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OMB No 1545-0687

Form 990-T

Department of the Treasury
Internal Revenue ServiceExempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

For calendar year 2017 or other tax year beginning _____ and ending _____

► Go to www.irs.gov/Form990T for instructions and the latest information.

► Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for
501(c)(3) Organizations Only

2017

A Check box if
address changed

B Exempt under section

501(c)(3)

408(e) 220(e)

408A 530(a)

529(a)

C Book value of all assets
at end of year

88,176,349

Name of organization (Check box if name changed and see instructions)

Print or Type

FIND US FAITHFUL FOUNDATION

Number, street, and room or suite no. If a P O box, see instructions

10940 S PARKER ROAD #727

City or town, state or province, country, and ZIP or foreign postal code

PARKER CO 80134

F Group exemption number (See instructions) ►

G Check organization type ► 501(c) corporation 501(c) trust 401(a) trust Other trust

H Describe the organization's primary unrelated business activity

► See Statement 1

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ► Yes No
If "Yes," enter the name and identifying number of the parent corporation

J The books are in care of ► PRIVATE FOUNDATION SERVIC Telephone number ► 303-917-3280

Part I Unrelated Trade or Business Income

1a Gross receipts or sales _____
b Less returns and allowances _____ c Balance _____

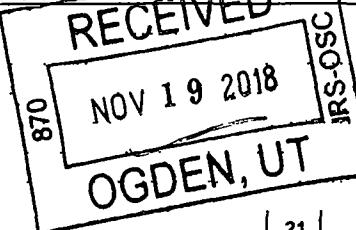
2 Cost of goods sold (Schedule A, line 7)
3 Gross profit Subtract line 2 from line 1c

4a Capital gain net income (attach Schedule D)
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)
c Capital loss deduction for trusts

5 Income (loss) from partnerships and S corporations (attach statement) See Stmt 2
6 Rent income (Schedule C)
7 Unrelated debt-financed income (Schedule E)
8 Interest, annuities, royalties, and rents from controlled organizations (Schedule F)
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)
10 Exploited exempt activity income (Schedule I)
11 Advertising income (Schedule J)
12 Other income (See instructions, attach schedule) See Stmt 3
13 Total. Combine lines 3 through 12

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)

14 Compensation of officers, directors, and trustees (Schedule K)
15 Salaries and wages
16 Repairs and maintenance
17 Bad debts
18 Interest (attach schedule)
19 Taxes and licenses
20 Charitable contributions (See instructions for limitation rules)
21 Depreciation (attach Form 4562)
22 Less depreciation claimed on Schedule A and elsewhere on return
23 Depletion
24 Contributions to deferred compensation plans
25 Employee benefit programs
26 Excess exempt expenses (Schedule I)
27 Excess readership costs (Schedule J)
28 Other deductions (attach schedule)
29 Total deductions. Add lines 14 through 28
30 Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13
31 Net operating loss deduction (limited to the amount on line 30)
32 Unrelated business taxable income before specific deduction Subtract line 31 from line 30
33 Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)
34 Unrelated business taxable income. Subtract line 33 from line 32 If line 33 is greater than line 32, enter the smaller of zero or line 32



DAA For Paperwork Reduction Act Notice, see instructions.

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SCANNED DEC 11 2018

Part III Tax Computation

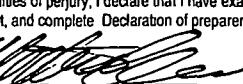
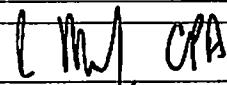
35	Organizations Taxable as Corporations. See instructions for tax computation	Controlled group members (sections 1561 and 1563) check here ► <input type="checkbox"/> See instructions and		
a	Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)	(1) <input type="text"/> \$ (2) <input type="text"/> \$ (3) <input type="text"/> \$		
b	Enter organization's share of (1) Additional 5% tax (not more than \$11,750) (2) Additional 3% tax (not more than \$100,000)		\$	\$
c	Income tax on the amount on line 34		► 35c	1,937
36	Trusts Taxable at Trust Rates. See instructions for tax computation	Income tax on the amount on line 34 from	► 36	
		► Tax rate schedule or Schedule D (Form 1041)	► 37	
37	Proxy tax. See instructions		► 38	
38	Alternative minimum tax		► 39	
39	Tax on Non-Compliant Facility Income. See instructions		► 40	1,937
40	Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies			

Part IV Tax and Payments

41a	Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)	41a		
b	Other credits (see instructions)	41b		
c	General business credit Attach Form 3800 (see instructions)	41c		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	41d		
e	Total credits. Add lines 41a through 41d	41e		
42	Subtract line 41e from line 40	42	1,937	
43	Other taxes Check if from Form 4255 Form 8611 Form 8697 Form 8866 Other (att sch)	43		
44	Total tax. Add lines 42 and 43	44	1,937	
45a	Payments A 2016 overpayment credited to 2017	45a	98,353	
b	2017 estimated tax payments	45b	61,647	
c	Tax deposited with Form 8868	45c		
d	Foreign organizations Tax paid or withheld at source (see instructions)	45d		
e	Backup withholding (see instructions)	45e		
f	Credit for small employer health insurance premiums (Attach Form 8941)	45f		
g	Other credits and payments Form 2439 Form 4136 Other Total ►	45g		
46	Total payments. Add lines 45a through 45g	46	160,000	
47	Estimated tax penalty (see instructions) Check if Form 2220 is attached	47		
48	Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed	48		
49	Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid	49	158,063	
50	Enter the amount of line 49 you want Credited to 2018 estimated tax ► 55,000 Refunded ►	50	103,063	

