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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.

For	calend	dar year 2016 or tax year beginning ,	and ending				
Na	me of fou	undation			A Empl	oyer identification number	
		T FEDERAL FOUNDATION, INC				-1141539	
		d street (or P O box number if mail is not delivered to street address)	Ro	oom/suite	B Telep	s)	
		1329 ALBION AVE n, state or province, country, and ZIP or foreign postal code			20	8-733-4222	<u>_</u>
	URL				C If exe	mption application is pending,	check here
			rn of a former public cl	harity	D 1 F	preign organizations, check he	ra b [
•		Final return Amended	•			-	_
		Address change Name cha				preign organizations meeting t 5% test, check here and attach	_
	Shook (type of organization X Section 501(c)(3) exempt private					,
					•	ate foundation status was tem in 507(b)(1)(A), check here	ninated under
			le private foundation X Cash Acc	muel.			
			X Cash Acc	ruai		foundation is in a 60-month te section 507(b)(1)(B), check h	_
	ne 16)	ear (from Part II, col (c), 1,338,094 (Part I, column (d) must	ho on each house l		4,743	oodion oo (D)(T)(D), aloatti	U/U
	art E	Analysis of Revenue and Expenses (The total of	.,				(d) Disbursements
1 1	41 L	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net inv		(c) Adjusted net income	for charitable
		the amounts in column (a) (see instructions))	books			income	purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	281,669				
	2	Check ▶ ☐ If the foundation is not required to attach Sch B	***************************************				
	3	Interest on savings and temporary cash investments	16,748	:	16,748	16,748	
	4	Dividends and interest from securities					
	5a	Gross rents			·····	•••••••••••••••••	
ē	b	Net rental income or (loss)					
Revenue	6a	Net gain or (loss) from sale of assets not on line 10	PR		ş		
	b	Gross sales price for all assets on line 6a	32.33		. `		
	7	Capital gain net income (from Part IV, line 2)		4 6 3013	1510		
	8	Net short-term capital gain				0	
	9	Income modifications			~~ `	***************************************	
	10a b	Gross sales less returns and allowances	······	<u> </u>	·······		
	c	Less: Cost of goods sold Gross profit or (loss) (attach schedule)				_	
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	298,417		L6,748	16,748	
	13	Compensation of officers, directors, trustees, etc	0				
Šě	14	Other employee salaries and wages					
penses	15	Pension plans, employee benefits					
ά	16a	Legal fees (attach schedule)					
EN CO	b	Accounting fees (attach schedule)					
Ę	С	Other professional fees (attach schedule)					
Ţ,	17	Interest	<u>.</u>				
<u> </u>	18	Taxes (attach schedule) (see instructions) STMT 1	174	<u> </u>	174	174	
E	19	Depreciation (attach schedule) and depletion					<u>.</u>
٦	20	Occupancy					
> <u>⊽</u>	21	Travel, conferences, and meetings					
کھ	22	Printing and publications					
'n	23	Other expenses (att sch.)					
ati	24	Total operating and administrative expenses.	174		174	174	0
Operating and Administrative Ex	25	Add lines 13 through 23 Contributions, gifts, grants paid SEE STATEMENT 2	272,788		1/3	1/4	272,788
Ṓ,	25 26	Contributions, gifts, grants paid SEE STATEMENT 2 Total expenses and disbursements. Add lines 24 and 25	272,962		174	174	272,788
; ;;;	27	Subtract line 26 from line 12	_,_,_0			-, -	,,00
	a	Excess of revenue over expenses and disbursements	25,455				
	b	Net investment income (if negative, enter -0-)			L6,574		
	c	Adjusted net income (if negative, enter -0-)				16,574	11

