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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

▶ 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.

Name of foundation Name of foundation Name of foundation Name of feeding and sheet (or PO box number if mail is not delivered to street address) Roombute 1350 E. FLAMINGO RD Or Town, stalls or province, country, and ZIP or foreign postal code C if exemption applications ToQ_262_6173 ToQ_262_6173 C if exemption applications is province, country, and ZIP or foreign postal code C if exemption application is province, country, and ZIP or foreign postal code C if exemption applications is province, country, and ZIP or foreign postal code C if exemption applications is province, country, and ZIP or foreign postal code C if exemption applications is province, country, and ZIP or foreign postal code C if exemption applications is provinced in the control of the contr	Fo	r calen	idar year 2017 or tax year beginning		17, and			, 20
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Number and street (or P O box number (final so not delivered to street address) Number N	TH	F DAVI	D AND JENIEFER HARDIE MEMORIAL FOUNDATION				46-2051093	
City of town, state or province, country, and ZP or foreign postal code AS VEGAS, MV 89119 G Check all that apply: Initial return Amended return Amende				Roc	m/surte	B Telephor		ons)
City of town, state or province, country, and ZP or foreign postal code AS VEGAS, MV 89119 G Check all that apply: Initial return Amended return Amende	13	50 E. FL	AMINGO RD	Ì	347		702-262-6773	
G Check all that apply:						C If exempt	tion application is pend	ng, check here ▶
Final return	LA	S VEGA	AS, NV 89119					_
Address change Name change Address change Addres	G	Check			ic charity	D 1. Foreig	n organizations, check l	nere ▶ 🔲
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Section 4947(a)(1) nonexempt charitable trust				<u> </u>		check	here and attach compu	tation · ▶ 🔲
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C Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10	•	10a	Gross sales less returns and allowances	LIT				
11		b	Less: Cost of goods sold					
12 Total. Add lines 1 through 11 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635 10,635		C			<u> </u>			
13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule)		i i						
14 Other employee salaries and wages	_			10,63				
C Other professional fees (attach schedule)	S	13		<u> </u>	<u> </u>	0	0	
C Other professional fees (attach schedule)	Š	14	. ,		- -			
C Other professional fees (attach schedule)	e O	162			14	102		
C Other professional fees (attach schedule)	й	h						61
26 Total expenses and disbursements. Add lines 24 and 25 16,391 9,148 27 Subtract line 26 from line 12:	ě	l c						180 2,651
26 Total expenses and disbursements. Add lines 24 and 25 16,391 9,148 27 Subtract line 26 from line 12:	ati	17		10,00	1	1733		2,031
26 Total expenses and disbursements. Add lines 24 and 25 16,391 9,148 27 Subtract line 26 from line 12:	str	18			1			
26 Total expenses and disbursements. Add lines 24 and 25 16,391 9,148 27 Subtract line 26 from line 12:	Ę	19	· · · · · · · · · · · · · · · · · · ·					
26 Total expenses and disbursements. Add lines 24 and 25 16,391 9,148 27 Subtract line 26 from line 12:	p	20						
26 Total expenses and disbursements. Add lines 24 and 25 16,391 9,148 27 Subtract line 26 from line 12:	∀	21						
26 Total expenses and disbursements. Add lines 24 and 25 16,391 9,148 27 Subtract line 26 from line 12:	an c	22	· · · · · · · · · · · · · · · · · · ·					
26 Total expenses and disbursements. Add lines 24 and 25 16,391 9,148 27 Subtract line 26 from line 12:	<u> </u>	23		62	29	472		157
26 Total expenses and disbursements. Add lines 24 and 25 16,391 9,148 27 Subtract line 26 from line 12:	atir	24						
26 Total expenses and disbursements. Add lines 24 and 25 16,391 9,148 27 Subtract line 26 from line 12:	Ģ]				9,148		3,049
26 Total expenses and disbursements. Add lines 24 and 25 16,391 9,148 27 Subtract line 26 from line 12:	Ö	25						4,194
	_	26		16,39)1	9,148		7,243
a Excess of revenue over expenses and dispursements 1 (5.754)		I -						
		a		(5,75	6)			
		1	· · · · · · · · · · · · · · · · · · ·	ļ	- 	1,487	10 / 25	
				Cct	No. 11000			m 990-PF (2017)