Part V Statements Regarding Certain Activities and Other Information (see instructions)

51	At any time during the 2017 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here ►	Yes	No
52	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file		X
53	Enter the amount of tax-exempt interest received or accrued during the tax year ► \$		X

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge		May the IRS discuss this return with the preparer shown below (see instructions)?	
Sign Here	 PRESIDENT/DIRECTOR <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Signature of officer	Date	Title	
Paid Preparer Use Only	Print/Type preparer's name Ronald A. Metcalfe, CPA	Preparer's signature 	Date 11/14/18 Check self-employed PTIN P00185209
	Firm's name ► Call & Metcalfe, CPA's		Firm's EIN ► 91-1753998
	690 De Long Ave Ste 400		Phone no 415-892-9001
	Firm's address ► Novato, CA 94945		

Schedule A – Cost of Goods Sold. Enter method of inventory valuation ►

1 Inventory at beginning of year	1	6 Inventory at end of year	6
2 Purchases	2	7 Cost of goods sold. Subtract line 6 from line 5 Enter here and in Part I, line 2	7
3 Cost of labor	3		
4a Additional sec 263A costs (attach schedule)	4a	8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes
b Other costs (attach schedule)	4b		No
5 Total. Add lines 1 through 4b	5		

Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1 Description of property(1) **N/A**

(2)

(3)

(4)

2 Rent received or accrued		
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total	Total	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ►
(c) Total income. Add totals of columns 2(a) and 2(b) Enter here and on page 1, Part I, line 6, column (A) ►		

Schedule E – Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property		2 Gross income from or allocable to debt-financed property	3 Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1) N/A				
(2)				
(3)				
(4)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
			Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
Totals				
Total dividends-received deductions included in column 8 ►				

Schedule F – Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1 Name of controlled organization	2 Employer identification number	Exempt Controlled Organizations			
		3 Net unrelated income (loss) (see instructions)	4 Total of specified payments made	5 Part of column 4 that is included in the controlling organization's gross income	6 Deductions directly connected with income in column 5
(1) N/A					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7 Taxable Income	8 Net unrelated income (loss) (see instructions)	9 Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				

► Add columns 5 and 10
Enter here and on page 1,
Part I, line 8, column (A)

Add columns 6 and 11
Enter here and on page 1,
Part I, line 8, column (B)

Totals

Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1) N/A				
(2)				
(3)				
(4)				

► Enter here and on page 1,
Part I, line 9, column (A)

Enter here and on page 1,
Part I, line 9, column (B)

Totals

Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1 Description of exploited activity	2. Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5 Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7 Excess exempt expenses, (column 6 minus column 5, but not more than column 4)
(1) N/A						
(2)						
(3)						
(4)						

► Enter here and on page 1, Part I, line 10, col (A)

► Enter here and on page 1, Part I, line 10, col (B)

Enter here and on page 1,
Part II, line 26

Totals

Schedule J – Advertising Income (see instructions)

Part I	Income From Periodicals Reported on a Consolidated Basis					
1 Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5 Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1) N/A						
(2)						
(3)						
(4)						

Totals (carry to Part II, line (5))

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Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2 Gross advertising income	3 Direct advertising costs	4 Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6 Readership costs	7 Excess readership costs (column 6 minus column 5, but not more than column 4)
(1) N/A						
(2)						
(3)						
(4)						
Totals from Part I						
	Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)				Enter here and on page 1, Part II, line 27
Totals, Part II (lines 1-5)						

Schedule K – Compensation of Officers, Directors, and Trustees (see instructions)

1 Name	2 Title	3 Percent of time devoted to business	4 Compensation attributable to unrelated business
(1) N/A		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			

2153J FIND US FAITHFUL FOUNDATION
20-5632085
FYE: 12/31/2017

11/14/2018 3:48 PM

Federal Statements

Statement 1 - Form 990-T - Primary Unrelated Business Activity

Description

CAPITAL GAIN & ORDINARY INCOME FROM PASSTHRUS DUE TO DEBT
FINANCING

Statement 2 - Form 990-T, Part I, Line 5 - Income (Loss) from Partnerships or S-Corps

Name of Partnership or S-Corp	Gross Income	Direct Deductions (Part. only)	Net Income
K1 LEGACY VENTURE VI:UBTI	\$ -42	\$	\$ -42
K1 DIH FALCON SQUARE:UBTI	-1,262		-1,262
K1 VISTAS AT SADDLE ROCK:UBTI	-24,479		-24,479
K1 PAULS REAL ESTATE OPP:UBTI	3,300		3,300
K1 GMB MESSANINE CAP III:UBTI	-6,984		-6,984
K1 OVERLAND ENERGY FUND:UBTI	59		59
K1 HUMPHREYS FUND I:UBTI	-554		-554
K1 SLOANS LCP:UBTI	-102,057		-102,057
K1 SOVEREIGN CAPITAL II:UBTI	-2,710		-2,710
Total	\$ -134,729	\$ 0	\$ -134,729

Statement 3 - Form 990-T, Part I, Line 12 - Other Income

Description	Amount
FALCON SQUARE-EXCESS DIST	\$ 88,892
VAT SADDLE ROCK-EXCESS DIST	59,753
Total	\$ 148,645