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## Form 9.90-PF

### **Return of Private Foundation**

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

OMB No 1545-0052

Open to Public Inspection

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.

|                                  |             | ndar year 2016 or tax year beginning   |                | , ar         | id ending      |  |                                  |  |  |
|----------------------------------|-------------|--|----------------|--------------|----------------|--|----------------------------------|--|--|
|                                  | me of for   |  |                |              | A Employe      | r identification number                            | •                                |  |  |
|                                  |             | plot Foundation, Inc   |                |              | _              |  |                                  |  |  |
|                                  |             | d street (or PO box number if mail is not delivered to street address)             |                | Room/suite   |                | 47-5445541   | <del></del>                      |  |  |
|                                  | O Box :     |  |                | L            | B Telephone    | number (see instructio                             | ns)                              |  |  |
|                                  |             | n, state or province, country, and ZIP or foreign postal code                      |                | _            | 1              | 200 000 0440                                       |                                  |  |  |
|                                  | oise        | ID   | 8370           |              |                | 208-336-2110                                       |                                  |  |  |
| ro                               | reign cou   | intry name Foreign province/state/county   | Foreig         | n postal cod | C if exempt    | tion application is pendir                         | ng, check here 🕨                 |  |  |
| G                                | Chack       | call that apply   Initial return   Initial return                                  |                | <del></del>  |                |  |                                  |  |  |
| •                                | Cileor      |  | of a former pu | iblic charit | , <sub> </sub> | n organizations, check t                           |                                  |  |  |
|                                  |             |  |                |              |                | n organizations meeting                            |                                  |  |  |
|                                  | Chool       | ☐ Address change ☐ Name change type of organization 🔯 Section 501(c)(3) exempt pri |                |              | <del></del>    | here and attach comput<br>foundation status was to |                                  |  |  |
| ä                                |             |  |                |              |                | 07(b)(1)(A), check here                            | ▶ [                              |  |  |
| <u> </u>                         |             | on 4947(a)(1) nonexempt charitable trust U Other taxa                              |                |              | <del> </del>   |  |                                  |  |  |
| ł                                |             | narket value of all assets at J Accounting method                                  | Cash           | X Accru      | Fifthe four    | ndation is in a 60-month                           | termination                      |  |  |
|                                  |             | f year (from Part II, col (c), Other (specify)                                     |                |              | _ under sec    | tion 507(b)(1)(B), check                           | here 🕨 📘                         |  |  |
|                                  |             | 6) <b>\$</b> 8,063,586 (Part I, column (d) must b                                  | e on cash basi | s)           |                | <del>,</del>                                       |                                  |  |  |
| ľ                                | art l       | •  | (a) Revenue    | and (b)      | Net investment | (c) Adjusted net                                   | (d) Disbursements for charitable |  |  |
|                                  |             | amounts in columns (b), (c), and (d) may not necessarily                           | expenses p     | er (u)       | income         | income   | purposes                         |  |  |
|                                  | <del></del> | equal the amounts in column (a) (see instructions) )                               | <u> </u>       |              |                | <b> </b>   | (cash basis only)                |  |  |
|                                  | 1           | Contributions, gifts, grants, etc , received (attach schedule)                     | 2,421          | 1,600        |                | <b></b>  |                                  |  |  |
|                                  | 2           | Check ► ☐ if the foundation is <b>not</b> required to attach Sch B                 | ļ              |              | <del></del>    | ļ  | <b> </b>                         |  |  |
|                                  | 3           | Interest on savings and temporary cash investments                                 | ļ              |              |                | ļ  |                                  |  |  |
|                                  | 4           | Dividends and interest from securities   |                |              |                |  |                                  |  |  |
|                                  | 5a          | Gross rents  |                |              |                |  | <u> </u>                         |  |  |
| 4                                | b           | Net rental income or (loss)  | <b> </b>       |              |                |  | <u> </u>                         |  |  |
| Revenue                          | 6a          | Net gain or (loss) from sale of assets not on line 10                              | <del> </del>   |              | <del></del>    |  | <del> </del>                     |  |  |
| Revenue                          | b           | Gross sales price for all assets on line 6a  | <del> </del>   |              | <del></del>    |  | <del> </del>                     |  |  |
| á                                | 7           | Capital gain net income (from Part IV, line 2)                                     | }              |              |                |  | ļ                                |  |  |
|                                  | 8           | Net short-term capital gain Income modifications                                   | <b></b>        |              | <del></del>    |  |                                  |  |  |
| ;                                | 10a         | Gross sales less returns and allowances  | <del> </del>   |              |                |  |                                  |  |  |
|                                  | b           | Less Cost of goods sold  | <del> </del>   | <del></del>  |                |  |                                  |  |  |
|                                  | C           | Gross profit or (loss) (attach schedule)   | <del> </del>   |              | <del></del>    | <del> </del>                                       | ·                                |  |  |
| ŋ                                | 11          | Other income (attach schedule)   | <del> </del>   | <del></del>  |                | <del> </del>                                       | ļ                                |  |  |
|                                  | 12          | Total. Add lines 1 through 11  | 2,421          | 600          | 0              | 0  |                                  |  |  |
| <b>6</b>                         | 13          | Compensation of officers, directors trustees, etc.                                 | 2,72           | -,000        | <u>_</u>       | ļ  |                                  |  |  |
| enses                            | 14          | Other employee salaries and wages  | <b></b>        |              |                | <del> </del>                                       |                                  |  |  |
| ē                                | 15          | Other employee salaries and wages Pension plans, employee benefits 2 1 2017        |                |              |                | <del></del>  | <del> </del>                     |  |  |
| Š                                | 16a         | Legal fees (attach schedule)   | <u> </u>       |              |                | <del></del>  |                                  |  |  |
| m<br>w                           | ь           | Accounting fees (attach schedule)  |                |              |                |  |                                  |  |  |
| .≚                               | C           | Other professional fees (attach schedule)  |                |              |                |  |                                  |  |  |
| <u>a</u>                         | 17          | Interest .   |                |              |                |  |                                  |  |  |
| <u>is</u>                        | 18          | Taxes (attach schedule) (see instructions)   |                |              |                |  | T                                |  |  |
| Ë                                | 19          | Depreciation (attach schedule) and depletion .                                     |                |              |                |  |                                  |  |  |
| 듄                                | 20          | Occupancy  |                |              |                |  |                                  |  |  |
| ¥                                | 21          | Travel, conferences, and meetings  |                |              |                |  |                                  |  |  |
| 2                                | 22          | Printing and publications .  |                |              |                |  |                                  |  |  |
| B                                | 23          | Other expenses (attach schedule) .   |                |              |                |  |                                  |  |  |
| Operating and Administrative Exp | 24          | Total operating and administrative expenses.                                       |                |              |                |  |                                  |  |  |
| Ē                                | 1           | Add lines 13 through 23  |                | 0            | 0              | 0  | 0                                |  |  |
| be                               | 25          | Contributions, gifts, grants paid .  |                |              |                |  |                                  |  |  |
| 0                                | 26          | Total expenses and disbursements. Add lines 24 and 25                              |                | 0            | 0              | 0  | 0                                |  |  |
|                                  | 27          | Subtract line 26 from line 12.   |                |              |                |  |                                  |  |  |
|                                  | а           | Excess of revenue over expenses and disbursements .                                | 2,421          | ,600         |                |  |                                  |  |  |
|                                  | b           | Net investment income (if negative, enter -0-) .                                   |                |              | 0              |  |                                  |  |  |
|                                  |             | Adjusted net income (if negative enter -0-)  | 1              |              |                |  | 1                                |  |  |

For Paperwork Reduction Act Notice, see instructions.

