter any penalty for underpayment of estimated tax. Check here X If Form 2220 is attached	7		<u> </u>	700.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	8 9			20.
10		10			0.
11		11			388.
	rt VII-A Statements Regarding Activities	<u> </u>			0.
	<u> </u>	 .	1 1 1	Yes	No
1 8	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?	i	1 a	163	X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes		- <u></u>		
	(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		W .	. ,	<u>, "</u>
	or distributed by the foundation in connection with the activities				,
	Did the foundation file Form 1120-POL for this year?		1 c		X
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.		% . , ,	20,3	7 %
	(1) On the foundation \$\\ 0\ (2) On foundation managers Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	0.	J	W	, ** »,
	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.			- 1	1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			* 4	. (3
ŭ	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		Х
	olf '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			\neg	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			l	
	By language in the governing instrument, or			-	
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict				
_	with the state law remain in the governing instrument?		6	Х	
	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)		,		
	UT				İ
b	o 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 General Instruction G? If 'No,' attach explanation.	}		.,	'
_		•	8ь	<u> </u>	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4 for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If 'Yes,' complete I	942()(5)	9		v
4.0		, GILAIV	-		X
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		10	J	Х
BAA		For	m 990	-PF (2)	
				- \	,

Pai	rt VII-A	Statement	s Kegaro	ing Activi	ities (co	munuea)							
11	At any ti within th	me during the general meaning of s	year, did th section 512(e foundatior b)(13)? If 'Y	n, directly 'es,' attac	or indirectly, o	wn a controlled ent e instructions)	ity			11	Yes	No X
12	Did the for	oundation make privileges? If "	a distribution Yes,' attach	n to a donor n statement	advised fu (see instr	ind over which thructions)	ne foundation or a dis	squalified per	son had		12		Х
13	Did the f	foundation com	ply with the	public insp	ection red	quirements for	its annual returns a	nd exemption	n applica	tion?	13	X	
		address			► <u>N</u> /	<u>'A</u>							
14	The boo	ks are in care o	of KAT	HRYN F.	DAMON	-		Telephon		435-72	23-84	156_	
	Located					RIGHAM_CIT		ZIP + 4 •	2.25	02	~-,-		
15			•		_		eu of Form 1041 -	Check here			N/A	•	Ш
	and ente	er the amount o	of tax-exem	pt interest r	eceived o	r accrued durir	g the year		•	15	1		N/A
16	At any tii bank, se	me during calend ecurities, or othe	dar year 201 er financial	6, did the foi account in a	undation h a foreign	ave an interest i country?	n or a signature or o	ther authority	over a		16	Yes	No X
		instructions for name of the for			equireme	nts for FinCEN	Form 114. If 'Yes,'					1	
Pa	rt VII-B	Statement	s Regard	ing Activi	ities for	Which Forn	n <mark>4720 M</mark> ay Be I	Required					
		-				· ·	exception applies.					Yes	No
1 :	_	he year did the		•	-					~			
	(1) Eng	age in the sale	or exchang	e, or leasing	g of prope	erty with a disq	ualified person?		Yes	X No	١ ,	3	**(}
	(2) Borr disq	ow money from ualified person	n, lend mon	ey to, or oth	nerwise ex	xtend credit to	(or accept it from) a	a	Yes	XNo		* *	
	(3) Furn	ıısh goods, serv	vices, or fac	cilities to (or	accept th	nem from) a dis	squalified person?		Yes	XNo	,	, l	¥4
	(4) Pay	compensation	to, or pay o	r reimburse	the expe	nses of, a disq	ualified person?		Yes	X No	/ (· .		Ø., 3
	(5) Tran	nsfer any incom he benefit or us	e or assets se of a disq	to a disqua ualified pers	llified pers	son (or make a	ny of either availab	le	Yes	XNo			
	(6) Agre foun of ge	ee to pay mone dation agreed to overnment serv	y or proper make a gra vice, if term	ty to a gove nt to or to en inating withi	rnment of nploy the one of the one of the one of the original original orig	fficial? (Except official for a peri s)	ion. Check 'No' if thod after termination	ne	Yes	XNo	* *,		
I	b If any ar Regulati	nswer is 'Yes' to ons section 53	o 1a(1)-(6) 4941(d)-3 d	, did any of or in a curre	the acts	fail to qualify u regarding disas	nder the exceptions ster assistance (see	described i	n 5)?	1	1 b	N	∠
	Organiza	ations relying o	n a current	notice rega	rding disa	aster assistance	check here		>				7.7
(c Did the t that wer	foundation enga e not corrected	age in a pri before the	or year in ai first day of	ny of the the tax ye	acts described ear beginning i	in 1a, other than ex n 2016?	cepted acts	,		1 c		X
2	Taxes of private of	n failure to dist operating found	ribute incor lation define	ne (section e ed in section	4942) (do 1 4942(j)(i	es not apply fo 3) or 4942(j)(5)	r years the foundat)	ion was a					")-{
;	a At the e and 6e,	nd of tax year 2 Part XIII) for ta	2016, did th ex year(s) b	e foundation	n have an fore 2016	y undistributed	income (lines 6d		Yes	XNo			ŝ
	If 'Yes,'	list the years	20	, 20 ,	, 20	, 20			_)		İ	
ı							ng the provisions of come? (If applying						
		listed, answer					Time (ii appiying		.(-/(-/ 10		2 b	N	'A
	c If the pr	ovisions of sect	tion 4942(a)	(2) are beir	ng applied	to any of the	years listed in 2a, li	st the years	here				
	► 20 _	_ ,20 ,2	20 , 20										
3		foundation hold se at any time o			t or indire	ct interest in a	ny business	-	Yes	X No			
1	or disque by the C	alified persons commissioner u	after May 2 nder section . 15-, or 20-	26, 1969; 〔2〕 n 4943(c)(7) -vear first pl	the lapse) to disponance hase hold	e of the 5-year ose of holdings ing period? (Us	any purchase by the period (or longer per acquired by gift or see Schedule C, Forn	eriod approv bequest; or	n ed	_	3 b	N	 'A
4		foundation inve le purposes?	st during th	e year any	amount ir	n a manner tha	t would jeopardize i	ts 			4 a		x
							_			į		 	
	b Did the	foundation mak	te any inves	stment in a p	prior year	(but after Dec	ember 31, 1969) that before the first day o	at could					
	the tax	e its chantable i	in 2016?	. nau not bee	removet	a nom jeopardy	ociore the hist day 0				4ь	1	X
BAA	4									Fo	rm 99 0)-PF (

