Form **990-PF**Department of the Treasury Internal Revenue Service

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.

Go to www.irs.gov/Form990PF for instructions and the latest information.

2017

For	calen	dar year 2017 or tax year	beginning			, and ending			
Na	me of	foundation					A Employer identificatio	n number	
".V	AN.	DEVOORT FAMI	LY FOUNI	ATI	ON		36-398952	5	
Nur	Number and street (or P O box number if mail is not delivered to street address) Room/suite					B Telephone number			
_2	87	<mark>7 S PARADISE</mark>	ROAD		·	302	702-735-3	350	
		own, state or province, cou			ostal code		C if exemption application is	pending, check here	
_ <u></u>	<u>AS</u>	VEGAS, NV	<u>89109-52</u>	39					
G (Check	all that apply:	Initial return		Initial return of a fo	rmer public charity	D 1. Foreign organization	ns, check here	
			Fınal return		Amended return		2. Foreign organizations m	neeting the 85% test.	
			Address change		Name change	a A	2. Foreign organizations m check here and attach o	computation	
H_(• •			kempt private foundation		E If private foundation st		
		ction 4947(a)(1) nonexem			Other taxable private founda		under section 507(b)(
		rket value of all assets at e	end of year J A		ng method: X Cash	Accrual	F If the foundation is in a		
	rom ⊦ •\$	art II, col. (c), line 16)	1 7 2 4 (Part	J UI	ther (specify) nn (d) must be on cash basis	<u> </u>	under section 507(b)(i)(B), check here	
	art l	T		1, 00101			(a) Adjusted not	(d) Disbursements	
	21 (1	(The total of amounts in colur necessarily equal the amount	mns (b), (c), and (d) ma	ay not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes (cash basis only)	
	1	Contributions, gifts, grant			252,839.	-	N/A	(000, 000, 000, 000, 000, 000, 000, 000	
	2		n is not required to attach §	ich B	232,033.	······································	21/11		
	3	Interest on savings and tempo			38.	38.		STATEMENT 1	
	4	Dividends and interest fro	m securities		43,985.	43,985.		STATEMENT 2	
	5a	Gross rents				*			
	b	Net rental income or (loss)							
4	6a	Net gain or (loss) from sale of a	assets not on line 10		22.				
Revenue	Ь	Gross sales price for all assets on line 8a		<u>2.</u>			^	<u> </u>	
eXe	7	Capital gain net income (from I	Part IV, line 2)			22.			
Œ	8	Net short-term capital gail	n		•	Mangani de seder et etro ar e	-	wa. · a.a.	
	9	Income modifications				•			
	10a	Gross sales less returns and allowances						` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	
	b	Less Cost of goods sold				· · · · · · · · · · · · · · · · · · ·	RECE		
	C	Gross profit or (loss)					1,000,000	200	
	11	Other income			206,004	44 045	S MAR O 6		
_	12	Total. Add lines 1 through	•		296,884.	44,045.	S MAK U 0	102	
	13	Compensation of officers, dire			0.	0.	OGDEN		
	14	Other employee salaries a	_			1			
S	10-	Pension plans, employee Legal fees	benefits			**	 		
Su	loa	-							
Expense	ַ וּ	Accounting fees Other professional fees	STMT	3	1,500.	0.		0.	
ē E		Interest	DIMI	J	1,300.				
ativ	1	Taxes	STMT	4	1,006.	0.		0.	
istr	19	Depreciation and depletion		•	2,0001		_		
i Ci	20	Occupancy					_		
and Administrative	1	Travel, conferences, and i	meetings		2,161.	0.		0.	
5	1	Printing and publications	-						
p B	1	Other expenses	STMT	5	50.	0.		0.	
Operating	24	Total operating and adm	inistrative						
per		expenses. Add lines 13 th	hrough 23		4,717.	0.		0.	
0	25	Contributions, gifts, grant	s paid		296,955.			296,955.	
	26	Total expenses and disb	ursements.						
_	↓	Add lines 24 and 25			301,672.	0.		296,955.	
	27	Subtract line 26 from line	12:						
	1	Excess of revenue over expens		ts	<4,788.				
	1	Net investment income (44,045.	37 / 3		
	C	Adjusted net income (if ne	egative, enter -0-)				N/A	Form 000-DE (0017)	

