<sub>Porm</sub> 990-PF

**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.

Open to Public Inspection For calendar year 2017 or tax year beginning , and ending Name of foundation A Employer identification number The Pope Family Foundation Number and street (or P O box number if mail is not delivered to street address) Room/suite 82-3653209 B Telephone number (see instructions) PO Box 1415 City or town, state or province, country, and ZIP or foreign postal code Midway LIT 84049 (801) 930-5101 Foreign country name Foreign province/state/county Foreign postal code C If exemption application is pending, check here G Check all that apply X Initial return D 1. Foreign organizations, check here ☐ Initial return of a former public charity. Final return Amended return 2. Foreign organizations meeting the 85% test. Address change Name change check here and attach computation H Check type of organization Section 501(c)(3) exempt private foundation E If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at J Accounting method X Cash Accrual If the foundation is in a 60-month termination end of year (from Part II, col (c), Other (specify) under section 507(b)(1)(B), check here line 16) ▶ \$ 50,000 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for chardable amounts in columns (b), (c), and (d) may not necessarily expenses per purposes books equal the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 50.976 2 Check ▶ ☐ If the foundation is **not** required to attach Sch B 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 5a Gross rents Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) . Net short-term capital gain Income modifications 10a Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) . . 12 Total. Add lines 1 through 11 50.976 13 Compensation of officers, directors, trustees, etc Operating and Administrative Expense 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Accounting fees (attach solved bie) Other professional fees 17 Depreciation (attach\_schedule)-and-depletion 20 Occupandy OGDEN 21 Travel, conferences, and Printing and publications Other expenses (attach schedule) Total operating and administrative expenses. Add lines 13 through 23 . . 0 25 976 Contributions, gifts, grants paid 976 26 Total expenses and disbursements. Add lines 24 and 25 0 976 976 Subtract line 26 from line 12 50.000 Excess of revenue over expenses and disbursements. Net investment income (if negative, enter -0-) 0

For Paperwork Reduction Act Notice, see instructions.

Adjusted net income (if negative, enter -0-)

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Ò	art II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
_	11411	should be for end-of-year amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing		50,000	50,000
	2	Savings and temporary cash investments			
	3	Accounts receivable			
	1	Less allowance for doubtful accounts			
	4	Pledges receivable 🕨			
		Less allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions).			
	7	Other notes and loans receivable (attach schedule)			
		Less allowance for doubtful accounts			
ts	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ą	10a	Investments—U.S and state government obligations (attach schedule)			
	ь	Investments—corporate stock (attach schedule)			<u> </u>
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis	ı		
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans		·	
	13	Investments—other (attach schedule)			
	14	Land buildings and appropriate basis	-		
	` `	Less accumulated depreciation (attach schedule)	······································		
	15	Other assets (describe )			
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	0	50,000	50,000
$\dashv$	17	Accounts payable and accrued expenses		30,000	30,000
	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21 .	Mortgages and other notes payable (attach schedule)			
Ï	22				
	23	Other liabilities (describe   Total liabilities (add lines 17 through 22)	0	0	
_	23		U		
S		Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31.			
ပို	24	·			
Balances	24	Unrestricted .			
	25	Temporarily restricted			
ם	26	Permanently restricted			
Net Assets or Fur		Foundations that do not follow SFAS 117, check here			
៑	~7	and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds			
set	28	Paid-in or capital surplus, or land, bldg , and equipment fund		50,000	
AS:	29	Retained earnings, accumulated income, endowment, or other funds		50,000	
<u>;</u>	30	Total net assets or fund balances (see instructions)	0	50,000	
ž	31	Total liabilities and net assets/fund balances (see			
	78.111	instructions)	0	50,000	
	rt III	Analysis of Changes in Net Assets or Fund Balances		<u></u>	
1		net assets or fund balances at beginning of year—Part II, column (a),	, line 30 (must agree	1 1	-
_		f-year figure reported on prior year's return)		1	0
		amount from Part I, line 27a		2	50,000
		increases not included in line 2 (itemize)		3	
		nes 1, 2, and 3		4	50,000
		eases not included in line 2 (itemize)		5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5)—Part	: II, column (b), line 3	30   6	50,000