Part II		Balance Sheets Attached schedules and amounts in the description column		Beginning of year		End o	f year
_	+ 447717	should be for end-or-year amounts only (See instruction	s)	(a) Book Value	(b) Book Value		(c) Fair Market Value
	1	Cash – non-interest-bearing		22,125		856	60,856
	2	Savings and temporary cash investments		1,290,514	1,277,	238	<u>1,277,</u> 238
	3	Accounts receivable ▶					
		Less allowance for doubtful accounts ▶					
	4	Pledges receivable ▶]	
		Less allowance for doubtful accounts ▶					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other				1	
		disqualified persons (attach schedule) (see					
		instructions)					
	7	Other notes and loans receivable (att. schedule)					
		Less allowance for doubtful accounts ▶	0			ł	
ম	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
As	10a	Investments – U S and state government obligations (attach schedule)					
	b	Investments – corporate stock (attach schedule)					
	С	Investments – corporate bonds (attach schedule)					
	11	Investments – land, buildings, and equipment basis					i
		Less accumulated depreciation (attach sch.) ▶		1		ĺ	
	12	Investments – mortgage loans					
	13	Investments – other (attach schedule)					
	14	Land, buildings, and equipment basis ▶			***************************************		······································
		Less accumulated depreciation (attach sch.)		[ľ	
ı	15	Other assets (describe ▶)		**-*		
	16	Total assets (to be completed by all filers – see the	,				
		instructions Also, see page 1, item l)		1,312,639	1,338,	094	1,338,094
	17	Accounts payable and accrued expenses					
	18	Grants payable				\neg	
es	19	Deferred revenue			-	$\neg \neg$	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			"	\neg	
ap	21	Mortgages and other notes payable (attach schedule)					
	22	Other liabilities (describe)			\neg	
	23	Total liabilities (add lines 17 through 22)	<i>'</i>	0		0	
		Foundations that follow SFAS 117, check here	▶ X			\dashv	
Š		and complete lines 24 through 26 and lines 30 and 31.					
nces	24	Unrestricted		362,639	338,	094	
를	25	Temporarily restricted					
Net Assets or Fund Balan	26	Permanently restricted		950,000	1,000,	000	
밀		Foundations that do not follow SFAS 117, check here			_, ,		
괴		and complete lines 27 through 31.					
9	27	Capital stock, trust principal, or current funds	}				
ş	28	Paid-in or capital surplus, or land, bldg, and equipment fund		· · · · · · · · · · · · · · · · · · ·		\dashv	
SS	29	Retained earnings, accumulated income, endowment, or other funds	ľ			$\neg \uparrow$	
\$	30	Total net assets or fund balances (see instructions)		1,312,639	1,338,	094	
휜	31	Total liabilities and net assets/fund balances (see			2/330/		
	٥,	instructions)		1,312,639	1,338,	094	
_	Part II		ces			<u> </u>	
		net assets or fund balances at beginning of year – Part II, column (a), lin	***	st agree with	·		
•		f-year figure reported on prior year's return)	.5 55 (1110)	ag. 00 mili	1	1	1,312,639
2		amount from Part I, line 27a			ŀ	2	25,455
		increases not included in line 2 (itemize)			ŀ	3	23,133
		nes 1, 2, and 3			ŀ	4	1,338,094
		ases not included in line 2 (itemize)			ŀ	5	_,
		net assets or fund balances at end of year (line 4 minus line 5) – Part II,	column (h	o), line 30	ŀ	6	1,338,094
	, (101	ines access or raine balances at one or your finite + minus line of -1 att it,		-,, ,			