Oai	rt II	Ralance Sheets Attached schedules and amounts in the description colu	mn Beginning of year	End o	f year
ı aı	سع	Balance Sheets Attached schedules and amounts in the description columns in the description columns in the description columns. Sheets should be for end-of-year amounts only. (See instruction	s) (a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	420,124	282,802	282,802
	2	Savings and temporary cash investments		130,824	130,824
- [3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶			
Total instruct 17 Account less: account less: account less: account less: all less: account less: all less: account less account less: accoun	Pledges receivable ▶	1			
- {		Less: allowance for doubtful accounts ▶			
- 1	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other	er		<u> </u>
		disqualified persons (attach schedule) (see instructions)			
- }	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts ▶			
S	8	Inventories for sale or use			
Set	9	Prepaid expenses and deferred charges		550	550
ΑŠ		Investments—U.S. and state government obligations (attach schedule			
-		Investments—corporate stock (attach schedule)	·		
- }		Investments—corporate bonds (attach schedule)		201,972	201,972
		Investments—land, buildings, and equipment: basis ▶		201,772	201,712
	•	Less. accumulated depreciation (attach schedule) ▶			
]	12	Investments—mortgage loans			
		Investments—other (attach schedule)			
ĺ					
- {	1~	Land, buildings, and equipment: basis ► Less: accumulated depreciation (attach schedule) ►			
	15	Other assets (describe ACCRUED INTEREST RECEIVABLE		7.45	
)		Total assets (to be completed by all filers—see the		145	145
- 1	10	instructions. Also, see page 1, item l)	(00.00)	(4 (000	(4/000
-+	17	Accounts payable and accrued expenses		616,293	616,293
- {		Grants payable		169	
es		Deferred revenue			
≅∣		Loans from officers, directors, trustees, and other disqualified persons			
ا چَ		•			
" [Mortgages and other notes payable (attach schedule)			
- 1		Other liabilities (describe ► Total liabilities (add lines 17 through 22)	' 		}
-+	23			169	
တ္တ		Foundations that follow SFAS 117, check here ▶ □ and complete lines 24 through 26, and lines 30 and 31.	۱ ا ا		
ည	0.4	Unrestricted			
<u>ā</u>			621,927	616,124	{
Ba		Temporarily restricted			
ן פַ	26	Permanently restricted	_		
֓֞֞֞֞֞֞֞֞֞֞֞֞֞֡֞		Foundations that do not follow SFAS 117, check here ► and complete lines 27 through 31.	١ ١		\
٦	^=				
S		Capital stock, trust principal, or current funds			
ĕ		Paid-in or capital surplus, or land, bldg., and equipment fund			
ŝ		Retained earnings, accumulated income, endowment, or other funds			
7	30	Total net assets or fund balances (see instructions)		616,124	
ž∖	31	Total liabilities and net assets/fund balances (se instructions)	1	į	
	4111		622,096	616,293	
	t III	Analysis of Changes in Net Assets or Fund Balance		agree with	
1		I net assets or fund balances at beginning of year—Part II, co-of-year figure reported on prior year's return)		- 1 1	
_				├ ─- ⁻ ∤	621,927
_		r amount from Part I, line 27a			(5,756)
3	Othe	er increases not included in line 2 (itemize)		3	0
4		lines 1, 2, and 3			61 6,171
5		reases not included in line 2 (itemize) NIV. INCOME TAX AND		5	47
6_	lota	I net assets or fund balances at end of year (line 4 minus line 5)	-Part II, column (b), lin	e 30 6	61 6,124 Form 990-PF (2017)