Form 990-PF (2016) DOUGLAS J. AND GEN			45-24	38377 Page (
Part VII-B Statements Regarding Activiti		14/20 May Be Req	uirea (continuea)	
5a During the year did the foundation pay or incu	-	n (nontram 4045(n))2	□ν	1
(1) Carry on propaganda, or otherwise attemp	_		∐Yes X	No
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	ition drive?	_	→ →	No
(3) Provide a grant to an individual for travel,			· · · Yes X	No
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions	a charitable, etc , organi; s)	zation described	Yes X	No
(5) Provide for any purpose other than religio educational purposes, or for the preventio			Yes X	No
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the excepting disaster assistance	otions	5b N/A
Organizations relying on a current notice rega	rding disaster assistand	e check here	▶	
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respons	the foundation claim existing the state of the grant?	emption from the	.Ņ/A ∏Yes ☐	No .
If 'Yes,' attach the statement required by Regi	ulations section 53.4945	5– <i>5(d)</i> .		
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 S
b Did the foundation, during the year, pay premi	iums, directly or indirect	tly, on a personal bene	fit contract?	6 b X
If 'Yes' to 6b, file Form 8870				1
7a At any time during the tax year, was the found b If 'Yes,' did the foundation receive any procee	, ,			No 75
Part VIII a Information About Officers, D				N/A 7b
and Contractors	nectors, rrustees,	roundation manaç	jers, mgmy raiu i	-mpioyees,
1 List all officers, directors, trustees, foundation	n managers and their o	compensation (see inst	ructions),	
	(b) Title, and average	(c) Compensation	(d) Contributions to	(2) 5
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expense account, other allowances
KATHRYN F. DAMON	President	0.	0.	0
1645 NORTH HIGHWAY 38	2.00			
BRIGHAM CITY, UT 84302				ļ
PAUL H. DAMON	Vice Pres	0.	0.	0
1645 NORTH_HIGHWAY_38 BRIGHAM CITY, UT 84302	2.00			
MATTHEW H. DAMON	Socretary	0.	0.	0
1645 NORTH HIGHWAY 38	Secretary 0.50	0.	0.)
BRIGHAM CITY, UT 84302	0.30			
2 Compensation of five highest-paid employees (or	ther than those included	on line 1 – see instruction		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
None				<u> </u>
				,
				
