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Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491115004177

2016

OMB No 1545-0052

## **Return of Private Foundation**

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

Do not enter social security numbers on this form as it may be made public. Open to Public ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

For calendar year 2016, or tax year beginning 01-01-2016 , and ending 12-31-2016 A Employer identification number HAROLD C HAVENS FOUNDATION 82-6032394 Number and street (or P O box number if mail is not delivered to street address) C/O 1107 MAIN STREET B Telephone number (see instructions) (208) 756-2111 City or town, state or province, country, and ZIP or foreign postal code SALMON, ID  $\,\,$  83467  ${f C}$  If exemption application is pending, check here ☐ Initial return G Check all that apply ☐ Initial return of a former public charity D 1. Foreign organizations, check here Amended return ☐ Final return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change ☐ Name change E If private foundation status was terminated under section 507(b)(1)(A), check here ☑ Section 501(c)(3) exempt private foundation H Check type of organization  $\square$  Section 4947(a)(1) nonexempt charitable trust  $\square$  Other taxable private foundation I Fair market value of all assets at end J Accounting method ☐ Cash ☑ Accrual If the foundation is in a 60-month termination under section 507(b)(1)(B), check here of year (from Part II, col (c), ☐ Other (specify) line 16) \$ 145,213 (Part I, column (d) must be on cash basis ) Part I Analysis of Revenue and Expenses (The total (d) Disbursements Revenue and (b) Net investment Adjusted net for charitable (c) of amounts in columns (b), (c), and (d) may not necessarily expenses per books purposes (cash basis only) equal the amounts in column (a) (see instructions) ) Contributions, gifts, grants, etc , received (attach schedule) Check ► ☐ If the foundation is **not** required to attach 2 3 Interest on savings and temporary cash investments Dividends and interest from securities 6,503 6,503 6,503 Gross rents Net rental income or (loss) ر**چه** ба Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications . 10a Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) c Other income (attach schedule) 11 Total. Add lines 1 through 11 . . 6,497 6,503 6,503 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses 16a Legal fees (attach schedule) . . . Accounting fees (attach schedule) Other professional fees (attach schedule) 18 64 Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion 19 20 21 Travel, conferences, and meetings 22 Printing and publications . . 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 . . . . 64 5,950 5,950 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 6,014 5,950 27 Subtract line 26 from line 12 Excess of revenue over expenses and 483 disbursements 6 439 Net investment income (if negative, enter -0-) **Adjusted net income**(If negative, enter -0-) For Paperwork Reduction Act Notice, see instructions. Form **990-PF** (2016) Cat No 11289X

33,042

146,585

163

7,450

7.613

138.972

138,972

146,585

33.141

148,826

64

5,950

6.014

142,812

142,812

148,826

2

3

4

5

6

138,972

483

3,357

142,812

142,812 Form **990-PF** (2016)

23

33.040

145,213

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule). . . . . .

Total liabilities(add lines 17 through 22) . . . . . . . . .

Foundations that do not follow SFAS 117, check here ▶ ✓

Paid-in or capital surplus, or land, bldg, and equipment fund

Capital stock, trust principal, or current funds . . . . . . . . .

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions) . . . . .

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at end of year (line 4 minus line 5)-Part II, column (b), line 30

Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-

Analysis of Changes in Net Assets or Fund Balances

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > \_

Other liabilities (describe ▶\_

Unrestricted . . . . .

Permanently restricted . . . . . .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶.