Part IV Capital Gains a	nd Losses for Tax on Investm	ent Income			
	ribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs. MLC Co.)		(b) How acquired P – Purchase D – Donation	(c) Date acq (mo , day,	
1a N/A					
b					
С					
<u>d</u>					
<u>e</u>	···				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	1	t or other basis opense of sale		(h) Gain or (loss) (e) plus (f) minus (g)
_a		 			
<u>b</u>		ļ	_		<u> </u>
_ c				 -	
<u>d</u>		-			
Complete only for assets shown	g gain in column (h) and owned by the f	oundation on 12/3	1/69		
(I) F M V as of 12/31/69	(j) Adjusted basis	(k) Exc	cess of col (ı)	col (k	ains (Col. (h) gain minus), but not less than -0-) or
	as of 12/31/69	over	col (j), if any		osses (from col (h))
a .		 			
<u>b</u>					
C		 			
d e		 	-		
2 Capital gain net income or (net c	apital loss) If gain, also enter in				
2. Not short torm conital gain or (los	If (loss), enter -0- in ss) as defined in sections 1222(5) and (in	_	-	2	
, ,	, column (c) (see instructions) If (loss),	· _			
Part I, line 8	, column (c) (see instructions) in (loss),			3	
	nder Section 4940(e) for Reduc	ced Tax on Ne	t Investment Inco		
	nis part blank tion 4942 tax on the distributable amour lify under section 4940(e) Do not comp		e base period?		Yes X No
1 Enter the appropriate amount in	each column for each year, see the inst	ructions before ma	king any entries		
(a) Base period years Calendar year (or tax year beginning in	(b) Adjusted qualifying distributions	s Net va	(c) liue of noncharitable-use assets		(d) Distribution ratio (col (b) divided by col (c))
2015	221	,639	1,265,3	95	0.175154
2014		,984	1,251,5		0.289239
2013		,900	1,238,8		0.050774
2012		,102	1,221,2		0.050032
2011	59	,974	1,164,1	.51	0.051517
2 Total of line 1, column (d)				2	0.616716
3 Average distribution ratio for the	5-year base period – divide the total on	line 2 by 5, or by th	ne		
number of years the foundation h	nas been in existence if less than 5 year	S		3	0.123343
4 Enter the net value of noncharital	ble-use assets for 2016 from Part X, line	5		4	1,305,486
5 Multiply line 4 by line 3				5	161,023
6 Enter 1% of net investment incom	ne (1% of Part I, line 27b)			6	166
7 Add lines 5 and 6				7	161,189
8 Enter qualifying distributions from	n Part XII, line 4 n line 7, check the box in Part VI, line 1b	o, and complete tha	at part using a 1% tax ra	8 ate See the	272,788
Part VI instructions					5 990 PE

	Hade-Fr (2016) FIRST FEDERAL FOUNDATION, INC. 57-1141539			<u>f</u>	Page 4
-	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instructions)	····			
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)				
b		1			166
	here ▶ X and enter 1% of Part I, line 27b				
С					
	Part I, line 12, col (b)				
2	and the contract of the contra	2			0
3		3			166
4		4			0
5	· · · · · · · · · · · · · · · · · · ·	5	······		166
6	Credits/Payments				
а	2016 estimated tax payments and 2015 overpayment credited to 2016				
b	Exempt foreign organizations – tax withheld at source				
С	Tax paid with application for extension of time to file (Form 8868)				
d	Backup withholding erroneously withheld				
7		7	_		
8	_	В			
9	· · · · · · · · · · · · · · · · · · ·	9			<u> 166</u>
10		0			
11	······································	1			
Pi	art VII-A Statements Regarding Activities		,		1
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it			Yes	No
	participate or intervene in any political campaign?		1a		X
Ь	, , , , , , , , , , , , , , , , , , , ,				
	Instructions for the definition)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials				
	published or distributed by the foundation in connection with the activities				
С	Did the foundation file Form 1120-POL for this year?		1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
	on foundation managers > \$				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
	If "Yes," attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of				
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	/-	<u>4a</u>		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
_	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			77	
_	conflict with the state law remain in the governing instrument?		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part X	V	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)				
L-	ID If the answer is "Yea" to line 7, has the foundation furnished a convert Form 000 DE to the Atternov Consent.				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		0.	x	
	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b		
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		9	x	
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		-		
•	names and addresses		10		x
	names and addresses		om 99	0-PF	
				•	(IV)

P	art VII-A · Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		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		_X_
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address HTTP://BANKFIRSTFD.COM	_13	X	
14	The books are in care of ▶ MICHAEL TRAVELLER Telephone no ▶ 208-7	33-	422	2
	383 SHOSHONE ST N			
	Located at ▶ TWIN FALLS ID ZIP+4 ▶ 83303	L		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – Check here		1	▶ [
	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		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶	<u></u>		
Pa	art 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)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(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)? Yes X No			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days) Yes X No			
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)? N/A	1ь	İ	
	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? N/A	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2016?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement – see instructions) N/A	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20 , 20 , 20 , 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year? Yes X No			
b	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) N/A	3b	ŀ	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>x</u>
4a 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	İ	x
	F	om 99	0-PF	
		_		. ,