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Form **990-PF** (2016)

| P:                   | art II   | Balance Sheets                      | Attached schedules and amounts in the description column            | Beginning of year                                | End 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                   | •   | 966  | 966            | 966                   |
|                      | 2        | Savings and tempo                   | rary cash investments .   |  |                |                       |
|                      | 3        | Accounts receivable                 | · ·   |  |                |                       |
|                      |          | Less allowance for                  | doubtful accounts   |  |                |                       |
|                      | 4        | Pledges receivable                  |   |  |                |                       |
|                      |          | Less allowance for                  | doubtful accounts >   |  |                |                       |
|                      | 5        | Grants receivable                   |   |  |                |                       |
|                      | 6        | Receivables due fro                 | om officers, directors, trustees, and other                         |  |                |                       |
|                      | 1        |                                     | (attach schedule) (see instructions)                                |  |                |                       |
|                      | 7        | Other notes and loans r             | receivable (attach schedule)  |  |                |                       |
|                      |          | Less <sup>-</sup> allowance for dou |   |  |                |                       |
| য়                   | 8        | Inventories for sale                |   |  |                |                       |
| Assets               | 9        | Prepaid expenses a                  | and deferred charges  |  |                | -                     |
| As                   | 10a      |                                     | state government obligations (attach schedule)                      |  |                |                       |
|                      | ь        |                                     | prate stock (attach schedule)                                       | 7,619,085  | 8,062,620      | 8,062,620             |
|                      | C        | •                                   | prate bonds (attach schedule)                                       | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,          |                |                       |
|                      | 11       |                                     | dings, and equipment. basis   |  |                |                       |
|                      |          | Less accumulated den                | reciation (attach schedule)   |  |                |                       |
|                      | 12       | Investments—mort                    |   |  |                |                       |
|                      | 13       | Investments—other                   |   |  |                |                       |
|                      | 14       | Land, buildings, and eq             | •   |  |                |                       |
|                      | ••       |                                     | uipment: basis  reciation (attach schedule)                         | <del>                                     </del> |                |                       |
|                      | 15       | Other assets (descr                 | The   |  |                | <del></del>           |
|                      | 16       | •                                   | ribe ▶) completed by all filers—see the                             |  |                |                       |
|                      | 10       | instructions. Also, s               |   | 7 620 054  | 9 062 596      | 9.063.596             |
|                      | 17       |                                     | ee page 1, item I) and accrued expenses                             | 7,620,051  | 8,063,586      | 8,063,586             |
|                      | 18       | Grants payable                      | ind accided expenses  |  |                |                       |
| es                   | 19       | Deferred revenue                    | •   |  |                |                       |
| Ħ                    | 1        |                                     |   |  |                |                       |
| Liabilities          | 20       |                                     | firectors, trustees, and other disqualified persons                 | <u> </u>   |                |                       |
| Lia                  | 21       |                                     | er notes payable (attach schedule)                                  |  |                |                       |
|                      | 22       | Other liabilities (des              |   |  |                |                       |
|                      | 23       |                                     | d lines 17 through 22)  | 0  | 0              |                       |
| Se                   |          |                                     | follow SFAS 117, check here .  S 24 through 26 and lines 30 and 31. |  |                | 1                     |
| alances              | 24       | Unrestricted                        | 5 24 through 26 and lines 50 and 51.                                |  |                |                       |
| Ī                    | 24<br>25 |                                     | <br>  |  |                |                       |
| B                    |          | Temporarily restrict                |   |  |                |                       |
| ב                    | 26       | Permanently restric                 |   |  |                |                       |
| Net Assets or Fund B |          |                                     | do not follow SFAS 117, check here                                  |  |                |                       |
| Ž                    |          | and complete lines                  | ——————————————————————————————————————                              |  |                |                       |
| S                    | 27       |                                     | principal, or current funds   |  |                | i                     |
| iet                  | 28       |                                     | irplus, or land, bldg., and equipment fund                          |  |                |                       |
| 188                  | 29       |                                     | ocumulated income, endowment, or other funds                        | 7,620,051  | 8,063,586      |                       |
| t A                  | 30       |                                     | fund balances (see instructions)                                    | 7,620,051  | 8,063,586      |                       |
| Ž                    | 31       |                                     | I net assets/fund balances (see                                     |  |                |                       |
|                      |          | instructions)                       | ·   | 7,620,051  | 8,063,586      | L                     |
|                      | rt III   |                                     | anges in Net Assets or Fund Balances                                | ···· <u> </u>                                    | <del></del>    | <del></del>           |
| 1                    |          |                                     | alances at beginning of year—Part II, column (a)                    | , line 30 (must agree v                          | vith           | İ                     |
|                      |          | •                                   | d on prior year's return)   | •  | 1              | 7,620,051             |
| 2                    |          | amount from Part I,                 |   |  | 2              | 2,421,600             |
| 3                    |          |                                     | led in line 2 (itemize)   |  | 3              |                       |
| 4                    | Add II   | nes 1, 2, and 3                     |   |  | 4              | 10,041,651            |
| 5                    |          | eases not included in               |   |  | 5              | 1,978,065             |
| 6                    | Total    | net assets or fund ba               | alances at end of year (line 4 minus line 5)—Par                    | t II, column (b), line 30                        | 6              | 8,063,586             |

| Part          | Y Capital Gains an  | d Losses for Tax on Investn  | nent Income                            |  |                                       |  |
|---------------|---|--|--|--|---------------------------------------|--|
|               | (a) List and describe t   | he kind(s) of property sold (e.g., real estate,<br>buse, or common stock, 200 shs MLC Co)    | ,                                      | (b) How acquired P—Purchase D—Donation | (c) Date acquired (mo , day, yr)      | (d) Date sold<br>(mo , day, yr)                                    |
| <u>1a</u>     |   |  |  |  |                                       |  |
| <u>b</u>      | <del></del>   |  |  |  |                                       |  |
| <u>c</u>      |   | <u> </u>   |  | <u> </u>                               | <del> </del>                          |  |
| <u>d</u><br>e |   |  |  |  | · · · · · · · · · · · · · · · · · · · |  |
|               |   | <b>16</b> December - No. 11  | 4-1 04                                 |  | 4.0                                   |  |
|               | (e) Gross sales price   | (f) Depreciation allowed<br>(or allowable)   |  | r other basis<br>inse of sale          |                                       | iin or (loss)<br>(f) minus (g)                                     |
| <u>a</u>      |   |  |  |  |                                       |  |
| <u> </u>      |   |  |  |  |                                       |  |
| <u>c</u><br>d |   |  |  | ·                                      |                                       |  |
| <u>u</u>      |   |  |  |  |                                       |  |
|               | Complete only for assets si   | nowing gain in column (h) and owned  | by the foundation                      | on 12/31/69                            |                                       | <del> </del>   |
|               | (i) F M ∨ as of 12/31/69  | (j) Adjusted basis<br>as of 12/31/69   | (k) Exces                              | ss of col (i) (j), if any              | col (k), but no                       | ol (h) gain minus<br>ot less than -0-) <b>or</b><br>(from col (h)) |
| а             |   |  |  |  |                                       |  |
| b             |   |  |  |  |                                       |  |
| С             |   |  |  |  |                                       |  |
| d             |   |  |  |  |                                       |  |
| е             |   |  |  |  |                                       |  |
| 2             | Capital gain net income or  |  | also enter in Pa<br>), enter -0- in Pa |  | 2                                     | 0  |
| 3             | If gain, also enter in Part I   | or (loss) as defined in sections 1<br>line 8, column (c) (see instruction                    | 1222(5) and (6)                        |  | _                                     |  |
| Part          | Part I, line 8  | der Section 4940(e) for Redu   |  | ]                                      | 3                                     | 0  |
| Was           | tion 4940(d)(2) applies, leav<br>the foundation liable for the<br>s," the foundation does not d | re this part blank<br>section 4942 tax on the distributa<br>qualify under section 4940(e) Do | ble amount of ar                       | ny year in the base<br>is part         | e penod?                              | ☐ Yes ☒ No   |
| 1             | Enter the appropriate amo   | unt in each column for each year   | , see the instruct                     | tions before makir                     | ng any entries                        |  |
| Cal           | (a)<br>Base penod years<br>endar year (or tax year beginning in                                 | (b) Adjusted qualifying distributions  | s Net value                            | (c)<br>of nonchantable-use as          |                                       | (d)<br>stribution ratio<br>) divided by col (c))                   |
|               | 2015  |  | 34                                     | 31:                                    | 2,818                                 | 0 000109   |
|               | 2014  |  |  |  |                                       | 0 000000   |
|               | 2013  |  |  |  |                                       | 0 000000   |
|               | 2012  |  |  |  |                                       | 0 000000   |
|               | 2011  |  |  |  |                                       | 0 000000   |
| _             | Tatal of hand and a color of D  |  |  |  |                                       |  |
| 2<br>3        | Total of line 1, column (d)   |  | . 46 4-4-1 1                           |  | 2                                     | 0 000109   |
| 3             | number of years the found   | or the 5-year base period—divide<br>ation has been in existence if les                       | s than 5 years                         | 2 by 5, or by the                      | 3                                     | 0 000109   |
| 4             | Enter the net value of non-   | charitable-use assets for 2016 fro   | om Part X, line 5                      |  | 4                                     | 6,365,426  |
| 5             | Multiply line 4 by line 3   |  |  |  | 5                                     | 694  |
| 6             | Enter 1% of net investmen   | at income (1% of Part I, line 27b)   |  | •                                      | . 6                                   | 0  |
| 7             | Add lines 5 and 6   |  |  |  | 7                                     | 694  |
| 8             | Enter qualifying distribution   |  |  |  | 8                                     | 0  |
|               | If line 8 is equal to or great Part VI instructions   | ter than line 7, check the box in P  | art VI, line 1b, a                     | nd complete that                       | part using a 1% ta                    | x rate See the   |