Part	IV Capital Gains and	Losses for Tax on Investme	nt Income			
		d(s) of property sold (for example, real esta se, or common stock, 200 shs. MLC Co)	te,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr)	(d) Date sold (mo., day, yr.)
1a						
<u>b</u>						
c						
<u>d</u>		· · · · · · · · · · · · · · · · · · ·		ļ		
e						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale	, ,	iain or (loss) s (f) minus (g))
<u>a</u>				··· · · · · · · · · · · · · · · · ·		
b						
<u>c</u>						
<u>d</u>						
<u> </u>	Complete only for coasts show	wing goin in column (h) and award by	the foundation	05 10/01/60		
	Complete only for assets snow	wing gain in column (h) and owned by				Col. (h) gain minus not less than -0-) or
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	• •	ss of col (i) (j), if any		(from col (h))
a						
<u>b</u>						
<u>c</u>						_
d						
<u>e</u>		() (, , , , , , , , , , , , , , , , ,				
2	Capital gain net income or		so enter in Pa nter -0- in Pa		2	
3		or (loss) as defined in sections 1:				
		l, line 8, column (c). See ınstructi		, enter -0- in)		
		<u> </u>		5	3	
Part	V Qualification Unde	er Section 4940(e) for Reduce	ed Tax on N	let Investment	Income	
(For o	ptional use by domestic priv	vate foundations subject to the se	ction 4940(a)	tax on net invest	ment income.)	
If coci	tion 4940(d)(2) applies, leave	this part blank				
11 500	iioii 4540(u)(2) applies, leave	tilis part bialik.				
		section 4942 tax on the distributal ualify under section 4940(e). Do n			pase period?	☐ Yes 🗹 No
1	Enter the appropriate amo	unt in each column for each year;	see the instri	uctions before m	aking any entries	
	(a)	(b)		(c)		(d)
Cale	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions	Net value o	f nonchantable-use a		stribution ratio b) divided by col. (c))
	2016	4,5	80	61	3,827	0 007460
	2015		42	62	8,576	0.012156
	2014		78		5,064	0 012399
	2013				1,683	
	2012					
2	Total of line 1, column (d)				. 2	0.032015
3		for the 5-year base period—divid			r by	
	the number of years the fo	undation has been in existence if	less than 5 ye	ears	. 3_	0.010672
4	Enter the net value of none	charitable-use assets for 2017 from	n Part X, line	5	. 4	610,106
5	Multiply line 4 by line 3 .				. 5	6,511
6	Enter 1% of net investmen	it income (1% of Part I, line 27b)			. 6	15
7	Add lines 5 and 6				. 7	6,526
8	Enter qualifying distribution	ns from Part XII, line 4			. 8	7,243
	If line 8 is equal to or grea	ter than line 7, check the box in F			that part using a	
	Part VI instructions.				_	

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—sec	; msu	ucuo	nsj
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.			l
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		15	
_	here and enter 1% of Part I, line 27b			}
·	Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0	<u> </u>
3	Add lines 1 and 2		15	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		15	
6	Credits/Payments:			ļ
a	2017 estimated tax payments and 2016 overpayment credited to 2017 6a			l
b	Exempt foreign organizations—tax withheld at source			
c d	Tax paid with application for extension of time to file (Form 8868) . 6c Backup withholding erroneously withheld 6d			
7	Total credits and payments. Add lines 6a through 6d			ļ
8	Enter any penalty for underpayment of estimated tax. Check here [] if Form 2220 is attached 8		0	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		<u>0</u> 15	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10			
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11			
Part	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did		Yes	No
	participate or intervene in any political campaign?	1a		~
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		~
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		 	\vdash
	published or distributed by the foundation in connection with the activities.	1		ĺ
C	Did the foundation file Form 1120-POL for this year?	10		1
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? If "Yes," attach a detailed description of the activities.	2		V
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		~
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	-	1
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		~
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	Ì		:
	By language in the governing instrument, or	1	1 1	
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that	: [·
	conflict with the state law remain in the governing instrument?	6	~	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	1	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶		}	
b	NEVADA If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	i		
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	1	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) o			
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes,"			
	complete Part XIV	9		V
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing the names and addresses	10		V