Fo	rm 99	O-PF (2017) VANDEVOORT FAMILY FOUNDA	TION	36-3	3989526	Page 2
	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year	
	ai r	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Va	alue
	1	Cash - non-interest-bearing	9,948.	9,360.	9,:	360.
	2	Savings and temporary cash investments	132,453.	9,360. 184,369.	184,	369.
	3	Accounts receivable ► 4,370.	•	•		
		Less: allowance for doubtful accounts		4,370.	4,:	370.
	4	Pledges receivable ▶		-,		
	1	Less: allowance for doubtful accounts				
	5	Grants receivable		:		
	1	Receivables due from officers, directors, trustees, and other			·	
	•	disqualified persons				
	7					
	′	Other notes and loans receivable Less: allowance for doubtful accounts				
	١.					
Assets		Inventories for sale or use	· 			
Ass		Prepaid expenses and deferred charges				
•	1	Investments - U.S. and state government obligations	1 065 006	1 004 040	4 554	
	1	Investments - corporate stock STMT 6	1,065,326.	1,004,840.	1,771,0	<u>625.</u>
	C	Investments - corporate bonds				
	11	Investments - land, buildings, and equipment basis				
		Less accumulated depreciation				
	12	Investments - mortgage loans				
	13	Investments - other				
	14	Land, buildings, and equipment: basis				
		Less accumulated depreciation				
	15	Other assets (describe ►)				
		Total assets (to be completed by all filers - see the			•	
		instructions. Also, see page 1, item I)	1,207,727.	1,202,939.	1,969,	724.
_	17	Accounts payable and accrued expenses			_,_,,	<u> </u>
	18	Grants payable				
S	19	Deferred revenue				~ > / ~ ~ .
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
ğ	21	Mortgages and other notes payable				~
::	1	Other liabilities (describe				
	**	other nationals (describe				
	22	Total liabilities (add lines 17 through 22)	0.	0.		
-	23		U•			
		Foundations that follow SFAS 117, check here				
Ş		and complete lines 24 through 26, and lines 30 and 31.				
Š	24	Unrestricted				
Net Assets or Fund Balances	25	Temporarily restricted				
g p	26	Permanently restricted				
٦		Foundations that do not follow SFAS 117, check here				`
卢		and complete lines 27 through 31.		_		
ţ	27	Capital stock, trust principal, or current funds	0.	0.		
SSe	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.		
ţ	29	Retained earnings, accumulated income, endowment, or other funds	1,207,727.	1,202,939.		
Ž	30	Total net assets or fund balances	1,207,727.	1,202,939.		
					•	
_	31	Total liabilities and net assets/fund balances	1,207,727.	1,202,939.		
P	art	Analysis of Changes in Net Assets or Fund Ba	lances			
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 30			-	
		at agree with end-of-year figure reported on prior year's return)		1	1,207,	727.
	•	amount from Part I, line 27a		2		788. >
		r increases not included in line 2 (itemize)		3		0.
		lines 1, 2, and 3		4	1,202,9	
		eases not included in line 2 (itemize)		. 5		0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	ımn (h), line 30	6	1,202,9	
<u>-</u>	. 5.01	The second of th	10/1 1110 00		Form 000-DE	