| table of the properties (section 4940(g)(2), check here  | Part \ | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)  |     |          | <del> </del> |
|--|--------|--|-----|----------|--------------|
| b Domestic foundations that meet the section 4940(e) requirements in Part V. Check here ▶ □ and enter 1% of Part I, line 27D c All other domestic foundations enter 2% of line 27D. Exempt foreign organizations enter 4% of Part I, line 12, col (b) Part I, line 12, col (c) 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 Q 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- 6 Credits/Payments a 2016 estimated x payments and 2015 overpayment credited to 2016 Exempt foreign organizations—Lax withheld at source c Tax paid with application for extension of time to file (Form 888) 6 Extension organizations—Lax withheld at source c Tax paid with application for extension of time to file (Form 888) 6 Extension organizations—Lax withheld at source c Tax based with application for extension of time to file (Form 888) 6 Extension organizations—Lax withheld at source c Tax paid with application for extension of time 5 and 6 is more than into 10 organizations—Lax withheld at source c Tax due, if the total of lines 5 and 6 is more than into 10 organizations—Lax withheld at source c Tax due, if the total of lines 5 and 6 is more than into 10 organizations—Lax withheld at source c Tax due, if the total of lines 5 and 6 is more than into 10 organizations—Lax withheld at source c Tax due, if the total of lines 5 and 6 is more than into 10 organizations—Lax withheld at source c Tax due, if the total of lines 5 and 6 is more than into 10 organizations—Lax withheld at source c Tax due, if the total of lines 5 and 6 is more than into 10 organizations—Lax withheld at source c Tax due, if the total of lines 5 and 6 is more than into 10 organizations—Lax withheld at source c Tax due, if the total of lines 5 and 6 is more than into 10 organizations—Lax withheld at source c Tax due, if the total organizations—Lax with a source c Tax ta      | 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 domesto foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, cot (b)  Tax based section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  Add lines 1 and 2  Subtitle A (income) lax (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-)  Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-)  Credits/Payments  2016 settimated tax payments and 2015 overpayment credited to 2016  Exempt foreign organizations—lax withheld at source  Tax paid with application for extension of time to file (Form 8988)  Backup withholding erroneously withheld  Total credits and payments. Add lines 6 through 6d  Enter any penalty for underpayment of estimated tax. Check here  Tax due, I the total of lines 5 and 8 is more than line 7, enter amount owed  Tax due, I the total of lines 5 and 8, enter the amount overpaid  Tax due, I the total of lines 5 and 8, enter the amount overpaid  Tax due, I the total of lines 5 and 8, enter the amount overpaid  Tax due, I the total of lines 5 and 8, enter the amount overpaid  Tax due, I the total of lines 5 and 8, enter the amount overpaid  Tax due, I the total of lines 5 and 8, enter the amount overpaid  Tax due, I the total of lines 5 and 8, enter the amount overpaid  Tax due, I the total of lines 5 and 8, enter the amount overpaid  Tax due, I the total of lines 5 and 8, enter the amount overpaid  Tax due, I the total of lines 5 and 8, enter the amount overpaid  Tax due, I the total of lines 5 and 8, enter the amount overpaid  Tax due, I the total of lines 5 and 8, enter the amount overpaid  Tax due, I the total of lines 5 and 8, enter the amount overpaid  Tax due, I the total of lines 5 and 8, enter the amount overpaid  Tax due, I the total organization of the amount overpaid be reported to the credit of the total overpa      | b      |  |     |          |              |
| c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) Part I, line 12, col. (b) 3 Add lines 1 and 2 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 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 padd with application for extension of time to file (Form 8868) 6 Exempt foreign organizations—lax withheld at source c Tax paid with application for extension of time to file (Form 8868) 6 Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6 at through 6d 8 Enter any penalty for underpayment of estimated tax. Check here I f Form 2220 is attached 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 is more than line 7, enter amount overpaid P 0 0 0 11 Enter the amount of line 10 to be Credited to 2017 estimated tax P Tax due if the total of lines 5 and 8 is more than line 7, enter amount overpaid P 0 0 0 11 Doughament. If line 7 is more than the text of lines 5 and 8, enter the amount overpaid P 0 0 0 11 Doughament. If line 7 is more than the text of lines 5 and 8, enter the amount overpaid P 0 0 0 11 Enter the amount of line 10 to be Credited to 2017 estimated tax P Tax due. If the total of lines 5 and 8 is more than line 7, enter amount overpaid P 0 0 0 11 Enter the amount of line 10 to be Credited to 2017 estimated tax P Tax due if the total of lines 5 and 8 is more than line 7, enter amount overpaid P 10 0 0 11 Enter the amount of line 10 to be Credited to 2017 estimated tax P Tax due if the total of lines 5 and 8 is more than line 7, enter amount overpaid P 10 0 0 11 Enter the amount of line 10 to be Credited      |        |  |     |          |              |
| 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3  | С      | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of  |     |          |              |
| Subtitle A (moome) 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-  Tax based on Investment income. Subtract line 4 from line 3 if zero or less, enter -0-  Tax based on Investment income. Subtract line 4 from line 3 if zero or less, enter -0-  Tax based on Investment income. Subtract line 4 from line 3 if zero or less, enter -0-  Tax based on Investment income. Subtract line 4 from line 3 if zero or less, enter -0-  Tax based on Investment income. Subtract line 4 from line 3 if zero or less, enter -0-  Tax based on Investment income. Subtract line 4 from line 3 if zero or less, enter -0-  Tax due for from 1 from 220 is attached and a law in the same      | 2      | · ·  | - · | 0        |              |
| Tax based on investment income. Subtract line 4 from line 3 if zero or less, enter -0-  6 Credits/Payments  2 2016 estimated tax payments and 2015 overpayment credited to 2016  b Exempt foreign organizations—tax withheld at source  1 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   | 3      |  |     | 0        |              |
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| The street of the statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either  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?  If the answer is "Yes" to line 7, has the foundation reports or with which it is registered (see instructions)  If the answer is "Yes" to line 7, has the foundation for the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV  Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their  X attach the state as required by General Instruction G? If "No," attach explanation  By 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  Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their   | _      |  | -   |          |              |
| 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.  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  Did the foundation have unrelated business gross income of \$1,000 or more during the year?  If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either  By language in the governing instrument, or  By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?  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  The 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  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  Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their   | е      |  |     |          |              |
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| of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?  b If "Yes," has it filed a tax return on Form 990-T for this year?  5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?  6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either  • By language in the governing instrument, or  • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain 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  8a Enter the states to which the foundation reports or with which it is registered (see instructions)  ID  b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation  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)  9 X  10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their  |        | If "Yes," attach a detailed description of the activities.   |     |          |              |
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| b If "Yes," has it filed a tax return on Form 990-T for this year?  Was there a liquidation, termination, dissolution, or substantial contraction during the year?  If "Yes," attach the statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either  By language in the governing instrument, or  By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?  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  Enter the states to which the foundation reports or with which it is registered (see instructions)  ID  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  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  Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their   | 4a     |  | 4a  |          |              |
| If "Yes," attach the statement required by General Instruction T  Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either  By language in the governing instrument, or  By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?  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  Enter the states to which the foundation reports or with which it is registered (see instructions)  D  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  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  Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their  | b      |  | 4b  | N/A      |              |
| Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either  • By language in the governing instrument, or  • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain 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  8a Enter the states to which the foundation reports or with which it is registered (see instructions)  ID  b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation  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  10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their  | 5      | Was there a liquidation, termination, dissolution, or substantial contraction during the year?   | 5   |          | X            |
| <ul> <li>By language in the governing instrument, or</li> <li>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?</li> <li>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</li> <li>Enter the states to which the foundation reports or with which it is registered (see instructions)</li> <li>ID</li> <li>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</li> <li>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</li> <li>Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their</li> </ul>  |        | If "Yes," attach the statement required by General Instruction T   |     |          |              |
| <ul> <li>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?</li> <li>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</li> <li>Enter the states to which the foundation reports or with which it is registered (see instructions)</li> <li>ID</li> <li>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</li> <li>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</li> <li>Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their</li> </ul>   | 6      |  |     |          |              |
| conflict with the state law remain 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  8a Enter the states to which the foundation reports or with which it is registered (see instructions)  ID  b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation  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  10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their   |        |  |     |          |              |
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| (or designate) of each state as required by <i>General Instruction G? If "No," attach explanation</i> 9  | h      |  | -   |          |              |
| 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  10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their  | D      |  | 8b  | Х        |              |
| 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  10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their   | 9      |  |     | ف        |              |
| "Yes," complete Part XIV  10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their  | •      |  |     |          |              |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their  |        |  | 9   |          | Х            |
|  | 10     | ·  |     |          |              |
|  |        |  | 10  | Х        | <u> </u>     |