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_P	art VII-B Statements Regarding Activities for Which Form	1720 May Be F	Required (con	tinued)			
5a	During the year did the foundation pay or incur any amount to.						
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4	945(e))?	L.,	Yes X No			
	(2) Influence the outcome of any specific public election (see section 4955), or to	o carry on,					
	directly or indirectly, any voter registration drive?		₩,	Yes X No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?			Yes 🗓 No			
	(4) Provide a grant to an organization other than a charitable, etc., organization	described in					
	section 4945(d)(4)(A)? (see instructions)			Yes 🗓 No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or	educational			1		
	purposes, or for the prevention of cruelty to children or animals?		Π,	res X No	l 1		
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under	er the exceptions d	lescribed in				
	Regulations section 53 4945 or in a current notice regarding disaster assistance			N/A	5b		
	Organizations relying on a current notice regarding disaster assistance check he	re		▶ □			
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption fro						
	because it maintained expenditure responsibility for the grant?		N/A 🗌 🔻	res No			
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)						
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pa	v premiums					
	on a personal benefit contract?	, , , , , , , , , , , , , , , , , , , ,		res X No			
h	Did the foundation, during the year, pay premiums, directly or indirectly, on a per	sonal henefit contr			6b	x	
-	If "Yes" to 6b, file Form 8870	Sonai Beneni conti	aut.				
72	At any time during the tax year, was the foundation a party to a prohibited tax sh	elter transaction?		res X No			
	If "Yes," did the foundation receive any proceeds or have any net income attribut			N/A	7b	İ	
	art VIII Information About Officers, Directors, Trustees, Fo						
, ,	and Contractors	andation main	agers, riigiliy	i ala Employ	,,		
1 1	ist all officers, directors, trustees, foundation managers and their compens	ation (see instruc	tions)				
				(d) Contributions to	Γ		
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	employee benefit	(e) Expe	(e) Expense account,	
	(a) Name and address	devoted to position	enter -0-)	plans and deferred compensation	other	allowances	
	E STATEMENT 3			30pa			
31	E SIRIEMENI 3				1		
	- HAMP						
					 		
					 		
	Commendation of the binkers and annulation of the state o		1 1m. a4i a = \ 1d				
2	Compensation of five highest-paid employees (other than those included o "NONE."	n iine 1 – see ins	tructions). If non	e, enter			
	NONE.	,	ı	(d) Contabilities 4			
	4.44	(b) Title, and average	4.3.0	(d) Contributions to employee benefit	(e) Expr	ense account,	
	(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		allowances	
		· · · · · · · · · · · · · · · · · · ·		compensation	 		
NC	NE						
					—		
							
			<u> </u>		<u> </u>		
		·					
	1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-				<u> </u>		
					<u> </u>	<u> </u>	
Tota	I number of other employees paid over \$50,000			• · · · •		0	

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Part VIII	Information About Officers, Directors, Trustees, Found	lation Managers, Highly Paid E	mployees,
3 Five highe	and Contractors (continued) est-paid independent contractors for professional services (see instru	uctions). If none, enter "NONE,"	
•	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
		- 1 * ****	
		+	
Total number of	others receiving over \$50,000 for professional services		•
Part IX-A	Summary of Direct Charitable Activities		
	s four largest direct charitable activities during the tax year. Include relevant statistical information softher beneficiaries served, conferences convened, research papers produced, etc.	such as the number of	Expenses
1 ANNUA	L GRANT CYCLE WITH GRANTS MADE TO 24	ORGANIZATIONS.	
	· · · · · · · · · · · · · · · · · · ·		
2			
3			
Δ			-
•			
Part IX-B	Summary of Program-Related Investments (see instru	ictions)	
1 N/A	rigest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 21/22			
2			
All other program-re	elated investments. See instructions		
3			
			i e

▶

Total. Add lines 1 through 3

а	Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1a	272,788
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	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	272,788
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	166
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	272,622

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Form 990-PF (2016)

_	990	DE	

Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions)

Excess distributions carryover to 2017.