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)					1 P-					(d) Date sold (mo., day, yr.)
1a SPECTRE ENERGY								02/1	3/12	02/28/17
b DOW DUPONT						I			3/12	09/01/17
C				<u> </u>					-	
d										
e										
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale			_	(h) G ((e) plus	aın or (loss s (f) mınus	s) (g))
a 8	•				5.					3 .
<u>b</u> 44	•			2	25.					19.
_ C	_									
_d	_									
e			<u> </u>							
Complete only for assets sho	wing gain in	column (h) and owned by							ol. (h) gain	
(i) FMV as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any			COI.	(k), but r Losses	not less tha (from col. (n -U-) or (h))
a										3.
b										19.
C										
d										
e										
2 Capital gain net income or (net	capital loss	If gain, also ente			}	2				22.
3 Net short-term capital gain or (,	. ,	nd (6):							
If gain, also enter in Part I, line		c).						4-		
If (loss), enter -0- in Part I, line Part V Qualification	B Hadar S	Section 4940(e) for	r Dodugos	l Tay on Not	1000	3	ant Inc.		N/A	<u> </u>
Was the foundation liable for the s If "Yes," the foundation doesn't qu 1 Enter the appropriate amount	alify under s	ection 4940(e). Do not co	mplete this par	t						Yes X No
(a)	T Caon Cola		mon deliens be	Tore making any e				1		(d)
Base periód years Calendar year (or tax year begin	ınıng ın)	(b) Adjusted qualifying dis		Net value of no				(d) Distribution ratio (col. (b) divided by col. (c))		
2016			1,015.				L,548			
2015			4,639.				L,725			.103665
2014		16	2,822.				5,832			.117406
2013			7,841.	•	1,		5,438			.139013
2012		15	8,093.			867	7,111	· 		.182322
2 Total of line 1, column (d)								2		.639115
3 Average distribution ratio for the foundation has been in exist	-		on line 2 by 5.	0, or by the number	er of ye	ears		3		.127823
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5						4		1,788,160.		
5 Multiply line 4 by line 3					5		228,568.			
6 Enter 1% of net investment inc	ome (1% of	Part I, line 27b)						6		440.
7 Add lines 5 and 6								7		229,008.
8 Enter qualifying distributions from Part XII, line 4					8		296,955.			
If line 8 is equal to or greater the See the Part VI instructions.	an line 7, ct	neck the box in Part VI, line	tb, and comp	olete that part using	g a 1%	tax ra	te.			

Form 990-PF (2017) VANDEVOORT FAMILY FOUNDATI Part VI Excise Tax Based on Investment Income (Section		
1a Exempt operating foundations described in section 4940(d)(2), check here		
Date of ruling or determination letter: (attach copy of lett	1 1	
b Domestic foundations that meet the section 4940(e) requirements in Part V, check in		440.
of Part I, line 27b		
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations,	enter 4% of Part I, line 12, col. (b).	
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations		. 0.
3 Add lines 1 and 2	3	440.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations	s only; others, enter -0-)	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter	-0-	440.
6 Credits/Payments:		
a 2017 estimated tax payments and 2016 overpayment credited to 2017	6a 800.	
b Exempt foreign organizations - tax withheld at source	6b 0.	
c Tax paid with application for extension of time to file (Form 8868)	6c 0.	
d Backup withholding erroneously withheld	6d 0.	
7 Total credits and payments. Add lines 6a through 6d	7	800.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 222	20 is attached 8	0.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount over		360.
11 Enter the amount of line 10 to be: Credited to 2018 estimated tax	360 . Refunded ▶ 11	0.
Part VII-A Statements Regarding Activities		
1a During the tax year, did the foundation attempt to influence any national, state, or lo	ical legislation or did it participate or intervene in	Yes No
any political campaign?	· · · · · · · · · · · · · · · · · · ·	1a X
b Did it spend more than \$100 during the year (either directly or indirectly) for political	al purposes? See the instructions for the definition	1b X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	•	
distributed by the foundation in connection with the activities.		
c 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 du	iring the year:	
(1) On the foundation. ► \$ 0 • (2) On foundation m		
e Enter the reimbursement (if any) paid by the foundation during the year for political	- · · · · · · · · · · · · · · · · · · ·	5 June 1 - 400000 - 150000 -
managers. ▶ \$ 0.	oxponditure tax imposed on roundation	
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.	to the mo	2 22
3 Has the foundation made any changes, not previously reported to the IRS, in its gov	/erning instrument articles of incorporation or	
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change		3 X
4a Did the foundation have unrelated business gross income of \$1,000 or more during		3 X 4a X
b If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b 22
5 Was there a liquidation, termination, dissolution, or substantial contraction during the		5 X
If "Yes," attach the statement required by General Instruction T.	ic your:	3 21
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) sat	tisfied either	
By language in the governing instrument, or	isted cities.	
 By state legislation that effectively amends the governing instrument so that no m. 	andatory directions that conflict with the state law	
remain in the governing instrument?	andatory directions that conflict with the state law	6 X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes	s "complete Part II col (c) and Part V/	7 X
7 Did the foundation have at least \$0,000 in assets at any time during the year. If Tes	s, complete raitin, coi. (c), and rait Av	' <u>^</u> _ _ _
Re Enter the states to which the foundation reports or with which it is required. See :-	netruntions. •	
8a Enter the states to which the foundation reports or with which it is registered. See in NV	Sulucions.	-
	to the Atterney Conerel (or december)	- \
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	f 40 40 (V/O)	8b X
9 Is the foundation claiming status as a private operating foundation within the meaning		
year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Ye	•	9 X
10 Did any persons become substantial contributors during the tax year? if "Yes," attach		10 X
	!	Form 990-PF (2017)

4a

X

N/A

b If "Yes," did it have excess business holdings in 2017 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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2017.)

had not been removed from jeopardy before the first day of the tax year beginning in 2017?