| Part       | VII-A Statements Regarding Activities (continued)   |              |          |          |
|------------|---|--------------|----------|----------|
| 11         | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the   |              | Yes      | No       |
|            | meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)   | 11           |          | X        |
| 12         | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified  |              |          |          |
|            | person had advisory privileges? If "Yes," attach statement (see instructions)   | 12           |          | <u> </u> |
| 13         | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?   | 13           | X        | L        |
|            | Website address ► N/A   |              |          | <b></b>  |
| 14         | The books are in care of ► J R Simplot Company  Telephone no ► 208-336  | 2110         | <b>-</b> |          |
| 45         | Located at ► 1099 W Front Street Boise ID ZIP+4 ► 83702   |              |          |          |
| 15         | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here 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 authority   |              | Yes      | No       |
|            | over a bank, securities, or other financial account in a foreign country?   | 16           |          | Х        |
|            | See the instructions for exceptions and filing requirements for FinCEN Form 114. If   |              |          |          |
|            | "Yes," enter the name of the foreign country  |              |          |          |
| Part       | VII-B Statements Regarding Activities for Which Form 4720 May Be Required   |              |          |          |
|            | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.   |              | Yes      | No       |
| 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?  |              |          |          |
|            | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a   |              |          |          |
|            | disqualified person?  |              |          |          |
|            | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  |              |          |          |
|            | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  |              |          |          |
|            | (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)?   |              |          |          |
|            | (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 any of the acts fail to qualify under the exceptions described in  |              |          |          |
|            | Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?   | 1b           |          | X        |
| _          | Organizations relying on a current notice regarding disaster assistance check here  |              |          |          |
| С          | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016?                             | 1c           |          | X        |
| 2          | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private   |              |          | Ĥ        |
| _          | operating foundation defined in section 4942(j)(3) or 4942(j)(5))   |              |          |          |
| 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?   | İ            |          |          |
|            | If "Yes," list the years  20 16 , 20 15 , 20 , 20   |              |          |          |
| b          | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)   | Ì            | ì        |          |
|            | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to  |              | 1        |          |
|            | all years listed, answer "No" and attach statement—see instructions)  | 2b           |          | X        |
| С          | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here<br>20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20, 20  |              |          |          |
| 3 <b>a</b> | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise   |              |          |          |
|            | at any time during the year?  |              |          |          |
| þ          | If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or   |              |          |          |
|            | disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period 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           | N/A      |          |
| 4a         | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?   | 4a           | 1.00     | X        |
| b          | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its  |              |          |          |
|            | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?  | 4b           |          | Х        |
|            |   | rm <b>99</b> | 0-PF     | (2016)   |

| _Part   | VII-B             | Statements Regarding Activities  | <u>for Wi</u> | <u>hich Form 4</u>                               | 1720 N     | ilay Be Re                           | quirec     | (contin   | ued)                |         |                            |
|---------|-------------------|--|---------------|--|------------|--------------------------------------|------------|---|---------------------|---------|----------------------------|
| 5a      |                   | e year did the foundation pay or incur any on propaganda, or otherwise attempt to in         |               |  | section    | 4945(e))?                            |            | Yes   | X No                |         |                            |
|         |                   | nce the outcome of any specific public ele<br>ly or indirectly, any voter registration drive |               | see section 49                                   | 955), or   | to carry on                          | 1          | ☐ Yes   | X No                |         |                            |
|         |                   | de a grant to an individual for travel, study,   |               | er sımilar purp                                  | oses?      |                                      |            | Yes   | X No                |         |                            |
|         |                   | de a grant to an organization other than a on 4945(d)(4)(A)? (see instructions)              | charital      | ble, etc., orga                                  | nızatioı   | n described                          | ın         | ☐ Yes   | X No                |         | -                          |
|         |                   | de for any purpose other than religious, choses, or for the prevention of cruelty to chil    |               |  | erary, c   | or education                         | al         | Yes   | X No                |         |                            |
| b       | If any an         | swer is "Yes" to 5a(1)–(5), did any of the tr  | ansacti       | ions fail to qu                                  | alify un   | der the exc                          | eptions    | describe  | d in                |         |                            |
|         | Regulation        | ons section 53.4945 or in a current notice i   | egardır       | ng disaster as                                   | sistand    | æ (see instr                         | uctions    | )?  |                     | 5b      | N/A                        |
|         |                   | tions relying on a current notice regarding  |               |  |            |                                      |            |   |                     |         |                            |
| С       | because           | swer is "Yes" to question 5a(4), does the fo<br>it maintained expenditure responsibility fo  | r the gr      | ant?   |            | rom the tax                          |            | Yes   | ☐ No                |         |                            |
| 6-      |                   | attach the statement required by Regulation  |               |  |            |                                      | <b>~</b> ~ |   |                     |         |                            |
| 6a      |                   | oundation, during the year, receive any fur<br>sonal benefit contract?                       | ius, uire     | ectly of intuited                                | cily, to p | pay premiur                          | 115        | ☐ Yes   | <b>⊠</b> No         |         |                            |
| b       | Did the fo        | oundation, during the year, pay premiums,  | directly      | or indirectly,                                   | on a p     | ersonal ben                          | efit con   | tract?  |                     | 6b      | X                          |
|         | If "Yes" to       | o 6b, file Form 8870   |               |  |            |                                      |            | _   | _                   |         |                            |
|         |                   | e during the tax year, was the foundation a pa<br>did the foundation receive any proceeds or |               |  |            |                                      | a trans    | Yes   | X No                | 7b      | N/A                        |
|         |                   | Information About Officers, Directo  |               |  |            |                                      |            |   | aid Em              | لتتل    |                            |
|         |                   | and Contractors  |               |  |            |                                      |            |   |                     |         |                            |
| 1       | List all o        | fficers, directors, trustees, foundation i   | nanage        | ers and their                                    | compe      | ensation (se                         | ee insti   | ructions).                                      |                     |         |                            |
|         |                   | (a) Name and address   | hou           | e, and average<br>rs per week<br>ed to position  | (If s      | mpensation<br>not paid,<br>nter -0-) | emplo      | Contribution<br>byee benefit<br>erred compe     | plans               |         | nse account,<br>allowances |
|         | R Simplot         |  | Preside       | ent/Director                                     |            |                                      |            |   |                     |         |                            |
|         |                   | , Surte 1300 Boise, ID 83702   | D             | 00   |            | 0                                    |            |   |                     |         |                            |
|         | e Soderbe         | , Suite 1300 Boise, ID 83702   | Directo       | or<br>00   |            | ol                                   |            |   |                     |         |                            |
|         |                   | plot Thomas  | Directo       |  |            |                                      | <b></b>    |   |                     |         |                            |
|         |                   | Suite 1300 Boise, ID 83702   | J.: 0010      | 00   |            | o                                    |            |   |                     |         |                            |
|         | n Simplot         |  | Directo       |  |            |                                      |            |   |                     |         |                            |
|         |                   | Suite 1300 Boise, ID 83702   |               | 00   |            | 0                                    |            |   |                     |         |                            |
|         | Compen<br>"NONE." | sation of five highest-paid employees (  | other tl      | han those inc                                    | cluded     | on line 1—                           | see ins    | structions                                      | s). If no           | ne, ent | er<br>                     |
|         | (a) Name a        | nd address of each employee paid more than \$50,000  |               | (b) Title, and a<br>hours per w<br>devoted to po | eek        | (c) Compen                           | sation     | (d) Contrib<br>employee<br>plans and<br>compens | benefit<br>deferred |         | nse account,<br>allowances |
| NONE    |                   |  |               |  |            |                                      |            |   |                     |         |                            |
|         |                   |  |               |  |            | ļ                                    |            |   |                     |         | <del></del>                |
|         |                   |  |               |  |            |                                      |            |   |                     |         |                            |
|         |                   |  |               |  |            |                                      |            |   |                     |         |                            |
|         |                   |  |               |  | <u> </u>   |                                      |            |   |                     |         | <del> </del>               |
|         |                   |  |               |  |            |                                      |            |   |                     |         |                            |
| Total - | umbor of          | other employees and ever \$50,000  |               | L  |            | L                                    |            | L   |                     |         |                            |
| iotal f | rumber of         | other employees paid over \$50,000   |               |  |            | <u>_</u>                             |            |   |                     | 000     | DE (2046)                  |