Part	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 meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions		1		V
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqual person had advisory privileges? If "Yes," attach statement. See instructions		2		,
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption applicat	ion? 1	3	~	
	Website address ► N/A				
14	The books are in care of ► GEORGE G. HARDIE SR. Telephone no. ►	702-2			
15	Located at ► 1350 E FLAMINGO RD. #347 LAS VEGAS, NV ZIP+4 ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here.		7119		
13	and enter the amount of tax-exempt interest received or accrued during the year		•	. '	▶ □
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authorized authorized and the control of the control o			Yes	No
	over a bank, securities, or other financial account in a foreign country?		6		~
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the nai the foreign country ▶	me of			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year, did the foundation (either directly or indirectly):		\Box		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	No			
		No	-]	
	· · · · · · · · · · · · · · · · · · ·	No	- {	-	
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes (5) Transfer any income or assets to a disqualified person (or make any of either available for	No	-		1
		No		- {	ĺ
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	1	}	- 1	
	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.)	∑ No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulat section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	I	b		
	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, were not corrected before the first day of the tax year beginning in 2017?		С		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a pri operating foundation defined in section 4942(j)(3) or 4942(j)(5)):	vate			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and		- [}	
] No	ļ		
L	If "Yes," list the years ► 20 , 20 14 , 20 15 , 20 16	()(0)	- {		
D	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942((relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(i	
	all years listed, answer "No" and attach statement—see instructions.)		<u>.</u>		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	<u> </u>	+		
	▶ 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?	☑ No			
b	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundatio	n or	1	1	
	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 laps		1		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if foundation had excess business holdings in 2017.)		_ -		
A a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purpos	<u> </u>	b		
4a b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize		a		
_	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 20	I	b		-

Part	: VII-B	Statements Regarding Activities	s for V	Vhich Form	4720	May Be R	equire	ed (contii	nued)			
5a	During	the year, did the foundation pay or incur	any am	nount to:							Yes	No
		ry on propaganda, or otherwise attempt t						☐ Yes	✓ No			
	(2) Influ	ence the outcome of any specific public	c electi	ion (see sect	on 495	5); or to ca	arry on,					1
	dıre	ctly or indirectly, any voter registration di	ıve?					🗌 Yes	✓ No	. [
	(3) Prov	vide a grant to an individual for travel, stu	dy, or	other similar	ourpos	es?		☐ Yes	☑ No	. (į
		vide a grant to an organization other that								-		
		tion 4945(d)(4)(A)? See instructions						🗌 Yes	✓ No			- !
		vide for any purpose other than religious				•				-		į
		poses, or for the prevention of cruelty to						☐Yes	✓ No	I		ļ
b		nswer is "Yes" to 5a(1)-(5), did any of the							ibed in			
	_	ions section 53.4945 or in a current notice	_	-					• • •	5b		
_		cations relying on a current notice regardi								1		1
С		nswer is "Yes" to question 5a(4), does to									1	1
		e it maintained expenditure responsibility		_				∐ Yes	∐ No	·		
60		" attach the statement required by Regul										
6a		foundation, during the year, receive any rsonal benefit contract?		directly or in	-	, to pay pre	mums		Clar.	1		
b	•	foundation, during the year, pay premiur					hanafi	Yes	_ ✓ No	ļ		
U		to 6b, file Form 8870.	ns, une	ectly of indire	ony, on	a personal	benen	Commaci	٠.	6b	\vdash	
7a		me during the tax year, was the foundation	a nartv	to a prohibited	l tav ch	alter transac	tion?	Yes	₩.			1
		" did the foundation receive any proceed						_	_	7b		
	VIII	Information About Officers, Direct									∟↓ ees.	
-		and Contractors	,				,				,	
1	List all	officers, directors, trustees, and found	lation	managers ar	d their	compens	ation. S	See instru	ctions),		
		(a) Name and address		e, and average		mpensation		Contributions		(e) Expe	nse acc	ount,
		(a) Name and address		irs per week ted to position	en (IT I	not paid, iter -0-)	and def	yee benefit erred compe	nsation		allowan	
GEOR	GE G. HA	RDIE SR.										
1350 E	.FLAMIN	GO RD. #347 LAS VEGAS, NV 89119	DIREC	TOR 5 HRS.		0			0			0
							l					
		RDIE JR.										
1350 E	.FLAMING	GO RD. #347 LAS VEGAS, NV 89119										
			ASS'T	DIRECTOR		0			0			0
	Compo	nsation of five highest-paid employed	5 HRS.		o in all	نا ممامه ان	1			n) 6 m		
	"NONE			er man mo		uded on 11	ne 1—:		ucuon:	s). 11 m	one, e	
((a) Name a	nd address of each employee paid more than \$50,00	10	(b) Title, and a		(c) Comper	sation	(d) Contribu	penefit			
				devoted to p	osition			compens		outer	allowane	
NONE				<u>o</u>			0		0			0
				<u> </u>								
				 		 -				<u></u> _		
										!		
				 		 						