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

Temporarily restricted

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

12

13

14

15

16

17

18

19

20

21 22

23

24

25

28

29

31 Part III

Liabilities

Balances

Fund 26

ŏ

Assets 27

Net 30

2

3

	(a) the kınd(s) of property sold (e g , re thouse, or common stock, 200 shs	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )	
1 a BROOKFIELD REAL ASST	FND IN LIEU P SH	Р	1989-08-04	2016-11-06	
ь					
С					
d					
e					
(a)	(f)		(g)	(	h)
(e) Gross sales price	Depreciation allowed		other basis		r (loss)
<u> </u>	(or allowable)	plus exp	ense of sale	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	) mınus (g)
a	4		10	1	-6
b					
C					
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation	on 12/31/69		I)
(i)	(j)		(k)		h) gain minus less than -0-) <b>or</b>
FMV as of 12/31/69	Adjusted basis as of 12/31/69		of col(ɪ) l(ɪ), ɪf any		om col (h))
a	43 01 12,31,03	0 7 61 601	()), ii uii,		
b					
с					
d					
e					
		If gain, also enter in F	Part I line 7		
· -	ain or (loss) as defined in sections : rt I, line 8, column (c) (see instructi	ons) If (loss), enter -0	)- }	3	<u>-6</u>
Part V Qualification U	Inder Section 4940(e) for Re	educed Tax on Net	Investment In	come	
-	rivate foundations subject to the sec				
(ror optional ace by defined to p		ction is local tax on in		,	
If section 4940(d)(2) applies, le	ave this part blank				
Was the foundation liable for th	e section 4942 tax on the distributa	ble amount of any year	r in the base period	7 🔲 Y	es 🗹 No
If "Yes," the foundation does no	t qualify under section 4940(e) Do	not complete this part			
1 Enter the appropriate am	ount in each column for each year,	see instructions before	making any entrie	S	
(a) Base period years Calendar year (or tax year beginning in)	<b>(b)</b> Adjusted qualifying distributions	(c) Net value of noncharitab	le-use assets	<b>(d)</b> Distribution rat (col (b) divided by c	
2015	4,200		145,944	, 1	000 028778
2014	6,647		126,318		000 052621
2013	3,800		131,603		000 028875
2012	3,700		78,508		000 047129
2011	3,700		71,323		000 051877
2 Total of line 1, column (d	i)		2		000 209280
<b>3</b> Average distribution ratio	for the 5-year base period—divide	the total on line 2 by 5			
	dation has been in existence if less		<u>3</u>		000 041856
	ncharitable-use assets for 2016 fron	•	4		135,064
5 Multiply line 4 by line 3	(40)		5		5,653
	ent income (1% of Part I, line 27b)		6		64
			7		5,717
If line 8 is equal to or gre	ons from Part XII, line 4 $$ , $$ ater than line 7, check the box in Pa			 ng a 1% tax rate Se	5,950 e the Part VI
instructions				Fo	orm <b>990-PF</b> (2016

Form 990-PF (2016)		Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Paid E	imployees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter "NO	NE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
<b>Total</b> number of others receiving over \$50,000 for professional services		
Part IX-A Summary of Direct Charitable Activities		<u> </u>
List the foundation's four largest direct charitable activities during the tax year Include rele organizations and other beneficiaries served, conferences convened, research papers produ-		Expenses
1 DIRECT DONATIONS TO ORGANIZATIONS FOR USE IN THEIR GENERAL UN FUNDS, OR PROSELYTING ACTIVITES	NRESTRICTED ACTIVITIES , SCHOLARSHIP	0
2		
3		
<u></u>		
4		
Part IX-B Summary of Program-Related Investments (see I	netructions)	
Describe the two largest program-related investments made by the foundation during th	<u>`</u>	Amount
1 NONE	•	
2		
All other program-related investments See instructions		
3		
		-
Total. Add lines 1 through 3		•
		Form <b>990-PF</b> (2016)

2

За 3b

4

5

5.950

5.886

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64

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4. . . . . . . . . .

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

2

3

4

5

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

Page 9

1.496

5,193

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c From 2013. . . . **d** From 2014. .

XII, line 4 > \$

indicated below:

e From 2015. . . . .

utable amount for 2016 fr	ro
ributed income, if any, as	С
amount for 2015 only	
or prior years 2012.	

**5** Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 **b** Prior years' undistributed income Subtract

line 4b from line 2b . . . . . . . . . c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. . . . . . d Subtract line 6c from line 6b Taxable amount

—see instructions . . . . . . . . . . . . . e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . . . . f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017 . . . . .

6 Enter the net total of each column as

7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) . . . . . . . . 8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2017.

10 Analysis of line 9 a Excess from 2012. . **b** Excess from 2013. . c Excess from 2014. . . d Excess from 2015. . e Excess from 2016. .