| <u>Part VIII</u> Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En<br>and Contractors (continued)               | ipioyees,                 |
|--|---------------------------|
| 3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON                                      | E."                       |
| (a) Name and address of each person paid more than \$50,000 (b) Type of service  | (c) Compensation          |
| NONE   |                           |
|  |                           |
|  | •                         |
|  |                           |
| ***************************************  |                           |
|  |                           |
| ***************************************  |                           |
|  |                           |
| ·  |                           |
|  |                           |
| Total number of others receiving over \$50,000 for professional services . ▶   |                           |
| Part IX-A Summary of Direct Charitable Activities  |                           |
|  | <del> </del>              |
| List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of | Expenses                  |
| organizations and other beneficiaries served, conferences convened, research papers produced, etc  |                           |
| 1 None   |                           |
|  |                           |
|  |                           |
| 2  | 1                         |
|  |                           |
|  |                           |
| 3  |                           |
| ***************************************  |                           |
|  |                           |
| 4  |                           |
|  | 1                         |
| 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 None   | Amount                    |
| 1 NOTE   |                           |
|  | Ì                         |
| 2  |                           |
|  |                           |
|  |                           |
| All other program-related investments. See instructions  | <del> </del>              |
| 3  |                           |
| <b>-</b>   |                           |
|  | 1                         |
| Total. Add lines 1 through 3   | - C                       |
|  | Form <b>990-PF</b> (2016) |

| Part | Minimum Investment Return (All domestic foundations must complete this part. Foreign   | gn foundat   | tions,    |
|------|--|--------------|-----------|
|      | see instructions.)   |              |           |
| 1    | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,  | 1            |           |
|      | purposes   |              |           |
| а    | Average monthly fair market value of securities  | 1a           | 6,461,395 |
| b    | Average of monthly cash balances   | 1b           | 966       |
| С    | Fair market value of all other assets (see instructions)   | 1c           |           |
| đ    | Total (add lines 1a, b, and c)   | 1d           | 6,462,361 |
| е    | Reduction claimed for blockage or other factors reported on lines 1a and   |              |           |
|      | 1c (attach detailed explanation) . 1e  |              |           |
| 2    | Acquisition indebtedness applicable to line 1 assets   | 2            |           |
| 3    | Subtract line 2 from line 1d   | 3            | 6,462,361 |
| 4    | Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see   |              |           |
|      | instructions) .  | 4            | 96,935    |
| 5    | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4  | 5            | 6,365,426 |
| 6    | Minimum investment return. Enter 5% of line 5  | 6            | 318,271   |
| Part | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here  ■ and do not complete this part ) |              |           |
| 1    | Minimum investment return from Part X, line 6  | 1            | 318,271   |
| 2a   | Tax on investment income for 2016 from Part VI, line 5 . 2a  |              |           |
| b    | Income tax for 2016 (This does not include the tax from Part VI.)  |              |           |
| С    | Add lines 2a and 2b  | 2c           |           |
| 3    | Distributable amount before adjustments Subtract line 2c from line 1   | 3            | 318,271   |
| 4    | Recoveries of amounts treated as qualifying distributions  | 4            |           |
| 5    | Add lines 3 and 4  | 5            | 318,271   |
| 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            | 318,271   |
| Part | XII Qualifying Distributions (see instructions)  |              |           |
| 1    | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes  |              |           |
| а    | Expenses, contributions, gifts, etc —total from Part I, column (d), line 26  | 1a           | 0         |
| þ    | 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.,   |              |           |
|      | purposes   | 2            |           |
| 3    | Amounts set aside for specific charitable projects that satisfy the  |              |           |
| а    | 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            | 0         |
| 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            | 0         |
|      | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wh   | ether the fo | undation  |
|      | qualifies for the section 4940(e) reduction of tax in those years  |              |           |