Part	a) List and describe the k	d Losses for Tax on Investment(s) of property sold (for example, real estures, or common stock, 200 shs. MLC Co.)		(b) How acquired P—Purchase		Date acquired no , day, yr )	(d) Date sold (mo , day, yr )
				D—Donation	<del></del>	,,, ,	( ,,, ,, ,
<u>'a</u>					+		
<del></del>					<del>                                     </del>		
d					+-	_	
<u>_</u>					+		
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis opense of sale			n or (loss) f) minus (g))
<u>a</u> b					<u> </u>		
					+		-
d					1		
					+		
	Complete only for assets sh	nowing gain in column (h) and owned	by the foundati	on on 12/31/69	1		4.
	(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exc	cess of col (i)	1	col (k), but not	l (h) gain minus t less than -0-) <b>or</b> rom col (h))
a							
b							
С							
d							/
е					1		
2	Capital gain net income or	(nei cabital ioss) 3	also enter in F , enter -0- in P	,	2		0
3	Net short-term capital gain	or (loss) as defined in sections 1					
	If gain, also enter in Part I,	line 8, column (c) See instruction	ns If (loss), en	iter -0- in			
	Part I, line 8		, ,,	}	3		0
Part	V Qualification Und	ler Section 4940(e) for Redu	ced Tax on	Net Investmen	t Inco	me	
Was t		e this part blank section 4942 tax on the distributat ialify under section 4940(e). Do n			se peri	od?	Yes No
1	Enter the appropriate amo	unt in each column for each year,	see the instru	ctions before mak	ng any	entries	
Cal	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net valu	(c) e of noncharitable-use a	assets		(d) Inbution ratio divided by col (c))
	2016		0		0		0 000000
	2015		0		0		0 000000
	2014		0		0		0 000000
	2013		0		0		0 000000
	2012		0		0		0 000000
2	Total of line 1, column (d)					2	0 000000
3		or the 5-year base period—divide					
	the number of years the fo	undation has been in existence if	less than 5 ye	ars		3	0 000000
4	Enter the net value of nonc	charitable-use assets for 2017 from	m Part X, line	5		4	
5	Multiply line 4 by line 3		` .			5	
6	Enter 1% of net investmen	t income (1% of Part I, line 27b)		•	•	6	0
7	Add lines 5 and 6 .					7	0
8	Enter qualifying distribution					8	0
	Part VI instructions	er than line 7, check the box in Pa	art VI, IINE 16,	and complete that	part u	sing a 1% tax	rate. See the

Part	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)						
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1  Date of ruling or determination letter (attach copy of letter if necessary—see instructions)						
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	····· <del>-</del> ····					
	here ▶ ☐ and enter 1% of Part I, line 27b						
С	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 only, others, enter -0-)		0				
3	Add lines 1 and 2		0				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)						
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0		0				
6	Credits/Payments						
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 6a						
b	Exempt foreign organizations—tax withheld at source 6b						
C .	Tax paid with application for extension of time to file (Form 8868)  6c  6c						
d -	Backup withholding erroneously withheld . 6d 6d	<del></del>		لــــا			
7	Total credits and payments Add lines 6a through 6d		0				
8 9	Enter any penalty for underpayment of estimated tax. Check here						
10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed  Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid  10		0				
11	Enter the amount of line 10 to be Credited to 2018 estimated tax		0				
	VII-A Statements Regarding Activities						
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	1	Yes	No			
	participate or intervene in any political campaign?	1a		X			
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the						
	instructions for the definition	1b	]	Х			
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials						
	published or distributed by the foundation in connection with the activities						
C	· · · · · · · · · · · · · · · · · · ·						
d	, , , , , , , , , , , , , , , , , , ,						
	(1) On the foundation  \$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed						
_	on foundation managers > \$						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		<u> </u>			
2	If "Yes," attach a detailed description of the activities.						
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		×			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		$\hat{\mathbf{x}}$			
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/A				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	.,,,,	X			
	If "Yes," attach the statement required by General Instruction T			<del></del> -			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			]			
	By language in the governing instrument, or			į			
	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	X				
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х				
8a	Enter the states to which the foundation reports or with which it is registered. See instructions		,	1			
				- 1			
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	8b	Х				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)	_					
	or 4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If						
40	"Yes," complete Part XIV	9	Х				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their		.,				
	names and addresses .	10	X				

`Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the		Yes	No
	the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? .	13	Х	
	Website address >			
14	The books are in care of ▶ Paul Jones Telephone no ▶ 801-930	-5101		
	Located at ► 4766 S Holladay Blvd Holladay UT ZIP+4 ► 84117		<b>-</b>	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here			<b>▶</b> □
	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 authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the			
	name of the foreign country			
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)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			i
	the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days )			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in			$oldsymbol{ol}}}}}}}}}}}}}}}}}}$
	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance, check here .			[
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2017?	1c		X -
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2017?			
	If "Yes," list the years ▶ 20, 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions)	2b	N/A	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20 <sub></sub> , 20 <sub></sub> , 20 <sub></sub>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year? . *			
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, Form 4720, to determine if the			
	foundation had excess business holdings in 2017 )	3b		X
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	`		
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		X
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Part	VII-B	Statements Regarding Activities	for W	hich Form	4720 I	May Be Re	equire	d (contin	ued)			
5a	_	he year, did the foundation pay or incur an y on propaganda, or otherwise attempt to i	•		section	4945(e))?	•	☐ Yes	X No			
		ence the outcome of any specific public ele tly or indirectly, any voter registration drive		see section 49	955), o	r to carry on		☐ Yes	X No			
	(3) Prov	ide a grant to an individual for travel, study	, or oth	ner sımılar pur	poses?	•		Yes	X No			
		ide a grant to an organization other than a on 4945(d)(4)(A)? See instructions	charita	able, etc., orga	ınızatıo	n described	ın	☐ Yes	X No			
		ide for any purpose other than religious, cl oses, or for the prevention of cruelty to chi			terary,	or educatior	nal	Yes	X No			•
b	If any ar	swer is "Yes" to 5a(1)–(5), did any of the t	ransac	tions fail to qu	alify ur	der the exc	eptions	described	d in			
	Regulati	ons section 53 4945 or in a current notice	regardı	ing disaster as	ssistan	ce? See inst	truction	s		5b	N/A	
	Organiza	ations relying on a current notice regarding	disast	er assistance,	check	here			▶ 🔲	-		
С	because	swer is "Yes" to question 5a(4), does the form it maintained expenditure responsibility for	r the g	rant?	-	from the tax		☐ Yes	⊠ No			
C-		attach the statement required by Regulation										
6a		oundation, during the year, receive any fui sonal benefit contract?	ius, uir	ectly of maire	ctiy, to	pay premiur	115	☐ Yes	X No			
b	· ·	oundation, during the year, pay premiums.	directi	v or indirectly	onar	ersonal ben	efit cor		21, 110	6b		
	If "Yes" t	o 6b, file Form 8870					iciii ooi	Yes		Ų.		
		ne during the tax year, was the foundation a pa did the foundation receive any proceeds o					e trans		⊠ MO	7b	N/A	
Part		Information About Officers, Direct							aid Em			
	and Contractors											
1 List all officers, directors, trustees, and foundation managers and their compensation. See instructions.												
(a) Name and address			hours per week (I		i (If a	f not paid, emplo		d) Contributions to iployee benefit plans deferred compensation		(e) Expense account, other allowances		
Jerem	у С Роре		Director									
PO Bo	x 1415 M	ldway, UT 84049		3 00 0								
Tiffany	+		Directo									
		lidway, UT 84049	_	3 00		0						<del></del>
	V Jones 6 Hollada	y Blvd Holladay, UT 84117	Directo	or 1 00		0						
2	"NONE."	sation of five highest-paid employees (	other t	han those inc	luded	on line 1—	see ins	structions	). If nor	ie, ent	er ——	
	(a) Name a	nd address of each employee paid more than \$50,000		(b) Title, and a hours per w devoted to po	eek	(c) Compen	sation	(d) Contribution (d) Co	benefit leferred	(e) Expe	nse aco allowan	
NONE					-							
				1								
Total r	number of	other employees paid over \$50,000		·		L			<b>•</b>			
	-					·	•		F	m 990	)-PF	(2017)