Total number of other employees paid over \$50,000

Form 990-PF (2017) VANDEVOORT FAMILY FOUNDATION	36-	<u> 3989526</u>	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)		-	_
3 Five highest-paid independent contractors for professional services. If none, enter "NO	ONE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Com	pensation
NONE			
`			
Total number of others receiving over \$50,000 for professional services		>	0
Part IX-A Summary of Direct Charitable Activities			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical in number of organizations and other beneficiaries served, conferences convened, research papers produced	nformation such as the l, etc.	Expenses	S
1 GRANTMAKING TO OTHER CHARITABLE ORGANIZATIONS			•
2			<u> </u>
3			
4			
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2.	Amount	
1 <u>N/A</u>			
2			
All other program-related investments. See instructions. 3			
Total. Add lines 1 through 3	>	5 000	0.
		Form 990-l	-⊢ (2017)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
·a		1a	1,647,326.
b	Average of monthly cash balances	1b	168,065.
C		1c	
d	Total (add lines 1a, b, and c)	1d	1,815,391.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,815,391.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	27,231.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,788,160.
6	Minimum investment return. Enter 5% of line 5	6	89,408.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations ar foreign organizations, check here and do not complete this part.)	nd certair	1
_	Minimum investment return from Part X, line 6	1	89,408.
1 2a	Tax on investment income for 2017 from Part VI, line 5	 ' 	07,400.
Za b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	440.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	88,968.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	88,968.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	88,968.
P	art 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	<u> 296,955.</u>
b	Program-related investments - total from Part IX-B	1b	- 0.
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:		
a	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	<u> 296,955.</u>
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	5	440.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	296,515.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies	for the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI,				_
line 7				88,968.
2 Undistributed income, if any, as of the end of 2017			_	
a Enter amount for 2016 only			0.	
b Total for prior years:		•	•	
3 Excess distributions carryover, if any, to 2017:		0.		
a From 2012 115, 463	li di			
b From 2013 101,616				
c From 2014 94, 280				
d From 2015 80,739				
e From 2016 73,711	<u>-</u>			
f Total of lines 3a through e	465,809.			
4 Qualifying distributions for 2017 from	403,003.			
Part XII, line 4: ► \$ 296, 955				
a Applied to 2016, but not more than line 2a	1		0.	
b Applied to undistributed income of prior			•	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus		0.		
(Election required - see instructions)	0.			
d Applied to 2017 distributable amount				88,968.
e Remaining amount distributed out of corpus	207,987.			00,200
5 Excess distributions carryover applied to 2017	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))		-	-	-
6 Enter the net total of each column as indicated below:		י שלי בי או	none a recent or account of the second	s rows was severe record
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	673,796.			
b Prior years' undistributed income. Subtract			ŕ	
line 4b from line 2b		0.	•	
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		0.		
d Subtract line 6c from line 6b. Taxable		•		
amount - see instructions		0.		
e Undistributed income for 2016. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2017. Subtract			,	
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				0.
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)	0.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	115,463.			
9 Excess distributions carryover to 2018.				
Subtract lines 7 and 8 from line 6a	558,333.			
Analysis of line 9:				
a Excess from 2013 101,616.		,	·	
b Excess from 2014 94,280.				
c Excess from 2015 80,739.		,		
d Excess from 2016 73,711.				
e Excess from 2017 207, 987.	<u> </u>			