	ĺ			
				ļ
~				
				<u> </u>
				
		L	L	
Total number of other employees paid over \$50,000		· · · ·	···	<u> </u>
BAA	TEEA0306L 12	21b/16		Form 990-PF (2016)

Form 990-PF (2016) DOUGLAS J. AND GENEVA H. FIFE FOUNDATION Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High	45-2438377 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highland Contractors (continued)	iy Palu Employees,
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter 'N	IONE.'
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
None	
	Ì
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 information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
N/A	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	► 0.
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Page 8

see instructions.)	Return (All dornestic foundat	lions must complet	e this part. For	reign tou	ndations,
1 Fair market value of assets not used	(or held for use) directly in carrying o	ut charitable, etc , purpo	ses:		242 262
a Average monthly fair market value				1 a	842,363.
b Average of monthly cash balances			• •	1 b	46,399.
c Fair market value of all other asse	ts (see instructions)		• • •	1 c	
d Total (add lines 1a, b, and c)				1 d	888,762.
e Reduction claimed for blockage or	other factors reported on lines 1a	1 1			
1c (attach detailed explanation)		1 e	0.		
2 Acquisition indebtedness applicab	e to line 1 assets			2	<u> </u>
3 Subtract line 2 from line 1d			-	3	888,762.
4 Cash deemed held for charitable a (for greater amount, see instruction				4	13,331.
5 Net value of noncharitable-use as	sets. Subtract line 4 from line 3 Ei	nter here and on Part \	/, line 4	5	875,431.
6 Minimum investment return. Ente	r 5% of line 5			6	43,772.
	(see instructions) (Section 4 anizations check here ►	942(j)(3) and (j)(5) and do not comple		ting foun	idations
1 Minimum investment return from F	art X, line 6			1	43,772.
2a Tax on investment income for 201	6 from Part VI, line 5	2 a	792.	3	
b Income tax for 2016 (This does n	ot include the tax from Part VI)	2 b		1	
c Add lines 2a and 2b		\		2c	792.
3 Distributable amount before adjus	tments Subtract line 2c from line 1			3	42,980.
4 Recoveries of amounts treated as	qualifying distributions			4	
5 Add lines 3 and 4				5	42,980.
6 Deduction from distributable amou	nt (see instructions)			6	
7 Distributable amount as adjusted	Subtract line 6 from line 5 Enter I	here and on Part XIII, I	ine 1.	7	42,980.
Part XII [®] Qualifying Distribution	ns (see instructions)				
 Amounts paid (including administration a Expenses, contributions, gifts, etc.) 	ve expenses) to accomplish charitable — total from Part I, column (d), Iir	e, etc , purposes ne 26		1 a	60,550.
b Program-related investments — to	tal from Part IX-B		•	1 b	
2 Amounts paid to acquire assets us	sed (or held for use) directly in carr	yıng out charıtable, etc	, purposes	2	
3 Amounts set aside for specific cha	iritable projects that satisfy the			*	
a Suitability test (prior IRS approval	required)		•	3 a	
b Cash distribution test (attach the r	equired schedule)			3 b	
4 Qualifying distributions. Add line	s 1a through 3b Enter here and on	Part V, line 8, and Par	t XIII, line 4	4	60,550.
5 Foundations that qualify under section Enter 1% of Part I, line 27b (see it	n 4940(e) for the reduced rate of tax onstructions)	on net investment income	9	5	_
6 Adjusted qualifying distributions.	Subtract line 5 from line 4			6	60,550.
Note: The amount on line 6 will be qualifies for the section 494	used in Part V, column (b), in subsequ Đ(e) reduction of tax in those years	uent years when calculati	ng whether the fou	ndation	
BAA				F	orm 990-PF (2016)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2016				42,980.
a Enter amount for 2015 only				
b Total for prior years: 20 , 20 , 20		0.	0.	
3 Excess distributions carryover, if any, to 2016:		0.		
a From 2011				
b From 2012 14,844.	1			
c From 2013 19, 558.	1	, '		
d From 2014 815.	1	,		
e From 2015 3, 845.	†		*	1
f Total of lines 3a through e	39,062.	١	'v	
4 Qualifying distributions for 2016 from Part	37,002.		2	
XII, line 4 ► \$ 60,550.		,		×
