2949102600206

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

Department of the Treasury

▶ 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                                                                                          | calen       | dar year 2017 or tax year beginning $2/29/17$ ,                    | and ending $12/3$         | 31/17                                              |                                               |                               |                         | <u>.</u>      |
|----------------------------------------------------------------------------------------------|-------------|--------------------------------------------------------------------|---------------------------|----------------------------------------------------|-----------------------------------------------|-------------------------------|-------------------------|---------------|
|                                                                                              |             | undation                                                           |                           |                                                    | A Emplo                                       | yer identification number     |                         |               |
| _                                                                                            | · <b></b> - | -                                                                  |                           | 170000                                             |                                               |                               |                         |               |
| _ <u>I</u>                                                                                   | BEX         | <u> Foundation</u>                                                 |                           | <u>-1739301                                   </u> |                                               |                               |                         |               |
| Number and street (or P O box number if mail is not delivered to street address)  Room/suite |             |                                                                    |                           |                                                    |                                               | none number (see instruction  | 15)                     |               |
|                                                                                              | ty or town  | n, state or province, country, and ZIP or foreign postal code      | · ·- <u> </u>             |                                                    |                                               | <del>_</del> _                | <del></del>             |               |
| Salt Lake City UT 84108                                                                      |             |                                                                    |                           |                                                    |                                               | nption application is pending | j, check here           | <b>▶</b> ∐ /  |
|                                                                                              |             |                                                                    | ım of a former public     | charity                                            | D 1 Fo                                        | reign organizations, check h  | ere                     | ▶ □           |
| _                                                                                            |             | Final return Amended                                               | •                         |                                                    |                                               | reign organizations meeting   |                         |               |
|                                                                                              |             | Address change Name cha                                            |                           |                                                    | 1                                             | % test, check here and attac  |                         | ▶ □           |
| н (                                                                                          | ^heck       | type of organization X Section 501(c)(3) exempt priva              | <del>``</del>             |                                                    | E If priva                                    | ate foundation status was tei | minated under           |               |
|                                                                                              |             | n 4947(a)(1) nonexempt charitable trust Other taxab                |                           |                                                    | 1                                             | n 507(b)(1)(A), check here    | minated dilder          | ▶ □           |
|                                                                                              |             | rket value of all assets at J Accounting method                    |                           | crual                                              | F If the f                                    | oundation is in a 60-month t  | ermination              | _             |
|                                                                                              |             | vear (from Part II, col (c), Other (specify)                       | 71 Odbii 7100             | J. Gui                                             | 1                                             | section 507(b)(1)(B), check   |                         | <b>▶</b> □    |
|                                                                                              | ne 16)      |                                                                    | t he on cash hasis \      |                                                    |                                               |                               |                         |               |
| _                                                                                            | art I       | Analysis of Revenue and Expenses (The total of                     | (a) Revenue and           |                                                    | <u> </u>                                      |                               | (d) Disbursen           |               |
| •                                                                                            |             | amounts in columns (b), (c), and (d) may not necessarily equal     | expenses per<br>books     | (b) Net in inco                                    |                                               | (c) Adjusted net<br>income    | for chantat<br>purposes |               |
|                                                                                              | Τ.          | the amounts in column (a) (see instructions) )                     |                           |                                                    |                                               |                               | (cash basis o           | only)         |
|                                                                                              | 1           | Contributions, gifts, grants, etc., received (attach schedule)     | 600,000                   | <u> </u>                                           |                                               |                               |                         |               |
|                                                                                              | 2           | Check ► if the foundation is <b>not</b> required to attach Sch. If | <b>B</b>                  | ļ                                                  |                                               |                               |                         |               |
|                                                                                              | 3           | Interest on savings and temporary cash investments                 |                           |                                                    |                                               |                               |                         |               |
| ne                                                                                           | 4           | Dividends and interest from securities                             |                           |                                                    |                                               |                               |                         |               |
|                                                                                              | 5a          | Gross rents                                                        |                           |                                                    |                                               |                               |                         |               |
|                                                                                              | þ           | Net rental income or (loss)                                        |                           |                                                    |                                               | <del> </del>                  |                         |               |
| ū                                                                                            | 6a          | Net gain or (loss) from sale of assets not on line 10              |                           | ļ                                                  |                                               |                               |                         |               |
| Revenue                                                                                      | b           | Gross sales price for all assets on line 6a                        |                           | <u> </u>                                           |                                               |                               |                         |               |
| ď                                                                                            | 7           | Capital gain net income (from Part IV, line 2)                     |                           |                                                    | 0                                             |                               |                         | <del></del>   |