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		EVOORT FAMI			36-3	989526 Page 10
Pa	art XIV Private Operatin	g Foundations (s	ee instructions and F	art VII-A, question 9)	N/A	
1 a	If the foundation has received a rul	ling or determination lette	er that it is a private ope	rating		
	foundation, and the ruling is effect	ive for 2017, enter the da	ite of the ruling	•		
b	Check box to indicate whether the	foundation is a private of	perating foundation des	cribed in section	4942(j)(3) or	4942(j)(5)
	Enter the lesser of the adjusted net			Prior 3 year		
-	income from Part I or the minimum	(-) 0047	(b) 2016	(c) 2015	(d) 2014	/ (e) Total
	investment return from Part X for					
	each year listed					N.
h	85% of line 2a	*				
-	Qualifying distributions from Part)	YII		 		
·	line 4 for each year listed	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			,	
	Amounts included in line 2c not		-			
u	used directly for active conduct of					
	*				•	
_	exempt activities • Qualifying distributions made direc	hth.				
е		-				
	for active conduct of exempt activi	ues.			<i>'</i>	
3	Subtract line 2d from line 2c Complete 3a, b, or c for the					
٠	alternative test relied upon:					
a	A "Assets" alternative test - enter:			, ,		
	(1) Value of all assets					-,
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					_
b	"Endowment" alternative test - ente			,		
	2/3 of minimum investment return shown in Part X, line 6 for each yellisted					
C	"Support" alternative test - enter:					
	(1) Total support other than gross	s				
	investment income (interest,					
	dividends, rents, payments or	1				
	securities loans (section 512(a)(5)), or royalties)		<i>A</i>		-	
	(2) Support from general public		·"			
	and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(III)					
	(3) Largest amount of support fro	om /				
	an exempt organization	··· /				
	(4) Gross investment income					
Pa	art XV Supplementary	Information (Cor	nolete this part	only if the found	lation had \$5,000 or	more in assets
		ng the year-see		,	,	
1	Information Regarding Found	dation Managers:			<u> </u>	
-	List any managers of the foundation	-	more than 2% of the to	tal contributions received	d by the foundation before the	close of any tax
•	year (but only if they have contribu				a by the real action before the	and any care
ਵਸ਼	E STATEMENT 7					
	List any managers of the foundation	nn who own 10% or mor	e of the stock of a corno	ration (or an equally larg	ne portion of the ownership of	a partnership or
	other entity) of which the foundation	on has a 10% or greater	interest.	ration (or an oqually larg	go portion of the officeronp or	2 par 11101 0111p 01
NΩ	ONE	-				
2	Information Regarding Contr	ribution Grant Gift I	oan Scholarshin e	to Programs:		
2	Check here X if the founda				d does not accept unsolicited re	equests for funds. If
	the foundation makes gifts, grants					
a	a The name, address, and telephone	number or email addres	s of the person to whor	n applications should be	addressed:	
_	<u> </u>					
						,
	b The form in which applications sho	ould be submitted and in	formation and materials	they should include:		
	The form in times applications on			and y directed mondada		
	c Any submission deadlines:				<u>-</u>	
Ü	e my oublinotion doddillies.					
	d Any restrictions or limitations on a	wards such as hy geogr	aphical areas, charitable	fields kinds of institution	ons, or other factors:	
u	e zary roomonono or militationo dil a	a. ao, odon ao by googi	apinoar arous, one indicate		, 0. 0	
						F 000 - PE (0017)

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelated	l business income	Excluded t	oy section 512, 513, or 514	(0)
	(a) Business	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code		code	Amount	Tanouon moonie
a	_				
b	_				
C	_				
d	_				
e	_		+ +		
f <u>-</u>	_				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash			1 1 1	20	
investments			14	43,985.	
4 Dividends and interest from securities		-1-	14	43,985.	
5 Net rental income or (loss) from real estate:			 		
a Debt-financed property		 -			
b Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			01_	22.	
9 Net income or (loss) from special events		~~			
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b	1 I				
c	1 1				
d	1 1				
e					
12 Subtotal. Add columns (b), (d), and (e)		0		44,045.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	44,045.
(See worksheet in line 13 instructions to verify calculations.))				
Part XVI-B Relationship of Activities	to the Acco	mplishment of l	Exempt P	urposes	
Line No. Explain below how each activity for which in			-A contribute	d importantly to the accomp	olishment of
the foundation's exempt purposes (other that	an by providing fun	ds for such purposes).			
					<u></u>

	····				
					
					. <u>.</u> .