Subtract lines 7 and 8 from line 6a . . . . . .

same amount must be shown in column (a) )

	Distributable amount for 2016 from Part XI, line 7	
2	Undistributed income, if any, as of the end of 2016	Г
а	Enter amount for 2015 only	
b	Total for prior years 2012, 2013, 2014	Г
1	Excess distributions carryover, if any, to 2016	Г
а	From 2011	
b	From 2012	l

f Total of lines 3a through e. . . . . . . 4 Qualifying distributions for 2016 from Part a Applied to 2015, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). . . . . c Treated as distributions out of corpus (Election

d Applied to 2016 distributable amount. . . . .

e Remaining amount distributed out of corpus

(a)

Corpus

(b)

Years prior to 2015

1.500

(c)

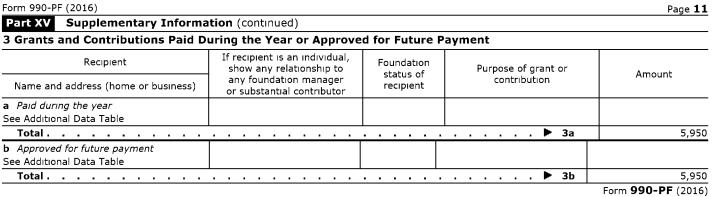
2015

4,454

4,454

1.500

1,500



er gross	amounts unless otherwise indicated	Unrelated bus	siness income	Excluded by section	512, 513, or 514	(e) Related or exemp
Program	service revenue	(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	<b>(d)</b> Amount	function incom (See instructions
a						
b						
	and contracts from government agencies					
_	rship dues and assessments					
	st on savings and temporary cash					
	ments					
	ds and interest from securities			14	6,503	
	tal income or (loss) from real estate					
	financed property ebt-financed property					
	ntal income or (loss) from personal property					
	nvestment income			+		
	r (loss) from sales of assets other than			+		
	ory			18	-6	
Net inc	ome or (loss) from special events					
	profit or (loss) from sales of inventory					
	evenue <b>a</b>					
4						
е					6.497	
e	al Add columns (b), (d), and (e).			13	6,497	6,49
e Subtota Total. e worksł	al Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) neet in line 13 instructions to verify calculatio	ns )			6,497	6,49
e Subtota Total. e worksl art XVI	al Add columns (b), (d), and (e)  Add line 12, columns (b), (d), and (e)  neet in line 13 instructions to verify calculation.  Belationship of Activities to the Explain below how each activity for which is the accomplishment of the foundation's ex	ns ) e Accomplishi income is reporte	ment of Exem	pt Purposes  of Part XVI-A contribut	ed importantly to	6,49
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Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