|                                                                                              | 8           | Net short-term capital gain                                        |                           |                                                    |                                               | 0                             |                         |               |
|                                                                                              | 9           | Income modifications                                               |                           | <b>.</b>                                           |                                               |                               |                         |               |
|                                                                                              | 10a         | Gross sales less returns and allowances                            |                           |                                                    |                                               | -                             |                         |               |
|                                                                                              | b           | Less. Cost of goods sold                                           |                           |                                                    |                                               |                               |                         |               |
|                                                                                              | °           | Gross profit or (loss) (attach schedule)                           |                           |                                                    |                                               |                               |                         | <del></del>   |
|                                                                                              | 11          | Other income (attach schedule)                                     | 600 000                   |                                                    | 0                                             |                               |                         |               |
| -07                                                                                          | 12          | Total. Add lines 1 through 11                                      | 600,000                   |                                                    |                                               | 0                             |                         |               |
| Se                                                                                           | 13          | Compensation of officers, directors, trustees, etc                 | REC                       | <del>IIVFD</del>                                   |                                               |                               |                         |               |
| ڪڇَ                                                                                          | 14          | Other employee salaries and wages                                  | 11111111                  | 11.0                                               | <del>70 - </del>                              |                               |                         |               |
| <b>Expenses</b>                                                                              | 15          | Pension plans, employee benefits                                   | 14 10                     | 0.000                                              | 8                                             |                               |                         |               |
|                                                                                              | 1           | Legal fees (attach schedule)                                       | <del>-   2  - JAN 0</del> | 9 2019                                             | <u>                                      </u> |                               |                         |               |
| <u>Z</u> ∑                                                                                   | b           | Accounting fees (attach schedule)                                  | <del>-   W </del>         |                                                    | <u> </u>                                      | -                             |                         |               |
| Operat@g.andNAGminisRative                                                                   | 17          | Other professional fees (attach schedule) Interest                 | OGDE                      | N H                                                | <del>r    </del>                              |                               |                         |               |
| <u><s< u=""></s<></u>                                                                        | 18          | Taxes (attach schedule) (see instructions)                         | - ngo:                    |                                                    | <u> </u>                                      |                               |                         |               |
| <u> </u>                                                                                     | 19          | Depreciation (attach schedule) and depletion                       |                           | <u> </u>                                           |                                               |                               |                         |               |
|                                                                                              | 20          | Occupancy                                                          |                           | <u> </u>                                           | -                                             |                               |                         |               |
| 2                                                                                            | 21          | Travel, conferences, and meetings                                  |                           |                                                    |                                               |                               |                         |               |
| 3                                                                                            | 22          | Printing and publications                                          |                           |                                                    |                                               | ··                            |                         |               |
| G                                                                                            | 23          | Other expenses (att. sch.)                                         | <b></b>                   | <del> </del>                                       |                                               |                               |                         |               |
| Ò                                                                                            | 24          | Total operating and administrative expenses.                       |                           |                                                    |                                               |                               |                         |               |
| rat                                                                                          |             | Add lines 13 through 23                                            | C                         | )                                                  | 0                                             | 0                             |                         | 0             |
| þe                                                                                           | 25          | Contributions, gifts, grants paid                                  |                           | +                                                  |                                               |                               |                         | $\frac{0}{0}$ |
| 0                                                                                            | 26          | Total expenses and disbursements. Add lines 24 and 25              |                           | <del></del>                                        | 0                                             | 0                             |                         | - 0           |
|                                                                                              | 27          | Subtract line 26 from line 12.                                     |                           | <del> </del>                                       | <u> </u>                                      |                               | <u>.</u>                |               |
|                                                                                              | i i         | Excess of revenue over expenses and disbursements                  | 600,000                   | ,                                                  |                                               |                               |                         |               |
|                                                                                              | a           | Net investment income (if negative, enter -0-)                     | 300,000                   | 1                                                  | 0                                             |                               |                         |               |
|                                                                                              | b           | Adjusted net income (if negative, enter -0-)                       |                           | <del> </del>                                       | ——്                                           | 0                             |                         |               |
|                                                                                              | 1 C         | AGGIVE THE HIGHTE (HITCHAUVE, CHICK "U")                           | i .                       |                                                    |                                               | U                             |                         |               |