a Applied to 2015, but not more than line 2a		,	0.	,
b Applied to undistributed income of prior years (Election required — see instructions).	** ** **	0.		
c Treated as distributions out of corpus (Election required – see instructions).			***************************************	
d Applied to 2016 distributable amount	0.		<u> </u>	· · · · · · · · · · · · · · · · · · ·
e Remaining amount distributed out of corpus	17,570.			42,980.
5 Excess distributions carryover applied to 2016	17,370.		***************************************	3
(If an amount appears in column (d) the		5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		0.
same amount must be shown in column (a))				
6 Enter the net total of each column as			\$ 1 × 1	
6 Enter the net total of each column as indicated below:	A 30 10 10 10 10 10 10 10 10 10 10 10 10 10		, **	***(» *********************************
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	56,632.		**	
b Prior years' undistributed income Subtract line 4b from line 2b	1, 4,	0.		
c Enter the amount of prior years' undistributed		0.		
income for which a notice of deficiency has been issued, or on which the section 4942(a)				,
tax has been previously assessed		o.		
d Subtract line 6c from line 6b. Taxable		<u> </u>		
amount - see instructions		0.		
e Undistributed income for 2015. Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2016. Subtract lines	1			
4d and 5 from line 1. This amount must be		-		
distributed in 2017				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				i
may be required - see instructions)	0.			
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions)	0.			
Subtract lines 7 and 8 from line 6a	56,632.			
10 Analysis of line 9				
a Excess from 2012 14,844.		İ		
b Excess from 2013 19,558.				
c Excess from 2014 . 815.				
d Excess from 2015 3, 845.				
e Excess from 2016 17, 570.				
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Form 990-PF (2016) DOUGLAS J. AND G				45-243837	
Part XIV Private Operating Foundat					N/A
1 a If the foundation has received a ruling or determined is effective for 2016, enter the date of the	ruling.			_ ` •	4040(1)(5)
b Check box to indicate whether the foundate		erating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	42.0015	Prior 3 years	40.2012	(e) Total
investment return from Part X for each year listed	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
b 85% of line 2a	ļ			<u> </u>	
c 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					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test – enter		Į l			
(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.					
(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					
Part XV Supplementary Information assets at any time during the	(Complete this	part only if the	toundation had	1 \$5,000 or more	in
1 Information Regarding Foundation Management	_ <u></u>	Structions.)			
a List any managers of the foundation who have	e contributed more th	nan 2% of the total co	entributions received	by the foundation before	ore the
close of any tax year (but only if they have None	e 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	or an equally large	e portion of the owner	ship of
a partnership or other entity) of which the None	foundation has a 1	0% or greater intere	est		,
2 Information Regarding Contribution, Grant, (Cift Loon Scholard	nin eta Duramana			
Check here In the foundation only marequests for funds. If the foundation makes gr	kes contributions to	preselected charitable			
complete items 2a, b, c, and d. a The name, address, and telephone number o					
a The name, address, and telephone number of	r e-mail address of t	ne person to wnom ap	opiications snould be	addressed	
See Statement 6					
b The form in which applications should be	submitted and info	mation and materia	Is they should inclu	ide:	
See Statement for Line 2a					
c Any submission deadlines					
See Statement for Line 2a					
d Any restrictions or limitations on awards,	such as by geograp	phical areas, charitat	ole fields, kinds of	institutions, or other	factors:
See Statement for Line 2a					
BAA	TE	EA0310L 12/16/16		F	orm 990-PF (2016)