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly and Contractors (continued)	Paid Employees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, ent	er "NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
·····	
······································	
<b>Total</b> number of others receiving over \$50,000 for professional services	<b>•</b>
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 A specific mission of the Pope Family Foundation is to provide relief to impoverished and/or distressed	
mothers who are raising a child or children without a supporting life partner. The foundation seeks opportur	nities to
ameliorate conditions among these poor or distressed mother by providing support in needed ways	
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	
2	<del>   </del>
All other program-related investments See instructions	
3	
	,
Total. Add lines 1 through 3	<b>▶</b> 0
•	Form <b>990-PF</b> (2017)

Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore	ign foundatio	ns,
	see instructions )		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	ļi	
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	0
C	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	<u> </u>
4	Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see		
	instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0
6	Minimum investment return. Enter 5% of line 5	6	0
Part		tions	
	and certain foreign organizations, check here   and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	
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)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		_
	line 1	7	0
Part	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	<u> </u>	
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1 <u>a</u>	976
b	Program-related investments—total from Part IX-B	1b \	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1 1 "	
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3ь	V
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	976
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	976
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wh	ether the found	dation
	qualifies for the section 4940(e) reduction of tax in those years		

Part	XIII Undistributed Income (see instruction	s)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
	line 7				
2	Undistributed income, if any, as of the end of 2017				
а	Enter amount for 2016 only			0	
b	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2017				
а	From 2012	_			1
b	From 2013 .				
C	From 2014				
d	From 2015	_			
е	From 2016				
f	Total of lines 3a through e	0			
4	Qualifying distributions for 2017 from Part XII,				
	line 4 ▶ \$ 976			<u> </u>	
а	Applied to 2016, but not more than line 2a		•		
þ	Applied to undistributed income of prior years				
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election				
	required—see instructions)				
d	Applied to 2017 distributable amount .				
e	Remaining amount distributed out of corpus	976			
5	Excess distributions carryover applied to 2017.				
	(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	976			
b	Prior years' undistributed income Subtract				
	line 4b from line 2b		0		
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				
d	Subtract line 6c from line 6b Taxable				
	amount—see instructions				
е	Undistributed income for 2016 Subtract line				
	4a from line 2a Taxable amount—see				
_	instructions .			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)				
8	Excess distributions carryover from 2012 not				
	applied on line 5 or line 7 (see instructions)			· · · · · · · · · · · · · · · · · · ·	****
9	Excess distributions carryover to 2018.				
10	Subtract lines 7 and 8 from line 6a	976			
10	Analysis of line 9				
a	Excess from 2013				
b	Excess from 2014				
C	Excess from 2015				
d	Excess from 2016				1
е	Excess from 2017 976	i l			