|    | Ondistributed income (see instructions              |               |                                       |             |                                       |
|----|---|---------------|---------------------------------------|-------------|---------------------------------------|
| 1  | Distributable amount for 2016 from Part XI,         | (a)<br>Corpus | (b)<br>Years ρποτ to 2015             | (c)<br>2015 | (d)<br>2016<br>318,271                |
| •  |   |               | · · · · · · · · · · · · · · · · · · · |             | 310,2/1                               |
| 2  | Undistributed income, if any, as of the end of 2016 |               |                                       | / 5 400     |                                       |
| a  | Enter amount for 2015 only                          |               |                                       | √ 5,408     |                                       |
| b  | Total for prior years 20, 20, 20                    |               |                                       | <del></del> |                                       |
| 3  | Excess distributions carryover, if any, to 2016     |               |                                       |             | İ                                     |
| a  | From 2011 .   |               | ]                                     |             |                                       |
| b  | From 2012   |               |                                       |             |                                       |
| C  | From 2013 .   |               |                                       |             | ļ                                     |
| d  | From 2014 .   |               |                                       |             |                                       |
| е  | From 2015 .   |               |                                       |             |                                       |
| f  | Total of lines 3a through e                         | 0             |                                       |             |                                       |
| 4  | Qualifying distributions for 2016 from Part XII,    |               |                                       |             |                                       |
|    | line 4 ▶ \$   |               |                                       |             |                                       |
| а  | Applied to 2015, but not more than line 2a          |               |                                       |             |                                       |
| b  | Applied to undistributed income of prior years      |               |                                       |             |                                       |
|    | (Election required—see instructions)                |               |                                       |             |                                       |
| С  | Treated as distributions out of corpus (Election    |               |                                       |             |                                       |
| =  | required—see instructions)                          |               |                                       |             |                                       |
| ď  | Applied to 2016 distributable amount                |               |                                       |             |                                       |
|    | Remaining amount distributed out of corpus          |               |                                       |             |                                       |
| 5  | Excess distributions carryover applied to 2016      | ·             |                                       |             |                                       |
| J  | (If an amount appears in column (d), the same       | <del> </del>  |                                       |             |                                       |
|    | amount must be shown in column (a), the same        |               |                                       |             |                                       |
| 6  | Enter the net total of each column as               |               | ]                                     |             |                                       |
| U  | indicated below:                                    |               |                                       |             |                                       |
| _  |   |               |                                       |             |                                       |
| ď  | Corpus Add lines 3f, 4c, and 4e Subtract line 5     | 0             |                                       |             |                                       |
| D  | Prior years' undistributed income Subtract          |               | ]                                     |             |                                       |
| _  | line 4b from line 2b                                | :<br>         | 0                                     |             |                                       |
| С  | Enter the amount of prior years' undistributed      |               |                                       | ļ           |                                       |
|    | income for which a notice of deficiency has         |               |                                       |             |                                       |
|    | been issued, or on which the section 4942(a)        |               | }                                     |             |                                       |
|    | tax has been previously assessed                    | :<br>         | ļ                                     |             |                                       |
| d  | Subtract line 6c from line 6b Taxable               |               |                                       |             |                                       |
|    | amount—see instructions                             |               |                                       |             |                                       |
| е  | Undistributed income for 2015 Subtract line         |               |                                       |             |                                       |
|    | 4a from line 2a Taxable amountsee                   |               | }                                     |             | i                                     |
|    | instructions ,                                      |               |                                       | 5,408       |                                       |
| f  | Undistributed income for 2016 Subtract lines        |               |                                       |             |                                       |
|    | 4d and 5 from line 1 This amount must be            |               | [                                     | j l         |                                       |
|    | distributed in 2017                                 |               |                                       |             | 318,271                               |
| 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         |               | 1                                     |             |                                       |
|    | required—see instructions)                          |               |                                       |             |                                       |
| 8  | Excess distributions carryover from 2011 not        | <del></del>   | 1                                     |             |                                       |
| -  | applied on line 5 or line 7 (see instructions) .    |               | 1                                     |             |                                       |
| 9  | Excess distributions carryover to 2017.             |               |                                       |             | <del></del>                           |
| •  | Subtract lines 7 and 8 from line 6a                 |               |                                       |             |                                       |
| 10 | Analysis of line 9.                                 |               |                                       |             | · · · · · · · · · · · · · · · · · · · |
|    | Excess from 2012 .                                  |               | 1                                     |             |                                       |
|    |   |               | 1                                     |             |                                       |
|    | Excess from 2013                                    |               | l                                     |             |                                       |
|    | Excess from 2014                                    |               |                                       |             |                                       |
|    | Excess from 2015                                    |               | 1                                     |             |                                       |
| е  | Excess from 2016                                    |               | 1                                     |             |                                       |

| Part  | AN Private Operating Foundat   | ions (see instru                       | uctions and Part                                   | VII-A, question 9)       |  | <u>N/A</u>           |
|-------|--|--|--|--------------------------|--|----------------------|
| 1a    | If the foundation has received a ruling of   |  | •  | ate operating            |  |                      |
|       | foundation, and the ruling is effective fo   |  |  | ▶ [                      |  | <del></del>          |
|       | Check box to indicate whether the foundation   | on is a private opera                  | ating foundation des                               | cribed in section        | 4942(j)                                  | (3) or 4942(J)(5)    |
| 2a    | Enter the lesser of the adjusted net income from Part I or the minimum   | Tax year                               |  | Prior 3 years            |  | (e) Total            |
|       | investment return from Part X for  | (a) 2016                               | (b) 2015   | (c) 2014                 | (d) 2013                                 | (5) 123              |
|       | each year listed .   |  |  |                          |  | 0                    |
| D     | 85% of line 2a   |  |  |                          |  | 0                    |
| C     | Qualifying distributions from Part XII, line 4 for each year listed  | ·                                      |  |                          |  | 0                    |
| d     | Amounts included in line 2c not used directly for active conduct of exempt activities  |  |  |                          |  | 0                    |
| е     | Qualifying distributions made directly   |  |  |                          |  |                      |
|       | for active conduct of exempt activities<br>Subtract line 2d from line 2c   |  |  |                          |  | 0                    |
| 3     | Complete 3a, b, or c for the   |  |  |                          |  |                      |
|       | alternative test relied upon   |  |  |                          |  |                      |
| а     | "Assets" alternative test—enter  |  |  |                          |  |                      |
|       | (1) Value of all assets  |  |  |                          |  | 0                    |
|       | (2) Value of assets qualifying under section 4942(j)(3)(B)(i)  |  |  |                          |  | 0                    |
| b     | "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed   |  |  |                          |  | 0                    |
| С     | "Support" alternative test—enter   |  |  |                          |  | <del> </del>         |
|       | (1) Total support other than gross investment income (interest, dividends, rents, payments on  |  |  |                          |  |                      |
|       | securities loans (section<br>512(a)(5)), or royalties)<br>(2) Support from general public  |  |  |                          |  | 0                    |
|       | and 5 or more exempt   | İ                                      |  |                          |  |                      |
|       | organizations as provided in   | İ                                      |  |                          |  |                      |
|       | section 4942(j)(3)(B)(iii)  (3) Largest amount of support from   |  |  |                          |  | 0                    |
|       | an exempt organization .   |  |  |                          |  | 0                    |
|       | (4) Gross investment income  |  |  | <del>- </del>            |  | 0                    |
| Part  |  | n (Complete th                         | is part only if t                                  | he foundation ha         | d \$5,000 or mo                          |                      |
|       | any time during the year—  |  |  |                          | a 40,000 or mo                           | io iii doodto at     |
| 1     | Information Regarding Foundation M   |  |  | <del></del>              |  |                      |
| а     | List any managers of the foundation wh   |  | ed more than 2% of                                 | f the total contribution | ns received by the                       | foundation           |
|       | before the close of any tax year (but on   |  |  |                          |  |                      |
| Scott | R Simplot  |  |  |                          |  |                      |
| b     | List any managers of the foundation wh   | o own 10% or mo                        | ore of the stock of a                              | a corporation (or an e   | equally large portion                    | on of the            |
|       | ownership of a partnership or other enti   |  |  |                          |  |                      |
|       |  |  |  |                          |  |                      |
| 2     | Information Regarding Contribution, Check here ▶ ☒ if the foundation or unsolicited requests for funds If the fou under other conditions, complete items | ily makes contribi<br>ndation makes gi | utions to preselecte                               | ed charitable organiz    | ations and does n<br>ividuals or organiz | ot accept<br>cations |
| a     | The name, address, and telephone num   |  | dress of the persor                                | to whom application      | s should be addre                        | essed:               |
|       | ·  |  | ,  | ,,                       |  |                      |
| b     | The form in which applications should b  | e submitted and                        | information and ma                                 | aterials they should in  | nclude                                   |                      |
| С     | Any submission deadlines   |  | <del>_ , , , , , , , , , , , , , , , , , , ,</del> | <del></del>              |  |                      |
|       | Any restrictions as limitations  |  |  | amtable Cald 1           | -6                                       | -4h                  |
| u     | Any restrictions or limitations on awards factors  | s, such as by geo                      | grapnicai areas, cr                                | iaritadie fields, Kinds  | oi institutions, or                      | ourer                |