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 oundation Recipient Purpose of grant or contribution Amount status of recipient Name and address (home or business) a Paid during the year NONE PC UNRESTRICTED BOX ELDER COMMUNITY PANTRY 3,000. PO BOX 22 BRIGHAM CITY UT 84302 THE ROAD HOME NONE PC UNRESTRICTED 4,000. 210 SOUTH RIO GRANDE STREET SALT LAKE CITY UT 84403 BOY SCOUTS - TRAPPER TRAILS NONE PC UNRESTRICTED 50,000. COUNCIL 1200 EAST 5400 SOUTH **OGDEN UT 84403** PC AMERICAN RED CROSS NONE UNRESTRICTED 3,000. 6616 SOUTH 900 EAST SALT LAKE CITY UT 84121 Total 3 a 60,000. b Approved for future payment 3Ь Total

Part XVI-A Analysis of Income-Producing		d business income	Evaludad	l by goetion 512 512 or 514	
Enter gross amounts unless otherwise indicated ,	(a) Business code	d business income (b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (See instructions.)
1 Program service revenue			code		<u> </u>
a					
b				-	
c					
d	-				
e					
g Fees and contracts from government agencies	+		-		
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments		· · · · · · · · · · · · · · · · · · ·			
4 Dividends and interest from securities		-	14	43,360.	
5 Net rental income or (loss) from real estate:		•		¥ ,	,
a Debt-financed property		<u></u>		<u> </u>	·-···
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory					·
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue	\$		* *	i i k	
a		· ·			
b		<u>.</u>			
c					
_1					
d			1		
e		_	× 8. 1		
e Subtotal. Add columns (b), (d), and (e)	3 / 3/%		, % **	43, 360.	
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e)			, % • *	43,360.	43,360.
e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate	tions)	ichment of Evemp	L	13	43,360.
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th	tions)	<u></u>	t Purp	oses 13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th	tions)	<u></u>	t Purp	oses 13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate. Part XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exemption.	tions)	<u></u>	t Purp	oses 13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculat Part XVI-B Relationship of Activities to th	tions)	<u></u>	t Purp	oses 13	
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e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate. Part XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exemption.	tions)	<u></u>	t Purp	oses 13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate. Part XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exemption.	tions)	<u></u>	t Purp	oses 13	
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e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate. Part XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exemption.	tions)	<u></u>	t Purp	oses 13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate. Part XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exemption.	tions)	<u></u>	t Purp	oses 13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate. Part XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exemption.	tions)	<u></u>	t Purp	oses 13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate. Part XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exemption.	tions)	<u></u>	t Purp	oses 13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate. Part XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exemption.	tions)	<u></u>	t Purp	oses 13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate. Part XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exemption.	tions)	<u></u>	t Purp	oses 13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate. Part XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exemption.	tions)	<u></u>	t Purp	oses 13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate. Part XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exemption.	tions)	<u></u>	t Purp	oses 13	
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e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate. Part XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exemption.	tions)	<u></u>	t Purp	oses 13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate. Part XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exemption.	tions)	<u></u>	t Purp	oses 13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate. Part XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exemption.	tions)	<u></u>	t Purp	oses 13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate. Part XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exemption.	tions)	<u></u>	t Purp	oses 13	y to the instructions)
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate. Part XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exemption.	tions)	<u></u>	t Purp	oses 13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate. Part XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exemption.	tions)	<u></u>	t Purp	oses 13	
e 12 Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculate. Part XVI-B Relationship of Activities to the Explain below how each activity for which accomplishment of the foundation's exemption.	tions)	<u></u>	t Purp	oses 13	