Subtract lines 7 and 8 from line 6a

Analysis of line 9
Excess from 2012
Excess from 2013
Excess from 2014
Excess from 2015
Excess from 2016

Part XV Supplementary Information (co	ontinued)			
3 Grants and Contributions Paid During the	e Year or Approved for F	uture Payment		
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	_
•	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount 272,788
Total	,,		▶ 3a	272,788
b Approved for future payment N/A				
Total		<u> </u>	▶ 3b	
ival			<u> </u>	·

	Part XVI-A	Analysis of Income-Producing Act	<u>ivities</u>				· · · · · · · · · · · · · · · · · · ·
En	iter gross amo	ounts unless otherwise indicated.	Unrelate	ed business income	Exclude	d by section 512, 513, or 514	(e)
			(a)	(b)	(c)	(d)	Related or exempt
	•		Business code	Amount	Exclusion code	Amount	function income (See instructions)
1	Program sei				 		(555 1151 451 5115)
					 		
					┼		
					 		·····
		 	<u> </u>		-		
	_				 		
	f	d contracts from government agencies			1		
2	_	dues and assessments			† 		· · · · · · · · · · · · · · · · · · ·
3		savings and temporary cash investments			†		16,748
4		nd interest from securities					
5		come or (loss) from real estate				***************************************	`,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
_		anced property					
		t-financed property					
6		come or (loss) from personal property					
7	Other invest	ment income				_	
8	Gain or (loss	s) from sales of assets other than inventory					
9	Net income	or (loss) from special events					
10	Gross profit	or (loss) from sales of inventory					
11	Other reven	ue. a					
	с				ļ		
	d				<u> </u>		
	е						
		d columns (b), (d), and (e)	L	0	l	0	16,748
		ne 12, columns (b), (d), and (e)				13	16,748
	ee worksheet Part XVI-B	in line 13 instructions to verify calculations) Relationship of Activities to the A	oomnlichm	ont of Evennt D	urnosa	<u> </u>	
	Line No.	Explain below how each activity for which income		•			
	Line No. ▼	accomplishment of the foundation's exempt purpo					
	N/A	accomplication of the real action of state party	(011101 1110)			, , , , , , , , , , , , , , , , , , , ,	
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_							

01111 33	0-1 1 (201	<u> </u>			117 110		<u> </u>			Гау	ye i
Part :		Information Regardantes	_	ansfers To an	d Transactio	ns and Relati	onships Wi	th Noncharitabl	е		
1 Di		inization directly or ind		ge in any of the fol	llowing with any o	ther organization	described			Yes	No
	_	01(c) of the Code (other		•	•	_					
org	ganization	ıs?									
a Tra	ansfers fro	om the reporting found	lation to a no	ncharitable exem	pt organization o	f					
(1)	Cash								1a(1)		X
	Other as								1a(2)		X
	her transa										
		assets to a noncharit						1	1b(1)		X
		ses of assets from a no		, -	ion				1b(2)		X
		of facilities, equipment,		sets					1b(3)		X
		rsement arrangements r Ioan guarantees	i					ı	1b(4) 1b(5)		X
	•	ance of services or me	emhershin oi	r fundraising solici	itations				1b(6)		X
		acilities, equipment, m	-	_					1 <u>0(0)</u> 1c		X
		r to any of the above i				nn (b) should alwa	avs show the fa	เ air market		1	
		goods, other assets, o			=		-				
		transaction or sharing	_	-	=						
	ine no	(b) Amount involved		e of noncharitable exem				ansactions, and sharing arr	angeme	nts	
N/A											
 											
	-										
											
de	scribed in 'Yes," con	ation directly or indirect section 501(c) of the inplete the following sci	Code (other	than section 501(c)(3)) or in sectio		· · · · · · · · · · · · · · · · · · ·	[] Ye	es X	No
37 /	•) Name of organization		(b) Type of o	organization		(c) Descrip	tion of relationship			
N/	<u> </u>							,			
					······						
							· · · · · · · · · · · · · · · · · · ·				
						·····					
Sign Here		alties of perjury, I declare that complete Declaration of p			on all information of v	which preparer has any		May the IRS discus with the preparer s (see instructions)?	s this re	eturn elow	No
		2/2/	en	cathe	10/3	3/17	PRES	IDENT Ducto			
	Śigna	ature of officer or trustée		0	Date		Title				
Paid		pe preparer's name			Preparer's signatur	0	1+ H	Date		Check self-em	_
raiu Prepare		HEN D WESTFAL			STEPHEN D	WESTFALES.	4 langet	10/31		155	
Jse Onl	V Firm's n	1220		WESTFALL	, CPAS					$\frac{.176}{.791}$	
	Firm's a			N AVENUE				Firm's EIN ► 82 - 9			
	BURLEY, ID 83318								- 0 /	<u>0 - U</u>	<u> </u>