Form 990	-PF (2017) VANDE	VOORT FAI	MILY FO	UNDATION			36-	<u> 3989526</u>	Pa	age 13
Part X	Information Re Exempt Organ		nsfers to a	nd Transactions	anc	d Relationshi	ps With Non	ncharitable	•	
1 Did	the organization directly or indi	rectly engage in any	y of the followin	g with any other organia	zation	described in section	n 501(c)		Yes	No
(other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										
	sfers from the reporting found	ation to a noncharit	able exempt or	ganization of:						
٠,	Cash							1a(1)	1	X
	Other assets							1a(2)	 	X
-	er transactions:	ble everent ergeniz	otion					45/4)		x
	Sales of assets to a noncharita Purchases of assets from a no	, ,						1b(1) 1b(2)	-	X
	Rental of facilities, equipment,	•	organization					1b(3)	-	X
	Reimbursement arrangements							1b(4)	1	X
	Loans or loan guarantees							1b(5)	$\overline{}$	Х
	Performance of services or me	embership or fundra	aising solicitatio	ns				1b(6)		X
c Sha	ring of facilities, equipment, ma	uling lists, other ass	ets, or paid em	ployees				10		X
d if th	e answer to any of the above is	"Yes," complete the	following sche	dule. Column (b) should	d alway	ys show the fair ma	rket value of the g	goods, other as	sets,	
	ervices given by the reporting f			ed less than fair market	value ı	ın any transactıon o	or sharing arrange	ment, show in		
	mn (d) the value of the goods,	,				r 				
(a) Line no	(b) Amount involved	(c) Name o		exempt organization		(d) Description o	f transfers, transaction	ons, and sharing a	rrangeme	ints
		·	N/A							
								-		
							3.5			
			,	•						
	<u> </u>					ļ				
	-									
ın se	te foundation directly or indirection 501(c) (other than section	on 501(c)(3)) or in s	•	or more tax-exempt orç	janızat	tions described		Yes	LX.] No
<u>U II Y</u>	es," complete the following sch (a) Name of org			(b) Type of organization	on I	(c) Description of re	elationship		
	N/A	,		(-) .,,			<u>, </u>			
	,									
Sign Here	Under penalties of perjury, I declare and belief, it is me, correct, and correct.	mplete Declaration of p		n taxpayer) is based on all in	formation	PRESIDI	as any knowledge	May the IRS return with the shown below	ne prepar v? See in	rer
	Signature of officer or trustee Print/Type preparer's na		Preparer's si	Date	Ιn	Title	Check If	PTIN		
	Fillioziyye preparer sina	31116	riepaiei s si	ynature -	۱.	7	self- employed	1 1114		
Paid	TACETE CHT	ਆਪ	Last	MANTE	9	426/18 S	Jon Simpleyou	P00695	700	ı
Prepa	rer JACKIE SMI Firm's name ► SMI		NOIS, L	LC Thurs		<u> </u>	Fırm's EIN ▶ 8			
Use C		III & FRAI	Вего, п	10		j	THIN SEIN P O	5 04040	, , ,	
	Firm's address ▶ 67	OO VIA AI	USTI PK	WY STE C						
	I	S VEGAS,					Phone no. (7	02) 798	<u>-19</u>	19

723622 01-03-18

Phone no. (702) 798-1919
Form **990-PF** (2017)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2017

Name of the organization

Employer identification number

	VANDEVOORT FAMILY FOUNDATION	36-3989526					
Organization type (check	cone):						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not 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						
Note: Only a section 501(General Rule	n is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special spec						
_	ny one contributor. Complete Parts I and II. See instructions for determining a contribu-						
Special Rules							
sections 509(a)(any one contribu	ion described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% supp 1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 1 ator, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the an EZ, line 1. Complete Parts I and II.	6a, or 16b, and that received from					
year, total contri	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.						
year, contributio is checked, ente purpose. Don't c	ion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from sexclusively for religious, charitable, etc., purposes, but no such contributions totaled in here the total contributions that were received during the year for an exclusively religion complete any of the parts unless the General Rule applies to this organization because the, etc., contributions totaling \$5,000 or more during the year	d more than \$1,000. If this box ous, charitable, etc ,					
but it must answer "No" o	that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule Ion Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on it it the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).						