Total net assets or fund balances at beginning of year – Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)

2 Enter amount from Part I, line 27a

3 Other increases not included in line 2 (itemize) ▶

4 Add lines 1, 2, and 3

5 Decreases not included in line 2 (itemize) ▶

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

1 0 2 600,000 3 4 600,000

5

6

600,000 Form **990-PF** (2017)

| <u> Form 990-PF (2017)                                    </u>                    | <u>dation</u>                                                                          |                      | <u>83-1/39301</u>                          | ·                                    | Page 3                                     |
|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|----------------------|--------------------------------------------|--------------------------------------|--------------------------------------------|
| Part IV Capital Gains and                                                         | Losses for Tax on Investi                                                              | ment Income          |                                            | <u></u>                              |                                            |
|                                                                                   | d(s) of property sold (for example, real estate<br>e, or common stock, 200 shs MLC Co) | 9,                   | (b) How acquired P – Purchase D – Donation | (c) Date acquired<br>(mo , day, yr ) | (d) Date sold<br>(mo , day, yr )           |
| 1a N/A                                                                            |                                                                                        |                      | D - Bonaudii                               |                                      | +                                          |
| b                                                                                 | · · · · · · · · · · · · · · · · · · ·                                                  |                      |                                            |                                      | <del></del>                                |
| C                                                                                 |                                                                                        |                      |                                            | -                                    |                                            |
| d                                                                                 | · · · · · · · · · · · · · · · · · · ·                                                  |                      |                                            |                                      |                                            |
| e                                                                                 |                                                                                        | ·-                   |                                            |                                      |                                            |
| (e) Gross sales price                                                             | (f) Depreciation allowed (or allowable)                                                |                      | r other basis<br>ense of sale              |                                      | ain or (loss)<br>s (f) minus (g))          |
| a                                                                                 |                                                                                        |                      |                                            |                                      |                                            |
| b                                                                                 |                                                                                        |                      |                                            |                                      |                                            |
| С                                                                                 |                                                                                        |                      |                                            |                                      |                                            |
| d                                                                                 |                                                                                        |                      |                                            |                                      |                                            |
| e                                                                                 |                                                                                        |                      |                                            |                                      |                                            |
| Complete only for assets showing ga                                               | ain in column (h) and owned by th                                                      | e foundation on 12   | /31/69.                                    | (I) Gains (C                         | Col (h) gain minus                         |
| (i) FMV as of 12/31/69                                                            | (j) Adjusted basis<br>as of 12/31/69                                                   | 1 ''                 | ss of col (i)<br>(j), if any               |                                      | not less than -0-) or<br>(from col (h))    |
| a                                                                                 |                                                                                        |                      |                                            |                                      |                                            |
| b                                                                                 |                                                                                        |                      |                                            |                                      |                                            |
| С                                                                                 |                                                                                        |                      |                                            |                                      |                                            |
| d                                                                                 |                                                                                        |                      |                                            |                                      |                                            |
| e                                                                                 |                                                                                        |                      |                                            |                                      |                                            |
| 2 Capital gain net income or (net capit                                           | al loss) If gain, also enter in If (loss), enter -0- in                                |                      |                                            | 2                                    |                                            |
| 3 Net short-term capital gain or (loss) If gain, also enter in Part I, line 8, co |                                                                                        |                      |                                            |                                      |                                            |