			·							ı		
Total i	number o	of other employees paid over \$50,000 .	· ·		· · ·		•		. ▶		0	
						·				orm 99		(2017)

Page	1

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em and Contractors (continued)	ployees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	,,
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
none	
Total number of others receiving over \$50,000 for professional services	
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
N/A	
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see Instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	Amount
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	0
	Form 990-PF (2017)

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign founda	ations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
_	purposes:		004 070
a	Average monthly fair market value of securities	1a	201,972
b	Average of monthly cash balances	1b	416,875
C	Fair market value of all other assets (see instructions)	1c	550
d	Total (add lines 1a, b, and c)	1d	619,397
е	· · · · · · · · · · · · · · · · · · ·		
_	1c (attach detailed explanation)		_
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	619,397
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	1 . 1	
_	instructions)	4	9,291
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5_	610,106
6	Minimum investment return. Enter 5% of line 5	6	30,505
Part	and certain foreign organizations, check here ▶ ☐ and do not complete this part.)	oundation	:S
1	Minimum investment return from Part X, line 6	1	30,505
2a	Tax on investment income for 2017 from Part VI, line 5	;	
b	Income tax for 2017. (This does not include the tax from Part VI.) 2b	} }	
С	Add lines 2a and 2b	2c	15
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	30,490
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	30,490
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	30,490
Part			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	7,243
ь	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	0
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	0
b	Cash distribution test (attach the required schedule)	3b	0
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	7,243
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	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	7,243
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether	the foundation
		Form	990-PF (2017)

² art	VIII Undistributed Income (see instruction	ns)			
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
_	line 7				30,520
2	Undistributed income, if any, as of the end of 2017:		-		
а	Enter amount for 2016 only			30,643	
b	Total for prior years: 20,2014,2015	<u></u>	41,636		
3	Excess distributions carryover, if any, to 2017:				
а	From 2012				
b	From 2013				
C	From 2014				ĺ
d	From 2015				,
е	From 2016				
f	Total of lines 3a through e				
4	Qualifying distributions for 2017 from Part XII, line 4: ► \$				
•	Applied to 2016, but not more than line 2a .			7,243	
a b	Applied to 2016, but not more than line 2a . Applied to undistributed income of prior years		 	1,243	
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election		0		
C	required—see instructions)				
	· · · · · · · · · · · · · · · · · · ·				
d	Applied to 2017 distributable amount				0
_e	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2017				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:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b		41,636		
С	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		o		
d	Subtract line 6c from line 6b. Taxable				
	amount-see instructions		41,636		
е	Undistributed income for 2016. Subtract line		11,000		
Ŭ	4a from line 2a. Taxable amount—see				
	instructions			23,400	
f	Undistributed income for 2017. Subtract lines		- - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - 	23,400	
•	4d and 5 from line 1. This amount must be				
	distributed in 2018		1		30,520
7	Amounts treated as distributions out of corpus				30,320
•	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 2012 not				
O	applied on line 5 or line 7 (see instructions).				
^					
9	Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a				
			1.		
10	Analysis of line 9:				
а	Excess from 2013				
þ	Excess from 2014				Total
С	Excess from 2015			1	
d	Excess from 2016				
е	Excess from 2017				