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)  1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling before the ruling is effective for 2017, enter the date of the ruling before the ruling is effective for 2017, enter the date of the ruling before the ruling is effective for 2017, enter the date of the ruling before the ruling is effective for 2017, enter the date of the ruling before the ruling is effective for 2017, enter the date of the ruling before the ruling is effective for 2017, enter the date of the ruling before the ruling is effective for 2017, enter the date of the ruling before the ruling is effective for 2017, enter the date of the ruling is effective for 2017 and private operating foundation as a private operating foundation described in section 1 and 1 and 1 and 1 and 2017 (b) 2016 (c) 2015 (d) 2014 (e) Total 1 and 2017 (b) 2016 (c) 2015 (d) 2014 (e) Total 2017 (e) 2014 (e) Total 2017 (e) 2015 (e) Total 2017 (e) 2015 (e) Total 2017 (e) 2015 (e) Total 2017 (e) 2016 (e) Total 2017 (e) 2015 (	Form 9	990-PF (2017) The Pope Family Four	ndation			82-365	/ 3209 <sub>Page</sub> <b>10</b>
1a. If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the data of the ruling b. Check box to indicate whether the foundation is a private operating foundation section.   2a. Enter the lesses of the adjusted net income from Part I or the minimum investment return from Part X for each year listed as 5% of line 2 a.  2 Gualifying distributions from Part XII, line 4 for each year listed d. Amounts included in line 2 not used directly for active conduct of exempt activities.  2 Gualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c.  3 Complete 3 a, b, or of for the 2c.  4 Coulifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c.  4 Coulifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c.  5 Complete 3 a, b, or of for the earlier with the alternative test refled upon a "Assess" alternative test-enter (1) Yalius of all assets.  5 Complete 3 a, b, or of for the state of 23 of minimum investment return shown in Part X, line 6 for each year listed.  6 C "Support" alternative test—enter (2) of minimum investment return shown in Part X, line 6 for each year listed.  7 Support of support of the presence on scillage of the state of 10 Total support of the presence on scillage is or one exempt and 5 or more exempt programation.  4 Information Regarding Foundation Managers:  a List any managers of the foundation who will only with the foundation has a 10% or greater interest.  2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here P if the foundation only makes contributions to preselected charitable organizations and does not accept unsoliced enquests for funds if the foundation makes gifts; grants, etc. to individuals or organizations under other conditions, com				tions and Part \	/II-A guestion 9)	02-3003	5205 Page 10
foundation, and the ruling is effective for 2017, either the date of the ruling			•				
b Check bot to indicate whether the foundation is a private operating foundation described in section		•		•	•	Applied	d For
income from Part I or the minimum investment return from Part X for each year Islade  6 85% of line 2 a  6 Qualifying distributions from Part XII, line 4 for each year listed  d Amounts included in line 2 not used directly for active conduct of exempt activities  e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2 d from line 2 e.g. years and the safe mative test relied upon  a "Assets" alternative test relied upon  a "Support alternative test-relier (1) Total support other than gooss dividends, rents, payments on securities loans (section 512(6)(5), or royalments)  (2 Support from general public and 5 or more series)  (3) Support from general public and 5 or more series)  any time during the year—see instructions.  1 Information Regarding Foundation Managers:  a List any managers of the foundation who have contributed more than \$5,000 (See section 507(d)(2))  Jeremy Pope  b List any managers of the foundation who own 10% or more of the stock of a corporation for an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater mierest.  2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:  Check here ▶ if the foundation only makes contributions to preselected charitable organizations under other conditions, complete items 2a, b, c, and	b	=		•	nbed in section		
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each year listed b 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempl activities Subtract line 2d from line 2c 3 Complete 3a, b, or c for the alternative test relied upon a "Assests' alternative test—enter (1) Value of all assets (2) Value of assets qualifying under section 4942(I)(3)(B)(I) 5 Endowment* alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed c "Support alternative test—enter Boundary of minimum investment return above in Part X, line 6 for each year listed c "Support alternative test—enter Boundary of minimum investment return above in Part X, line 6 for each year listed c "Support alternative test—enter Boundary of minimum investment return above in Part X, line 6 for each year listed c "Support alternative test—enter Boundary of minimum investment provided in Part X, line 6 for each year listed c "Support alternative test—enter Boundary of minimum investment provided in section 512(a)(5), or royalities) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(I)(3)(B)(B)(B)  (3) Largest amount of support from an exempt organization (4) Gross investment income  Part XVI Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)  1 Information Regarding Foundation Managers: a List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the bust any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the bust any managers of the foundation only in the foundation has a 10% or greater interest.  2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ▶ If the foundation only makes contributions to preselected chariable organizations and does not accept unsolicited reque			(a) 2017	(b) 2016	(c) 2015	/ (d) 2014	(e) Total
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Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)  1 Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))  Jeremy Pope  b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.  2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions  a The name, address, and telephone number or email address of the person to whom applications should be addressed.  Paul Jones 4766 S Holladay Blvd Salt Lake City, UT 84117 801-930-5101  b The form in which applications should be submitted and information and materials they should include.  Letter format, provide information about the grant requested and the purpose it will be used for				<del></del>			0
any time during the year—see instructions.)  1 Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))  Jeremy Pope  b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.  2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:     Check here ▶ ☐ If the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions  a The name, address, and telephone number or email address of the person to whom applications should be addressed  Paul Jones 4766 S Holladay Blvd Salt Lake City, UT 84117 801-930-5101  b The form in which applications should be submitted and information and materials they should include  Letter format, provide information about the grant requested and the purpose it will be used for	Dort		n (Complete this	nort only if the		d &E 000 or more	0
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					erials they should in	nclude	
c Any submission deadlines			ant requested and th	e purpose it will t	pe used for		**
None		Any submission deadlines					