| Part I, line 8                                                                    |                                                                                        |                      |                                            | 3                                    |                                            |
|                                                                                   | er Section 4940(e) for Red                                                             |                      |                                            | ncome                                |                                            |
| (For optional use by domestic private for                                         | undations subject to the section 4                                                     | 940(a) tax on net in | vestment income)                           |                                      |                                            |
| If section 4940(d)(2) applies, leave this j                                       | part blank                                                                             |                      |                                            |                                      | N/A                                        |
| Was the foundation liable for the section                                         | 4942 tax on the distributable am                                                       | ount of any year in  | the base period?                           |                                      | ☐ Yes ☐ No                                 |
| If "Yes," the foundation does not qualify                                         |                                                                                        |                      |                                            |                                      |                                            |
| 1 Enter the appropriate amount in eac                                             |                                                                                        |                      | naking any entries                         |                                      |                                            |
| (a)                                                                               | (b)                                                                                    |                      | (c)                                        |                                      | (d)                                        |
| Base penód years<br>Calendar year (or tax year beginning in)                      | Adjusted qualifying distribution                                                       | s Net value          | e of nonchantable-use asse                 |                                      | Distribution ratio b) divided by col. (c)) |
| 2016                                                                              |                                                                                        |                      | · · · · · · · · · · · · · · · · · · ·      | ,,,,,                                | -,(-),                                     |
| 2015                                                                              |                                                                                        |                      |                                            |                                      |                                            |
| 2014                                                                              | 1                                                                                      |                      |                                            |                                      |                                            |
| 2013                                                                              |                                                                                        |                      |                                            |                                      |                                            |
| 2012                                                                              |                                                                                        |                      |                                            |                                      |                                            |
|                                                                                   |                                                                                        | •                    |                                            |                                      | <del></del>                                |
| 2 Total of line 1, column (d)                                                     |                                                                                        |                      |                                            | 2                                    |                                            |
| 3 Average distribution ratio for the 5-ye                                         | ear base period – divide the total                                                     | on line 2 by 5 0, or | by the                                     |                                      |                                            |
| number of years the foundation has                                                |                                                                                        |                      |                                            | 3                                    |                                            |
| , , , , , , , , , , , , , , , , , , ,                                             |                                                                                        |                      |                                            |                                      |                                            |
| 4 Enter the net value of noncharitable-                                           | use assets for 2017 from Part X,                                                       | line 5               |                                            | 4                                    |                                            |
| 5 Multiply line 4 by line 3                                                       |                                                                                        |                      |                                            | 5                                    |                                            |
| 6 Enter 1% of net investment income                                               | (1% of Part I, line 27b)                                                               |                      |                                            | _6                                   |                                            |
| 7 Add lines 5 and 6                                                               |                                                                                        |                      |                                            | 7                                    |                                            |
| 8 Enter qualifying distributions from Pa                                          | art XII. line 4                                                                        |                      |                                            | 8                                    |                                            |
| If line 8 is equal to or greater than line Part VI instructions                   |                                                                                        | e 1b, and complete   | that part using a 1%                       |                                      | •                                          |