Part	XIV Private Operating Founda	tions (see ınstru	ctions and Part	VII-A, question 9)	
1a	If the foundation has received a ruling foundation, and the ruling is effective for			·		
b	Check box to indicate whether the four				ection	(3) or/4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	5,5	Prior 3 years		
	income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
	investment return from Part X for each year listed	N/A		\ <u>'</u>		<u></u>
b	85% of line 2a				-	 _
	Qualifying distributions from Part XII,				/	
_	line 4 for each year listed					1
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities .					
е	Qualifying distributions made directly				-	· - · · · · · · · · · · · · · · · · · ·
	for active conduct of exempt activities.					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"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—enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed		/			
С	"Support" alternative test - enter					
	(1) Total support other than gross					
	investment income (interest,					18
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)				<u> </u>	
	(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 from	i.				
	an exempt organization . (
_	(4) Gross investment income					
Part				ne foundation h	ad \$5,000 or m	ore in assets at
	any time during the year-		IS.)			
1	Information Regarding Foundation	-				
а	List any managers of the foundation v					by the foundation
	before the close of any tax year (but o	only if they have co	ninbarea more in	an 45,000). (See S	ection 507(a)(2).)	
N/A	List and manager of the foundation				. (marting of the
Ь	List any managers of the foundation ownership of a partnership or other er					rge portion of the
A	ownership of a particiship of other cr	raty) or willon the	iodilodiloii ildə d	1070 of greater into	51001.	
N/A 2	Information Regarding Contribution	Grant Gift Loa	n Scholarshin e	to Programs:		
2	Check here ► ✓ If the foundation				organizatione and	does not accent
	unsolicited requests for funds. If the fo					
	complete items 2a, b, c, and d. See in		go, g. ao, o.o.,		garnzanono anao	ours conditions,
	The name, address, and telephone nu		tress of the person	n to whom applica	tions should be a	dressed:
_	The hame, dad obe, and telephone he	mileor or ornan aar	2,000 U. W.O PO.OO.			
N/A						
b	The form in which applications should	be submitted and	information and	materials they sho	uld include:	
_				.	•	
N/A						
С	Any submission deadlines:					
N/A						
ď	Any restrictions or limitations on aw	ards, such as by	geographical ar	eas, charitable fie	elds, kinds of ins	titutions, or other
	factors:					
N/A						

Part XV

Supplementary Information (continued)

Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of **A**mount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year **PARALYZED VETERANS** GENERAL CONTRIBUTION 250 00 801 18TH ST WASHINGTON, DC 20006-3517 MAYO CLINIC 200 FIRST ST SW ROCHESTER,MN 55905 GENERAL CONTRIBUTION 350 00 GENERAL CONTRIBUTION 200 00 ALZHEIMER.S DIS. RESEARCH NOT AVAILABLE **NATIONAL GEOGRAPHIC SOCIETY** 1145 17THST WASHINGTONDC 20036 GENERAL CONTRIBUTION 250 00 MEDIC ALERT FOUNDATION 5226 PIRRONE CT. **SALIDA, CA 95368** GENERAL CONTRIBUTION 145.00 **EASTERN VISAYAS CHRISTIAN HERITAGE ACADEMY** WANGAG, ALBLIERA, LEYTE PHILLIPINES **EDUCATIONAL AND GENERAL** 2,000 00 SPECIALOLYMPICS OFNV 5670 WYNN RD LV,NV 89118 OLYMPICS EVENT CONTRIBUTION 200.00 **AOPA AIR SAFETY FOUNDATION AOPA ORG/PPS GENERAL CONTRIBUTION** 99 00 ST. JUDE'S CHILDRENS REASEARCH 510 ST. JUDE PLACE, MEMPHIS, TN 38105-1942 GENERAL CONTRIBUTION 300 00 200 00 CONSUMER REPORTS 101TRUMAN AVE, YONKERS, NY **GENERAL CONTRIBUTION** ST. JOSEPH'S INDIAN SCHOOL GENERAL CONTRIBUTION PO BOX 326, CHAMBERLAIN SD, 57326 100.00 **VEGAS PBS** 3050 E. FLAMINGO RD. LAS VEGAS, NV 89121 **GENERAL CONTRIBUTION** 100 00 За \$4,194.00 Approved for future payment N/A Total