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

factors

None

Part XV Supplementary Information (continue 3 Grants and Contributions Paid During t	ued)	ed for Eu	tura Payment	
Recipient	If recipient is an individual,	Foundation		T
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year Radden Family 422 E Brayden Way Draper, UT 84020	None	ı	Needy	976
	-			į.
4		,	-,	,
			•	
			,	
a.				r
Total /			, - 3a	976
b Approved for future payment				
			-	
;				
Total	,		<b>▶</b> 3b	0

(a) (b) (c) (d) function inco	Unrelated business income  (a) Business code  (b) Amount  (c) Exclusion code Amount  (d) Exclusion code Amount  (se ensinctions)  (ge) Related or exempt function income (See instructions)  (ge) Related or exempt funct							
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Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes	Total. Add line 12, columns (b), (d), and (e)			)				<u>_</u>
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Form 99	90-PF	(2017) The Pop	e Family Foundation						82-3653209	Pa	ge <b>13</b>
'Part	XVII		n Regarding Trans rganizations	fers to and Transa	action	s and R	elationship	s With No	ncharitable		
1	Did		directly or indirectly en	gage in any of the follo	owina	with any o	ther organiza	ation describ	ed	Yes	No
			er than section 501(c)	'	_	-	_				
		anizations?	, ,	,							
а	Trar	nsfers from the re	porting foundation to a	noncharitable exemp	t organ	nization of					
		Cash			J				. 1a(1)		X
	(2)	Other assets					. ,		1a(2)		Х
b	Othe	er transactions									
	(1)	Sales of assets to	a noncharitable exem	pt organization .			•		1b(1)		Х
	(2) 1	Purchases of ass	ets from a noncharitab	le exempt organizatio	n .				. 1b(2)		Х
	(3) 1	Rental of facilities	s, equipment, or other a	assets					[1b(3)		×
	(4) I	Reimbursement a	arrangements						1b(4)		Х
	(5) l	Loans or loan gua	arantees			•			. 1b(5)		X
	(6) F	Performance of se	ervices or membership	or fundraising solicita	tions				. 1b(6)		Х
C			equipment, mailing lists				•		1c		X
ď			the above is "Yes," com								
			er assets, or services given or sharing arrangemen								
(a) Line	no	(b) Amount involved	(c) Name of nonch	aritable exempt organization	1	(d) Des	scription of trans	fers, transaction	s, and sharing arra	ngemen	ts
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2a			ctly or indirectly affiliate				exempt orga	nizations			
b			501(c) (other than secti following schedule	on 50 r(c)(3)) or in sec	ction 5.	2//			☐ Yes	K L	0
	11 1	(a) Name of organ		(b) Type of orga	nızatıon			(c) Description	n of relationship		
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				•							
			clare that I have examined this retu					nowledge and belie	ef, it is true,		
Sign	corre	ect, and complete Laciarat	tion of preparer (other than taxpaye	•		_ ′	•		May the IRS discuss		
Here		1 /- h		11-14-18	<u></u>	DINELT	w		with the preparer sho	wn belov X Yes	
_	Sig	nature of officer or tru		Date	Title			L		اده. ت	
Paid		Print/Type preparer	's name	Preparer's signature			Date	Check			
Prepa	rer	Paul W Jones	·	Paul W Jones			11/14/2	018 self-er	nployed P0056	6041	
Use O		Firm's name	Hale & Wood, PLLC					Firm's EIN	27-1958131		
	,	Firm's address	4766 S Holladay Blv	<u>d, Holladay, UT 84117</u>	7			Phone no	801-930-510	1	