Form 990-PF (2016) DOUGLAS J. AND GENEVA H. FIFE FOUNDATION 45-2438377 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

											
desc	the organization directions of the control of the c	c) of the Code (ot	ngage in any of ther than section	the following w 501(c)(3) orga	ith any ot nizations	her organization (on 527,			Yes	No
a Tran	sfers from the report	ing foundation to	a noncharitable	exempt organiz	zation of						
(1)	Cash								1 a (1)		X
(2)	Other assets	, ,							1a(2)		X
	er transactions:										
	Sales of assets to a r	oncharitable exe	mpt organization	า					1 b (1)		X
	Purchases of assets t								1 b (2)		$\frac{\mathbf{x}}{\mathbf{x}}$
• •	Rental of facilities, ed		-	11112011011					1 b (3)		
		• •	455612					• •			<u>X</u>
٠,	Reimbursement arran	•				•			1 b (4)		<u>X</u>
	Loans or loan guaran							• •	1 b (5)		<u>X</u>
• •	Performance of service								1 b (6)		<u>X</u>
c Sha	ring of facilities, equip	oment, mailing lis	ts, other assets,	or paid emplog	yees				1 c		<u>X</u>
апу	e answer to any of th goods, other assets, or transaction or sharing	g arrangement, sh	now in column (c	d) the value of	the goods	, other assets,	or services	receive	<u>d</u>		·
(a) Line no	. (b) Amount involved	(c) Name o	f noncharitable exem	npt organization	(d)	Description of tran	isfers, transacti	ons, and	sharing arran	gements	<u>; </u>
2a Is th	e foundation directly or	Indirectly affiliated	d with, or related t	to, one or more	ax-exemp	torganizations					
	cribed in section 501(es.' complete the follo	•	tner than section	1 501(c)(3)) or i	n section	52/ ?			∐Yes	X	NO
	(a) Name of organiz		(b) Type	of organization	<u> </u>) Description	n of rel	ationship		
N/A	Cay marile of organiz		(6) 1906	- 51 Grgariizatio	-		, Doson Iption	1010		_	
Sign Sign	nder penalties of perjury, I de irrect, and complete Declara	tion of preparer (other t	ned this return, includ than taxpayer) is base	ding accompanying set on all information 3-9-17 Date	of which pre	PRESIDENT	the best of my ledge	knowledge	May the i this return preparer (see instr	RS disci	e elow
	Print/Type p eparer's	name	Preparer's	signature		Date	Check	ıf	PTIN		لــــــــــــــــــــــــــــــــــــــ
aid	ROY M. HON	ic	Dm	a millous		3/7//	self-emplo	ш,	P00050	1007	
		MING & ASS	COCTATES) (() ()		<u> </u>	Firm's EIN ►		339645	, , , ,	
repare	•						, 3 CIIV	13-4.	337043		
Jse On	y Firm's address		ROCK DRIVE			<u> </u>	<u> </u>	001	700 00		
		SALT LAKE	CITY, UT 8	34121			Phone no	801-	733-88		
BAA									Form 99	0-PF ()	2016)

2016. ·	Federal Statements	Page 1
DOUG	AS J. AND GENEVA H. FIFE FOUI	NDATION 45-2438377
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees		
TAX PREPARATION	(a) (b) N Expenses Invests per Books Inco \$ 550. Total \$ 550.	ment Adjusted Charitable
Statement 2 Form 990-PF, Part I, Line 18 Taxes		
US TREASURY	(a) (b) M Expenses Invest per Books Inco \$ 757. Total \$ 757. \$	ment Adjusted Charitable
Statement 3 Form 990-PF, Part I, Line 23 Other Expenses		
BROKERAGE MGT FEES	\$ 3,737. \$ 3	
Statement 4 Form 990-PF, Part II, Line 10a Investments - U.S. and State Government Obligations		
State/Municipal Obligations MUNICIPAL BONDS	Valuatic <u>Method</u> Mkt Val Tot	
Statement 5 Form 990-PF, Part III, Line 5 Other Decreases		
Net Unrealized Gains or Los	es on Investments	Total \$ 11,975.

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2016

Federal Statements

Page 2

DOUGLAS J. AND GENEVA H. FIFE FOUNDATION

45-2438377

Statement 6 Form 990-PF, Part XV, Line 2a-d **Application Submission Information**

Name of Grant Program:

DOUGLAS J. AND GENEVA H. FIFE FOUNDATION KATHRYN F. DAMON

Name: Care Of:

PO BOX 479

Street Address: City, State, Zip Code:

BRIGHAM CITY, UT 84302

Telephone:

435-723-8456

E-Mail Address: Form and Content:

damon@kellerits.com BY WRITTEN REQUEST

Submission Deadlines: NONE
Restrictions on Awards: NOT TO EXCEED \$15,000