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

Name of organization

Employer identification number

VANDEVOORT FAMILY FOUNDATION

36-3989526

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOEL & MARTHA VANDEVOORT 2877 S PARADISE ROAD, #302 LAS VEGAS, NV 89109	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	JOEL & MARTHA VANDEVOORT 2877 S PARADISE ROAD, #302 LAS VEGAS, NV 89109	\$64,884.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	JAMES VANDEVOORT 2777 PARADISE RD., #305 LAS VEGAS, NV 89109	\$ <u>49,900.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	JILL M SHELDON 1225 E WARNER RD #1 TEMPE, AZ 85284	\$ 38,700.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	JOEL & MARTHA VANDEVOORT 2877 S PARADISE ROAD, #302 LAS VEGAS, NV 89109	\$ 24,955.	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	JULIE C O'BARR 1863 E HOPI AVE MESA, AZ 85204	\$\$\$\$\$	Person X Payroll

Name of organization

Employer identification number

36_3090536

ırt II	Noncash Property (see instructions). Use duplicate copies of F	art II if additional space is needed		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
2	PUBLICLY TRADED SECURITIES		-	
		\$\$	01/02/17	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
5	PUBLICLY TRADED SECURITIES		-	
		\$\$	12/12/17	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
<u>.</u>				
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received	

Name of orga	nization	Employer identification number					
VANDEV Part III	CORT FAMILY FOUNDATION Exclusively religious, charitable, etc., cont the year from any one contributor. Complete completing Part III, enter the total of exclusively religiou	ributions to organizations described	36-3989526 In section 501(c)(7), (8), or (10) that total more than \$1,000 for wing line entry. For organizations \$\infty\$ \$\$				
	Use duplicate copies of Part III if addition	al space is needed.	riess for the year (tille unsilino olice)				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
		(e) Transfer of gif					
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
-							
	Transferee's name, address, ar	Relationship of transferor to transferee					
-							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held				
<u>-</u>							
	Transferee's name, address, an	(e) Transfer of gift	Relationship of transferor to transferee				
-							

FORM 990-PF INTERE	ST ON SAVI	INGS AN	VD TEM	POR	ARY	CASH	IN	VESTMENTS	Sī	TATEMENT	1
SOURCE WELLS FARGO BANK TOTAL TO PART I, LINE 3					NET	(B) T INVESTMENT INCOME		(C) ADJUSTED NET INCOME			
						38.		-			
					-						
FORM 990-PF	DIVIDENI	S AND	INTER	EST	FROI	M SEC	UR	ITIES	SI	TATEMENT	2
SOURCE	GROSS AMOUNT	G	APITAL BAINS VIDEND		RE	(A) VENUE BOOK		(B) NET INVES MENT INCO		(C) ADJUSTI NET INCO	
WELLS FARGO INVESTMENT SERVICES	43,985	5.		0. 43,985		5.	43,985.				
TO PART I, LINE 4	43,985	·		0.	43,985.		5.	43,985.			
FORM 990-PF	C	THER P	ROFES	SION	IAL I	FEES	18		SI	ATEMENT	3
DESCRIPTION		(A EXPEN PER B	ISES) VEST- NCOME		(C) ADJUSTED NET INCOM		(D) CHARITAI PURPOSI	
LEGAL AND ACCOUNTING			,500.	-		0	•				0.
TO FORM 990-PF, PG	1, LN 16C =	1	,500.		-	0	 - = =				0.
FORM 990-PF			TAX	ES					SI	'ATEMENT	4
DESCRIPTION		(A EXPEN PER B	SES) /EST- NCOME		(C) ADJUSTED NET INCOM		(D) CHARITAE PURPOSE	
FOREIGN TAXES EXCISE TAX ON INVEST	- PMENT		153.			0					0.
INCOME			853.			0					0.
TO FORM 990-PF, PG	T, LN 18	1	,006.			0	• = =				0.

FORM 990-PF	OTHER E	XPENSES		STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM				
STATE FILING FEE	50.		0.	0.		
TO FORM 990-PF, PG 1, LN 23	50.		0.	0.		
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 6		
DESCRIPTION		BOOK VALUE	VALUE			
WELLS FARGO INVESTMENT SERVIO	1,004,840.	1,771,625.				
TOTAL TO FORM 990-PF, PART I		1,004,840.	1,771,625.			
FORM 990-PF	PART XV - L	INE 1A		STATEMENT 7		

NAME OF MANAGER

JOEL VANDEVOORT
MARTHA VANDEVOORT