## Schedule B

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

**Schedule of Contributors** 

OMB No 1545-0047

Department of the Treasury

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

► Go to www.irs.gov/Form990 for the latest information. Internal Revenue Service Name of the organization Employer identification number The Pope Family Foundation 82-3653209 Organization type (check one) Filers of: Section: Form 990 or 990-FZ 501(c)( ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II 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 reliqious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III 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, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

totaling \$5,000 or more during the year

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Page 2 Name of organization **Employer identification number** The Pope Family Foundation 82-3653209 Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed. (a) (c) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Jeremy C Pope Person Х 1 PO Box 1415 **Payroll** Midway UT 84049 Noncash Foreign State or Province (Complete Part II for Foreign Country noncash contributions) / (b) (c) (d) (a) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person **Payroll** Noncash Foreign State or Province (Complete Part II for Foreign Country noncash contributions) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** Noncash Foreign State or Province (Complete Part II for Foreign Country noncash contributions) (d) (a) (c) Name, address, and ZIP + 4 No. **Total contributions** Type of contribution Person **Payroll** Noncash Foreign State or Province (Complete Part II for Foreign Country noncash contributions) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person **Payroll** Noncash Foreign State or Province (Complete Part II for Foreign Country noncash contributions) (b) (d) (a) (c) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. Person **Payroll** Noncash

Foreign State or Province

Foreign Country

(Complete Part II for

noncash contributions)

Name of organization
The Pope Family Foundation
Employer identification number 82-3653209

Part II	Noncash Property (see instructions). Use duplicate of	opies of Part II if additional spa	ce is needed.
(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
		\$	
(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
		\$	
(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 or					Employer identification number
The Pope I	Family Foundation				82-3653209
Part III	Exclusively religious, charitable, etc., cont		<del>-</del>		
	(10) that total more than \$1,000 for the year the following line entry. For organizations com				
	contributions of \$1,000 or less for the year (8				
	Use duplicate copies of Part III if additional sp			ili uction	s) <b>&gt;</b> \$0
(a) No.					
from	(b) Purpose of gift	(c	) Use of gift	(0	d) Description of how gift is held
Part I		<del></del>	<del></del>	+	
			•••••		
					-
		(e) 1	ransfer of gift		
	Transferee's name, address, and ZIP	+ 4	Relations	ship of	transferor to transferee
	For Prov Country				
(a) No.	1 of 110v Country		1		
from Part I	(b) Purpose of gift	(c	) Use of gift	(0	d) Description of how gift is held
raiti				+ -	
•••••				~	
		(e) T	ransfer of gift		
	Transferee's name, address, and ZIP	+ 4	Relations	ship of	transferor to transferee
				• • • • • • • • • • • • • • • • • • • •	
•	For Prov Country		·		
(a) No.					
from Part I	(b) Purpose of gift	(c	) Use of gift	(c	l) Description of how gift is held
				1	
,			<del>-</del>		
		(e) T	ransfer of gift		
	T		5.4.0		
}	Transferee's name, address, and ZIP	+ 4	Relations	ship of	transferor to transferee
	For Prov Country			·	
(a) No.					
from Part I	(b) Purpose of gift	(C	) Use of gift	(c	l) Description of how gift is held
					-
			·		•••••
		(e) T	ransfer of gift		
	Transfered name address and the	. 4	D-1-At	. <b>L</b>	
}	Transferee's name, address, and ZIP	T 4	Kelations	snib ot	transferor to transferee
				·	
l	For Draw		**		•

## Part VII-A, Line 10 (990-PF) - Substantial Contributors

,		Foreign Country		
		Zip Code	84049	
		State	T	
		City	Midway	
		Street	PO Box 1415	
	Check "X"	f Business		
		Name	Jeremy C Pope	

## Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

The Pope Family Foundation

				-					0	0	
Name rife	Check "X" if Business	Street	Cıty	State	Zip Code	Foreign Counity	į.	Avg Hrs Per Week	Avg Hrs Per Week Compensation	Ranafite	Expense '
	_	PO Box 1415	Midway	5	UT 84049		1	3 00	0	Sille	Account
· ·	-	PO Box 1415	Midway	- E	84049		Director	300	0		
		4766 S Holladay Blvd	Holladay	5	84117	-	Director	1 00	0		