12/22/16

3,735 1,879 4,560

3,500

Charitable. Purpose 5/10/16 5/25/16 8/09/16 8/09/16 8/09/16 8/09/16 8/09/16 8/09/16 8/09/16 12/22/16 12/22/16 12/22/16 12/22/16 1/14/16 1/18/16 10/12/16 12/22/16 12/22/16 12/22/16 12/22/16 12/22/16 12/22/16 Date ጭ ጭ Statement 2 - Form 990-PF, Part I, Line 25 - Noncash Contributions, Gifts, Grants 174 174 Adjusted Book Value Explanation Set Statement 1 - Form 990-PF, Part I, Line 18 - Taxes 174 174 Investment **Book Value** Federal Statements Ret Amount 174 Explanation Total FM< Noncash Description INDIRECT TAXES/LICENSES **Description** 4,050 5,000 2,750 60,000 16,000 68,000 10,493 5,000 2,500 5,000 2,000 1,250 1,300 5,000 2,651 3,672 3,184 1,200 1,651 3,000 1,981 4,332 3,000 TOTAL 57-1141539 Amount

57-1141539	Federal Statements
<u>For</u>	m 990-PF, Part XV, Line 2b - Application Format and Required Contents
•	Description
NAME, ADDRES	SS, IRS STATUS, REQUEST INFORMATION
	Form 990-PF, Part XV, Line 2c - Submission Deadlines
	Description
JUNE 16TH AN	ND NOVEMBER 14TH
	Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations
	Description
NONE	

57-1141539	Federal	ederal Statements	S		•
Statement 3 - Form 990-PF,		e 1 - List of Of	Part VIII, Line 1 - List of Officers, Directors, Trustees,	rustees, Etc.	
Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
TOM ASHENBRENER 3385 HIGHLAWN DR TWIN FALLS ID 83301	PRESIDENT	0.00	0	0	0,
MIKE HASKIN 1140 18TH ST HEYBURN ID 83336	DIRECTOR	0.00	0	0	0
JACKIE FREY 3803 N 1500 E BUHL ID 83316	DIRECTOR	00.0	0	0	0
MARY BAUSCHER 111 PELICAN DR RUPERT ID 83350	DIRECTOR	0.00	0	0	0
SHANE JENKINS 696 WHISPERING PINE DR TWIN FALLS ID 83301	DIRECTOR	00.0	0	0	0
BRIAN WILLIAMS 339 N 300 E JEROME ID 83338	DIRECTOR	0.00	0	0	0
LORI WARD 1070 LAURELWOOD CT. TWIN FALLS ID 83301	DIRECTOR	0.00	0	0	0
SETH COLLINS 831 O LEARY WAY TWIN FALLS ID 83301	DIRECTOR	0.00	0	0	0
MARGIE MCBRIDE 584 IB PERRINE RD. TWIN FALLS ID 83301	DIRECTOR	00.0	0	0	O M