LK-III	- AAV-	-	Exempt Organi:	zations											
			nization directly or inc de (other than section									tion 501		Yes	No
a Tra	nsfers	s fro	m the reporting foun	dation to a n	oncha	rıtable ex	empt organizat	ion	of						
(1	) Casl	h.											1a(1)		No
(2	) Oth	er as	ssets										1a(2)		No
<b>b</b> Oth	ner tra	nsac	tions												
-			assets to a noncharı	•	_								1b(1)		No
(2	) Purc	chas	es of assets from a n	oncharitable	exem	pt organi	zation						1b(2)		No
			f facılıtıes, equipmen										1b(3)		No
(4	) Reir	nbur	sement arrangemen	ts									1b(4)		No
(5	) Loai	ns o	loan guarantees.										1b(5)		No
(6	) Perfo	orma	nce of services or me	embership o	r fundı	raising so	licitations						1b(6)		No
	_		cılıtıes, equipment, m										1c		No
of	the go	ods,	to any of the above other assets, or serv	vices given b	y the	reporting	foundation If	he f	oundation recei	ive	d less than fair m	arket valu	/alue ie		
ın .	any tra	ansa	ction or sharing arra	ngement, sh	ow in	column (	<b>d)</b> the value of	the	goods, other as	sset	s, or services rec	eived			
<b>(a)</b> Lin	e No	(1	Amount involved	(c) Name of	noncha	arıtable exe	empt organization	+	(d) Description	oft	ransfers, transactio	ns, and sha	rıng arra	ngemen	its
	-							+							
								+							
								$\top$							
								-							
								_							
								-							
								+							
<del>_</del>							1.	٠.							
			tion directly or indire	•			•					г	٦٧	<b>☑</b> N	1-
			section 501(c) of the	•	tnan	section 50	01(c)(3)) or in	secti	ion 52//			L	_l Yes	<b>▼</b> N	10
b If	Yes,"		plete the following so				L) T		1		(-) D				
			(a) Name of organizatio	ın			<b>b)</b> Type of organi	zatio	n		(c) Descripti	on or relation	onsnip		
	Une	der i	penalties of perjury,	I declare tha	t I hav	ve examır	ned this return.	ıncl	uding accompar	nyır	ng schedules and	statemen	ts, and	to the	best
			nowledge and belief,		orrect,	and com	plete Declarat	on c	of preparer (oth	ier t	:ȟan taxpayer) ıs	based on	all infor	mation	n of
Sign	wh		preparer has any kno	wledge			ı								
Here	<b>1</b>	***	***				2017-04-25		*****			May the I with the r			
	<b> </b>	Sıg	nature of officer or tr	rustee			Date		Title			(see instr	· —		
	•	F	Print/Type preparer's	name	Prepa	arer's Sıgı	nature		Date		Charles 15	PTIN			
											Check if self-				
			H DENNIS HAVENS	;					2017-04-25		employed 🕨 🗹				
Paid															
Prep			ırm's name ► H DE	NNIS HAVEN	IS CPA	4			•			Firm's E	IN ►		
Use	Only		1 11	07 144 5=								1			
		F	ırm's address ► 11	07 MAIN ST	KEET										
			SA	LMON, ID 83467 Phone no (208) 756-211							2111				
				,											

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount			
Name and address (home or business)	any foundation manager or substantial contributor	recipient					
a Paid during the year							
REXBURG 15TH WARD 166 S FIRST EAST REXBURG, ID 83440	NONE	NC	GENERAL MISSIONARY FUND	900			
SANTA CLARA 3RD WARD 2666 CRESTVIEW DRIVE SANTA CLARA, UT 84765	NONE	NC	GENERAL MISSIONARY FUND	900			
WASHINGTON PARK WARD 5701 8TH AVENUE N E SEATTLE, WA 98105	NONE	NC	GEENERAL MISSIONARY FUND	900			
REDMOND 1ST WARD 10115 172ND AVENUE N E REDMOND, WA 98052	NONE	NC	GENERAL MISSIONARY FUND	900			
GRAND TETON COUNCIL B S A 574 4TH STREET IDAHO FALLS, ID 83401	NONE	NC	GENERAL PROGRAM SUPPORT	250			
SALMON COMMUNITY CHOIR 417 WATER STREET SALMON, ID 83467	NONE	NC	COMMUNITY CHOIR SUPPORT	200			
STEELE MEMORIAL FOUNDATION 203 DAISY STREET SALMON, ID 83467	NONE	NC	MEDICAL HALTH CARE SUPPORT	250			
SALMON PUBLIC LIBRARY 204 MAIN STREET SALMON, ID 83467	NONE	NC	BUILDING FUND	250			
SALMON SCHOOL DIST 291 - MUSIC DEPT 907 SHARKEY STREET SALMON, ID 83467	NONE	NC	SCHOOL MUSIC DEPT SUPPORT	250			
SALMON SCHOOL DIST 291 - DRAMA DEPT 907 SHARKEY STREET SALMON, ID 83467	NONE	NC	SCHOOL DRAMA DEPT SUPPORT	250			
SANTA CLARA 3RD WARD 2666 CRESTVIEW DRIVE SANTA CLARA, UT 84705	NONE	NC	GENERAL MISSIONARY SUPPORT	900			

Total . 3a 5,950

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.  TY 2016 Gain/Loss from Sale of Other Assets Schedule										
Name: HAROLD C HAVENS FOUNDATION  EIN: 82-6032394										
Software	<b>Software ID:</b> 16000333									
Software Version: 17.2.0.0										
Name	Date A cquired	How A cquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	A ccumulated Depreciation