| Part<br>3 | XV Supplementary Information (continuous Grants and Contributions Paid During to | nued)  | d for Eut           | uro Payment                      |               |
|-----------|--|--|---------------------|----------------------------------|---------------|
|           | Recipient  | If recipient is an individual,                     | Foundation          |                                  | <del></del>   |
| •••       | Name and address (home or business)  | show any relationship to<br>any foundation manager | status of recipient | Purpose of grant or contribution | Amount        |
| a         | Paid during the year   | or substantial contributor                         |                     |                                  |               |
| None      | ,  |  |                     | Charitable                       |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
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|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  | ;                   |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
| b         | Total  | Г.   | 1                   | . ► 3a                           | 0             |
| None      | , , , , , , , , , , , , , , , , , , ,  |  |                     | Charitable                       |               |
|           |  |  |                     |                                  | ]             |
|           |  |  | •                   |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  |               |
|           |  |  |                     |                                  | 1             |
|           | Total .  | l  |                     | . ▶ 3b                           |               |
|           | IVIAI .  | <u> </u>   |                     |                                  | 990-PF (2016) |

|                           | Analysis of Income-Producing Ac   | 1             |                                       | F. J. J. J. J. S. S. S. S. | 540 540 544                           | <u> </u>   |
|---------------------------|---|---------------|---------------------------------------|----------------------------|---------------------------------------|--|
| ⊏nte                      | r gross amounts unless otherwise indicated  | Unrelated bu  | isiness income                        | Excluded by section        | on 512, 513, or 514                   | (e)  |
|                           |   | (a)           | (b)                                   | (c)                        | (d)                                   | Related or exempt<br>function income             |
| 1                         | Program service revenue   | Business code | Amount                                | Exclusion code             | Amount                                | (See instructions)                               |
| •                         | a   |               |                                       |                            | <u></u>                               |  |
|                           |   |               |                                       |                            |                                       |  |
|                           |   |               |                                       |                            |                                       |  |
|                           |   |               |                                       |                            | <del></del>                           |  |
|                           |   |               | <del></del>                           |                            |                                       |  |
|                           |   |               |                                       | <del>   </del>             |                                       |  |
|                           | G. Food and contracts from sovernment accounts  |               |                                       | <del> </del>               | · · · · · · · · · · · · · · · · · ·   |  |
| 2                         | g Fees and contracts from government agencies Membership dues and assessments   |               |                                       |                            | <del></del>                           |  |
| 3                         | Interest on savings and temporary cash investments .  |               |                                       |                            |                                       |  |
| 4                         | Dividends and interest from securities  |               |                                       | 14                         | · · · · · · · · · · · · · · · · · · · |  |
| 5                         | Net rental income or (loss) from real estate  |               |                                       | 14                         |                                       |  |
| J                         | a Debt-financed property .  |               |                                       |                            | <del></del>                           | <u> </u>   |
|                           | b Not debt-financed property  |               |                                       |                            |                                       | ·  |
| 6                         | Net rental income or (loss) from personal property  |               |                                       |                            |                                       |  |
| 7                         |   |               |                                       |                            |                                       |  |
| 8                         |   |               | · · · · · · · · · · · · · · · · · · · | -                          | <del></del>                           | <del> </del>                                     |
| 9                         | Gain or (loss) from sales of assets other than inventory<br>Net income or (loss) from special events  |               | ····                                  |                            |                                       |  |
| 10                        |   |               | <del></del>                           | -                          |                                       |  |
| 11                        | Gross profit or (loss) from sales of inventory  | <del></del>   |                                       |                            |                                       | <br>   |
|                           | Other revenue a   | <b> </b>      |                                       |                            |                                       | <del></del>                                      |
|                           | b   |               |                                       |                            |                                       |  |
|                           | d   |               |                                       |                            |                                       |  |
|                           | ·   |               |                                       |                            |                                       | <del></del> -                                    |
| 12                        | e Subtotal Add columns (b), (d), and (e)  |               | <u> </u>                              |                            |                                       | <del>                                     </del> |
|                           | Subtotal Add Columns (b), (d), and (e)  |               | 0                                     | L                          | 0                                     | 0  |
|                           |   |               |                                       |                            | 4.2                                   |  |
| 13                        | Total. Add line 12, columns (b), (d), and (e)   |               |                                       |                            | 13                                    | 0  |
| 13<br>(See                | <b>Total.</b> Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations   |               |                                       | Durnosos                   | 13                                    | 0  |
| 13<br>(See<br>Pa          | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A  | ccomplishm    | ent of Exemp                          |                            |                                       |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    | ons)   |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |
| 13<br>(See<br>Par<br>Line | Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the A No. Explain below how each activity for which income | ccomplishm    | ent of Exemp                          | XVI-A contributed          | importantly to the                    |  |

| <b>5</b> 202 <b>5</b>             | , C. D. Con  |  |  |                             | •                        | •                  | 47.5                              | 445544   |        | 40                    |
|-----------------------------------|--|--|--|-----------------------------|--------------------------|--------------------|-----------------------------------|--|--------|-----------------------|
| Part XV                           | <del></del>  | plot Foundation, Inc<br>Regarding Trans          | sfers To and Tra   | ansactions                  | and Rei                  | ationships W       |                                   | ritable  | Pag    | ge 13                 |
| in<br>po<br>a Tra<br>(1)          | d the organization d<br>section 501(c) of the<br>ditical organizations   | rectly or indirectly er code (other than se      | ection 501(c)(3) or  | ganızations)                | or in section            |                    |                                   | 1a(1)<br>1a(2)                                     | Yes    | No<br>X<br>X          |
| b Ot (1) (2) (3) (4) (5) (6) c Sh | her transactions.  ) Sales of assets to  ) Purchases of asse  ) Rental of facilities,  ) Reimbursement ar  ) Loans or loan gual  ) Performance of se  naring of facilities, ec |  | ble exempt organized assets  p or fundraising sons, other assets, or | plicitations<br>paid employ |                          | ould always show   | the fair marke                    | 1b(1)<br>1b(2)<br>1b(3)<br>1b(4)<br>1b(5)<br>1b(6) |        | X<br>X<br>X<br>X<br>X |
| val                               | lue of the goods, othe   | er assets, or services g<br>or sharing arrangeme | iven by the reportin   | g foundation. (d) the value | If the found of the good | ation received les | s than fair ma<br>r services rece | rket<br>eived.                                     | ngemen | its                   |
|                                   |  |  |  |                             |                          |                    |                                   |  |        |                       |
| de                                |  |  | her than section 5   |                             |                          | 527?<br>           | ons [                             | Yes  | X N    | 0                     |
| Tu                                |  | lare the L have exampled this re                 |  |                             | tatements, and to        |                    |                                   |  |        |                       |

elaration of preparer (settler than/taxpayer) is based on all information of which preparer has any knowledge

Preparer's signature

Sign

Here

Paid Preparer

**Use Only** 

Signature of officer or trustee

Firm's name

Firm's address

Print/Type preparer's name

May the IRS discuss this return

with the preparer shown below

(see instructions)?