Pa	IL V	Analysis of income-producing Ac					
	Ū	ess amounts unless otherwise indicated.	(a) Business code	(b) Amount	(c) Exclusion code	on 512, 513, or 5 (d) Amount	(e) Related or exempt function income (See instructions)
1	Pro	gram service revenue:			<u> </u>		(coo moduono)
	а						
	b						
	С						
	d						
	е						
	f		-				
	g	Fees and contracts from government agencies					<u> </u>
2	-	mbership dues and assessments			 		
3		rest on savings and temporary cash investments			 		735
4		idends and interest from securities	211110		+ +		9,900
5		rental income or (loss) from real estate:	211110	·····	+		7,900
3			} -		 		
		Debt-financed property			 		
_		Not debt-financed property	ļ		 		-
		rental income or (loss) from personal property			 		
		er investment income	<u> </u>		 		
		n or (loss) from sales of assets other than inventory					
		income or (loss) from special events	ļ				
		ss profit or (loss) from sales of inventory	<u> </u>		<u> </u>		
11	Oth	er revenue. a		· · · · · · · · · · · · · · · · · · ·			
	b						
	C						
	a			<u> </u>			
	u						
	u e						
12	e Sub						
						13	10.635
13	Tot	ototal. Add columns (b), (d), and (e)				13	10,635
13 See	Tot wor	ototal. Add columns (b), (d), and (e) al. Add line 12, columns (b), (d), and (e)				13	10,635
13 See Pai	Tot wor	ototal. Add columns (b), (d), and (e)	 .s.) .ccomplishme	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor	ototal. Add columns (b), (d), and (e)	 .s.) .ccomplishme	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	ototal. Add columns (b), (d), and (e)	 .s.) .ccomplishme	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	ototal. Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
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13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
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13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		
13 See Pal Lin	Tot wor t X e No	Add columns (b), (d), and (e)	is.) accomplishme income is repor poses (other than	nt of Exemp	ot Purposes		

	Organizatio	ns							_	
1	Did the organization di in section 501(c) (ot organizations?							Yes	No	
а	Transfers from the rep	orting foundation to	n a noncharitable exer	mpt organization	n of				i i	
a				-	101.		1a(1)			
	(2) Other assets .	· · · · · · ·					_		-	
L	•						1a(2)		 	
b										
	(1) Sales of assets to a noncharitable exempt organization						1b(1)		-	
	(2) Purchases of assets from a noncharitable exempt organization						1b(2)		~	
	(3) Rental of facilities, equipment, or other assets						1b(3)		~	
	(4) Reimbursement arrangements						1b(4)	1	~	
	(5) Loans or loan guarantees						1b(5)		~	
	(6) Performance of ser	vices or membersh	nip or fundraising solid	citations			1b(6)		~	
C	Sharing of facilities, ed	juipment, mailing lis	sts, other assets, or p	aid employees			1c		~	
d									arket	
	value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market									
	value in any transactio									
(a) Line			haritable exempt organization		cription of transfers, trai					
			<u>-</u>	- ''-			<u> </u>			
N/#										
	`									
				_ +		-				
					_ 			—	——	
										
								_		
										
	 									
										
	Is the foundation direct	othy or indirectly aff	filiated with or relate	d to one or me	re tay-exempt or	nanizations				
Za	described in section 56						1 ./	E21 -	NI.	
_				ection 321: .) Yes		NO	
b If "Yes," complete the following schedule.										
(a) Name of organization			(b) Type of orga	(c) De	(c) Description of relationship					
			L							
N/A										
	7									
			ed this return, including accom				ge and t	elief, it	is true,	
Sign	correct, and complete Declar	ration of preparer (other tha	an taxpayer) is based on all inf	ormation of which pre	parer has any knowledge	May the IF	S discu	ee thie	return	
Here	Mark!	Handi	l	DIRECTOR _	5/28/18	with the pr				
	Signature of officer or trust		Date	Title	/ 	See instruc	tions [☑Yes[JN∘	
	Print/Type preparer's	name	Preparer Segnator	1 11	Date		TIN		_	
Paid			1/1/101/		218	【Check [⊻] if [.,	
Prepa			14W /L	1900/	17 //	self-employed	<u>PO1</u>	36649	1 6	
Use (Jilly	MALL BUSINESS C				s EIN ▶				
	Firm's address ► 3	16 ROMA LANE, BO	ULDER CITY NV 8900	5	Phon		2-370-			
						Fo	m 99	U-PF	(2017)	