10

COST

2016-11

MARKET

DLN: 93491115004177

BROOKFIELD REAL ASST FND IN LIEU 1989-08

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efile GRAPHIC print - DO NOT PROCESS | As Filed Data -
                                                                       DLN: 93491115004177
TY 2016 General Explanation Attachment
                         Name: HAROLD C HAVENS FOUNDATION
                            EIN: 82-6032394
                    Software ID: 16000333
               Software Version: 17.2.0.0
```

As Filed Data -		DLN: 93491115004177					
TY 2016 Investments Corporate Bonds Schedule							
HAROLD C HAVEN	S FOUNDATION						
16000333							
17.2.0.0							
		HAROLD C HAVENS FOUNDATION 82-6032394 16000333					

Software Version: 17.2.0.0					
Name of Bond		End of Year Book Value	End of Year Fair Market Value		
A T T Global NotE 6.30 2038-01-18		5,462	5,555		
GE CAPITAL CORP NOTE 5.88 2038-01-14	·	9,826	11,206		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 934911150041//
TY 2016 Investments Corporat	e Stock Sched	ule

Name: HAROLD C HAVENS FOUNDATION

**EIN:** 82-6032394

**Software ID:** 16000333

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Software Version: 17.2.0.0		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
300 shares of IDA CORP	9,775	14,571
283 shares of BROOKFIELD REAL ASSTS RTRN MFND	13,162	6,046
225 shares of BANK OF AMERICA	10,080	4,973
587 shares of INCOME FUND OF AMERICA MUTL FUND	11,920	12,524
100 shares of CENTURYLINK	3,283	2,378
100 shares of HLTH CR REIT INC-WELLSTONE	2,752	7,184
727 shares of BOND FUND OF AMERICA MUTL FUND	9,652	9,741
1693 shares of INVESCO V K EQTY MUTL FUND	17,145	17,928
100 shares of ROYAL DUTCH SHELL PLC ADR	13,437	10,876

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TY 2016 Investments - Other Schedule						
Name:	HAROLD C HAVENS	5 FOUNDATION				
EIN:	82-6032394					
Software ID:	16000333					
Software Version:	17.2.0.0					

Software Version: 17.2.0.0				
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value	
1ST TRUST BLD AMER BOND 30 UNIT TRST	AT COST	10,038	10,273	
1ST TRUST BLD AMER 10-29 SER A UNIT TRT	AT COST	23,103	22,767	

TY 2016 Other Assets Schedule		

DLN: 93491115004177

Name: HAROLD C HAVENS FOUNDATION

**EIN:** 82-6032394

**Software ID:** 16000333

Software Version: 17.2.0.0

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## Other Assets Schedule

Other Assets Schedule					
Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value		
DIVIDEND FOR 2016 PREVIOUSLY REPORTED		23	23		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491115004177		
TY 2016 Other Increases Schedule					
Name:	HAROLD C HA	VENS FOUNDATION			
EIN:	82-6032394				
Software ID:	16000333				
Software Version:	17.2.0.0				
Description		Amount			
PRIOR YEAR ROI OF MUTUAL FUNDS NOT BOOKED IN LEDGER		357			
INCORRECT TYPO ERROR IN COST OF MUTUAL FUND TRANSFERRED TO NEW FUND		3,000			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -			DLN: 93491115004177
TY 2016 Substantial Contribut Schedule	ors			
Name:	HAROLD C HA	VENS FO	JNDATION	
EIN:	82-6032394			
Software ID:	16000333			
Software Version:	17.2.0.0			
Name			A	ddress
ESTATE OF VIRGINIA HAVENS			C/O 1107 MAIN STR SALMON, ID 83467	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DLN	i: 93491115004177	
TY 2016 Taxes Schedule					
Name:	HAROLD C H	IAVENS FOUNDAT	ON		
EIN:	82-6032394	82-6032394			
Software ID:	16000333				
Software Version:	17.2.0.0				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
Tax on investment Income 2015	64	64	64		