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57-1141539

Name	Address	S	1	
Address	Relationship	Status	Purpose	Amount,
OF TWIN FALLS TWIN FALLS ID	321 2ND AVE	EAST GOVERNMENT	PURCHASE PLAYGROUND EQUIPMENT	46,100
CITY OF TWIN FALLS IDAHO TWIN FALLS ID 83301 NONE	321 2ND AV	E EAST GOVERNMENT	PURCHASE PLAYGROUND EOUIPMENT	60.000
3 IDAHO	321 2ND AVE	Ţ		
TWIN FALLS ID 8	HILL THE COL	GOVERNMENT	PURCHASE PLAYGROUND EQUIPMENT	16,000
CIII OF IWIN FALLS IDARO TWIN FALLS ID 83301 NONE	321 ZND AVE	GOVERNMENT	PURCHASE PLAYGROUND EOUIPMENT	68.000
IDAHO	321 2ND AVI	E		
TWIN FALLS ID 83301 HANSEN SCHOOL PISTEDICE	INT KM CRR	GOVERNMENT	PURCHASE PLAYGROUND EQUIPMENT	10,493
HANSEN ID 83334 NONE	S NITHIN OCC	GOVERNEMNT	REPLACE FLOORING	5.000
S INC.	1770 PARKVIEW DR.	ж.)
TWIN FALLS ID 83301 NONE	1	(3)	FILM EDITING EQUIPMENT	2,500
JST	PO BOX 833	(
NONE TEROME TO 83338 NONE KIMBERLY POINDATION	E PO BOX 369	(ع)	FUMP TRUCK FOR BIKE TRACK	2,000
KIMBERLY ID 83341 NONE	;))	(3)	PURCHASE BOARD BOOKS	2.000
STANTON HEALTH CARE OF MAGIC VALLEY	PO BOX 238	•)) i
TWIN FALLS ID 83303 NONE		(3)	REMODEL CLASS ROOM	4,332
DISTRICT	PO BOX 117			-
		GOVERNMENT	NEW BLEACHERS FOR GYM	3,000
TION CENTER	425 2ND AVI			
TWIN FALLS ID 83301	50	(3)	FURNITURE	1,250
OR.	530 SHOSHON	. ₩		•
		(3)	NEW DISHWASHER	1,300
SCHOOL INC	1218 N. COI	RD		
	t 0	3)	4 TIER RISER SYSTEM	2,000
K CIIIAENS TR 62241	FO BOA 403	í		,
ID 83341	TOS	ري ا	CONVECTION OVEN	2,651
CASSIA JOINT SCHOOL DISTRICT ISL	333 WEST 2	T.H. Y.I.		1
OSSIO CHOOL DISTRICT 2	500 10TH A	INITIAL T	CHAIRS FOR LIBRARI	3,672
1 1 1 1		GOVERNMENT	WIRELESS MICROPHONE SYSTEM	3.184
KIDS COUNT TOO INC.	PO BOX 5533			
TWIN FALLS ID 83303 NONE	E 501C(3)	3)	COMPUTER AN AUDIO VIDEO EQUIPMENT	4,050
TWIN FALLS ID 83303 NONE		3)	REPAIR ROOF	5,000

Statement 4 - Form 990-PF, Part XV, Line 3a - Grants and Contributions Paid During the Year (continued)

MAGIC VALLEY SYMPHONY ORCHESTRA	Relationship Status	ns Purpose	e Amount	ount .
	180	NOT HOLITICOGA		750
TWIN FALLS ID 83303 MAGIC VALLEY REHABILITATION SERVICE	501C(3) PO BOX 189	PRODUCTION COSTS		00117
TWIN FALLS ID 83303 NONE	501C(3)	NEW TELEPHONES		1,200
MINI CASSIA SHELTER FOR WOMEN	PO BOX 334			
RUPERT ID 83350 NONE	501C(3)	WASHER, DRYER AND FREEZER	EZER	1,651
MINIDOKA COUNTY SCHOOL DIST 311 FND	310 10TH ST			
RUPERT ID 83350 NONE	GOVERNMENT	MENT CONSTRUCTION COSTS		3,000
RISE UP AND SING	981 E. 800 N.			
RUPERT ID 83350 NONE	501C(3)	TABLE AND CHAIR COVERS	SS	1,981
TWIN FALLS COUNTY	PO BOX 126			
TWIN FALLS ID 83303 NONE	GOVERNMENT	1ENT NEW FACADE FOR MUSEUM	Į	3,500
TWIN FALLS SCHOOL DISTRICT 411	300 N. COLLEGE RD W.	м.		
TWIN FALLS ID 83301 NONE	GOVERNMENT	1ENT COMPUTERS		3,735
TWIN FALLS SCHOOL DISTRICT 411	201 MAIN AVE. W.			
TWIN FALLS ID 83301 NONE	GOVERNMENT	MENT FUNDING FOR NEW SCHOOL PROGRAM	OL PROGRAM	1,879
UNIVERSITY OF IDAHO FOUNDATION	630 ADDISON AVE. W.			
TWIN FALLS ID 83301 NONE	501C(3)	EDUCATION SYSTEM PURCHASE	CHASE	4,560
TOTAL			27	272,788