Check if self-employed

Firm's EIN >

Phone no

Date

### Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

### **Schedule of Contributors**

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

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

OMB No 1545-0047

2016

Employer identification number

| S R Simplot Foundation, Inc   |   | 47-5445541   |  |  |  |  |
|---|---|--|--|--|--|--|
| Organization type (check or   | ne)   |  |  |  |  |  |
| Filers of:  | Section:  |  |  |  |  |  |
| Form 990 or 990-EZ  | form 990 or 990-EZ 501(c)( ) (enter number) organization  |  |  |  |  |  |
|   | 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation  |  |  |  |  |  |
|   | 527 political organization  |  |  |  |  |  |
| form 990-PF X 501(c)(3) exempt private foundation   |   |  |  |  |  |  |
| 4947(a)(1) nonexempt charitable trust treated as a private foundation   |   |  |  |  |  |  |
|   | 501(c)(3) taxable private foundation  |  |  |  |  |  |
|   |   |  |  |  |  |  |
| <del>-</del>  | covered by the <b>General Rule</b> or a <b>Special Rule</b> .  7), (8), or (10) organization can check boxes for both the General Rule and the second second second second second second second second second second second second sec  | and a Special Rule. See  |  |  |  |  |
| General Rule  |   |  |  |  |  |  |
| X 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   |   |  |  |  |  |  |
| regulations under ser<br>13, 16a, or 16b, and   | described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 9 that received from any one contributor, during the year, total contribution the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1  | 990 or 990-EZ), Part II, line ons of the greater of (1)          |  |  |  |  |
| 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 |   |  |  |  |  |  |
| contributor, during the contributions totaled during the year for ar  | described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that e year, contributions exclusively for religious, charitable, etc., purposes more than \$1,000. If this box is checked, enter here the total contribution exclusively religious, charitable, etc., purpose. Don't complete any of its to this organization because it received nonexclusively religious, charione during the year. | s, but no such<br>ons that were received<br>the parts unless the |  |  |  |  |
| 990-EZ, or 990-PF), but it mu   | at isn't covered by the General Rule and/or the Special Rules doesn't file<br>ust answer "No" on Part IV, line 2, of its Form 990, or check the box on<br>o certify that it doesn't meet the filing requirements of Schedule B (Form  | line H of its Form 990-EZ or on its                              |  |  |  |  |

| Name of organization          | Employer identification number |
|-------------------------------|--------------------------------|
| S. R. Simplot Foundation, Inc | 47-5445541                     |
|                               |                                |

| Part I     | Contributors (See instructions) Use duplicate copi                                  | es of Part I if additional space is i | needed.  |
|------------|---|---------------------------------------|--|
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c) Total contributions               | (d)<br>Type of contribution  |
| 1          | Scott R Simplot P O Box 27 Boise ID 83707 Foreign State or Province Foreign Country | \$ 2,421,600                          | Person Payroll Noncash  (Complete Part II for noncash contributions) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c)<br>Total contributions            | (d)<br>Type of contribution  |
|            | Foreign State or Province Foreign Country   | \$                                    | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a)<br>No. | (b) Name, address, and ZIP + 4  | (c) Total contributions               | (d)<br>Type of contribution  |
|            | Foreign State or Province Foreign Country:  | \$                                    | Person Payroll Noncash (Complete Part II for noncash contributions)  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c) Total contributions               | (d)<br>Type of contribution  |
|            | Foreign State or Province Foreign Country   | \$                                    | Person Payroll Oncash (Complete Part II for noncash contributions)   |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c) Total contributions               | (d)<br>Type of contribution  |
|            | Foreign State or Province Foreign Country:  | \$                                    | Person Payroll Noncash (Complete Part II for noncash contributions)  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4   | (c) Total contributions               | (d)<br>Type of contribution  |
|            | Foreign State or Province. Foreign Country  | \$                                    | Person Payroll Noncash (Complete Part II for noncash contributions)  |

Name of organization

Employer identification number 47-5445541

S. R Simplot Foundation, Inc. Part II Noncash Property (See instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I 20,000 Shrs Ceigene Corp \_\_1 \$ 2,378,600 12/23/2016 (a) No. (c) (b) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions) 20,000 Shrs Geron Corp \_\_1\_\_ \$ 43,000 (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions) (a) No. (c) (b) (d) from FMV (or estimate) Description of noncash property given Date received Part I (See instructions) (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions) (a) No. (c) (d) from FMV (or estimate) Date received Description of noncash property given Part I (See instructions)

| Name of or                | ganization<br>lot Foundation, Inc  |  |  |                    | Employer identification number 47-5445541  |  |  |
|---------------------------|--|--|--|--------------------|--|--|--|
| Part III                  | Exclusively religious, charitable, etc., co<br>(10) that total more than \$1,000 for the year<br>the following line entry. For organizations of<br>contributions of \$1,000 or less for the year | ear from any o<br>ompleting Part<br>(Enter this info | ne contributor. Comple<br>III, enter the total of exclormation once See instri | te colu<br>lusivel | section 501(c)(7), (8), or<br>umns (a) through (e) and<br>y religious, charitable, etc , |  |  |
| (a) No.                   | Use duplicate copies of Part III if additional   |  |  | Γ                  |  |  |  |
| from<br>Part I            | (b) Purpose of gift  | (c)  | Use of gift  | (0                 | l) Description of how gift is held   |  |  |
|                           |  |  |  |                    |  |  |  |
|                           |  | (e) T  | ransfer of gift  |                    |  |  |  |
|                           | Transferee's name, address, and ZIP + 4  |  | Relationship of transferor to transferee                                       |                    |  |  |  |
|                           | For Prov Country   |  |  |                    |  |  |  |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c)  | Use of gift  | (0                 | d) Description of how gift is held   |  |  |
|                           |  |  |  |                    |  |  |  |
|                           | (e) Transfer of gift  Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee   |  |  |                    |  |  |  |
|                           | For Prov Country   |  |  |                    |  |  |  |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c   | ) Use of gift  | (0                 | d) Description of how gift is held   |  |  |
|                           |  |  |  |                    |  |  |  |
|                           | (e) Transfer of gift   |  |  |                    |  |  |  |
|                           | Transferee's name, address, and a  | ZIP + 4  | Relations  | hip of             | transferor to transferee   |  |  |
|                           | For Prov Country   |  |  |                    |  |  |  |
| (a) No.<br>from<br>Part I | (b) Purpose of gift  | (c   | ) Use of gift  | (6                 | d) Description of how gift is held   |  |  |
|                           |  |  |  |                    |  |  |  |
|                           |  |  |  |                    |  |  |  |
|                           | (e) Transfer of gift   |  |  |                    |  |  |  |
|                           | Transferee's name, address, and a  | ZIP + 4  | Relations  | hip of             | transferor to transferee   |  |  |
|                           |  |  |  |                    |  |  |  |
|                           | For Prov Country   |  | <u> </u>   |                    |  |  |  |

## Part II, Line 10b (990-PF) - Investments - Corporate Stock

|   |                        |             | 7,619,085   | 8,062,620   | 7,619,085   | 8,062,620   |
|---|------------------------|-------------|-------------|-------------|-------------|-------------|
|   |                        | Num Shares/ | Book Value  | 충           | FMV         | FMV         |
|   | Description            | Face Value  | Beg of Year | End of Year | Beg of Year | End of Year |
| - | Ariad Pharmaceuticals  | 90,500      | 378,125     |             | 378,125     | 752,620     |
| 7 | Neurocrine Biosciences | 128,000     | 7,240,960   | 4,953,600   | 7,240,960   | 4,953,600   |
| 3 | Celgene Corp           | 20,000      |             |             |             | 2,315,000   |
| 4 | Geron Corp             | 20,000      |             | 41,400      |             | 41,400      |

# Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

S R Simplot Foundation, Inc.

| =7 |                       |                             | <del></del>                 |                             |                             |
|----|-----------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| )  | Expense<br>Account    | •                           |                             |                             |                             |
|    | Benefits              |                             |                             |                             |                             |
| )  | Compensation          | C                           | Ö                           | 0                           | Ö                           |
|    | vg Hrs<br>r Week      | 000                         | 000                         | 000                         | 000                         |
|    | Title                 | President/Dir<br>ector      | Director                    | Director                    | Director                    |
|    | Foreign Country       |                             |                             |                             |                             |
|    | Zp Code               | 83702                       | 83702                       | 83702                       | 83702                       |
|    | State                 | Q                           | <u>o</u>                    | Q                           | ₽                           |
|    | Crty                  | Boise                       | Boise                       | Boise                       | Boise                       |
|    | Street                | 999 Main Street, Suite 1300 | 999 Main Street, Suite 1300 | 999 Main Street, Suite 1300 | 999 Main Street, Suite 1300 |
|    | Check "X" if Business |                             |                             |                             |                             |
|    | Name                  | Scott R Simplot             | Maggie Soderberg            | Knstın Holly Simplot Thomas | Jill Enn Simplot            |
|    | L                     | <u> </u>                    |                             |                             |                             |