| Form | 990-RF (2017) IBEX Foundation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | 83-173             |                     |            |               | Pa       | <u>age 4</u>         |  |  |
|------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|---------------------|------------|---------------|----------|----------------------|--|--|
| Pa   | rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 940(e), or 494     | B – see instruct    | ions)      |               |          |                      |  |  |
| 1a   | Exempt operating foundations described in section 4940(d)(2), check here and                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | d enter "N/A" on   | line 1              |            |               |          |                      |  |  |
|      | Date of ruling or determination letter: (attach copy of letter if n                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ecessary—see       | instructions        |            |               |          |                      |  |  |
| b    | 11 . 1                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                    |                     |            |               |          |                      |  |  |
|      | 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 e      | nter -0-)           | 2          |               |          | 0                    |  |  |
| 3    | Add lines 1 and 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 01, 00.0.0.0       |                     | 3          |               |          |                      |  |  |
| 4    | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | only: others       | nter -0-)           | 4          |               |          | 0                    |  |  |
| 5    | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                    | inter -o-)          | 5          |               |          | $\frac{\circ}{\cap}$ |  |  |
|      | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ai -0-             |                     | 3          |               |          |                      |  |  |
| 6    | Credits/Payments                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | ا ما               |                     |            |               |          |                      |  |  |
| a    | 2017 estimated tax payments and 2016 overpayment credited to 2017                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 6a                 |                     | -          |               |          |                      |  |  |
| b    | Exempt foreign organizations – tax withheld at source                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 6b                 |                     | -          |               |          |                      |  |  |
| С    | Tax paid with application for extension of time to file (Form 8868)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 6c                 |                     | <b>↓</b>   |               |          |                      |  |  |
| d    | Backup withholding erroneously withheld                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 6d                 |                     | 4          |               |          |                      |  |  |
| 7    | Total credits and payments Add lines 6a through 6d                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                    |                     | 7          |               |          |                      |  |  |
| 8    | Enter any penalty for underpayment of estimated tax. Check her if Form 2220 is                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | attached           |                     | 8          |               |          |                      |  |  |
| 9    | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                    | <b>&gt;</b>         | 9          |               |          |                      |  |  |
| 10   | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount over                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | erpaid/            | •                   | 10         |               |          |                      |  |  |
| 11   | Enter the amount of line 10 to be Credited to 2018 estimated tax ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                    | Refunded >          | 11         |               |          |                      |  |  |
| Pa   | rt VII-A Statements Regarding Activities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                    |                     |            |               |          |                      |  |  |
| 1a   | During the tax year, did the foundation attempt to influence any national, state, or keeping the tax year, did the foundation attempt to influence any national, state, or keeping the tax year, did the foundation attempt to influence any national, state, or keeping the tax year, did the foundation attempt to influence any national, state, or keeping the tax year, did the foundation attempt to influence any national, state, or keeping the tax year, did the foundation attempt to influence any national, state, or keeping the tax year.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ocal legislation   | or did it           |            |               | 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | al purposes? Se    | e the               |            |               |          |                      |  |  |
|      | Instructions for the definition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                    |                     |            | 1b            |          | Χ                    |  |  |
|      | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | copies of any r    | naterials           |            |               |          |                      |  |  |
|      | published or distributed by the foundation in connection with the activities.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | ,                  |                     |            |               |          |                      |  |  |
| С    | Did the foundation file Form 1120-POL for this year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                    |                     |            | 1c            | ]        | Х                    |  |  |
| d    | Enter the amount (if any) of tax on political expenditures (section 4955) imposed du                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | iring the year     |                     |            | <del>``</del> |          | 21                   |  |  |
| u    | (1) On the foundation. ▶ \$ (2) On foundation manage                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                    |                     |            |               |          |                      |  |  |
| _    | Enter the reimbursement (if any) paid by the foundation during the year for political                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                    | v imposod           |            |               |          |                      |  |  |
| е    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | experiordire ta    | x imposeu           |            |               |          |                      |  |  |
| _    | on foundation managers  \$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | d to the IDCO      |                     |            | 2             |          | Х                    |  |  |
| 2    | Has the foundation engaged in any activities that have not previously been reporte                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | a to the iks?      |                     |            |               | <u> </u> |                      |  |  |
| _    | If "Yes," attach a detailed description of the activities                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                    | 4 4 . 1 4           |            |               |          |                      |  |  |
| 3    | Has the foundation made any changes, not previously reported to the IRS, in its go                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | •                  |                     |            |               |          | 37                   |  |  |
|      | incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | · -                | anges               |            | 3             | -        | X                    |  |  |
| 4a   | •                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | the year?          |                     |            | 4a            | -        | Χ                    |  |  |
| b    | If "Yes," has it filed a tax return on Form 990-T for this year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                    |                     | N/Z        |               | <u> </u> |                      |  |  |
| 5    | Was there a liquidation, termination, dissolution, or substantial contraction during the year?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                    |                     |            | 5             | <u> </u> | <u>X</u>             |  |  |
|      | If "Yes," attach the statement required by General Instruction T                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                    |                     |            | ı             |          |                      |  |  |
| 6    | Are the requirements of section 508(e) (relating to sections 4941 through 4945) sai                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | tisfied either:    |                     |            | ļ             |          |                      |  |  |
|      | By language in the governing instrument, or                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                    |                     |            |               |          |                      |  |  |
|      | By state legislation that effectively amends the governing instrument so that no management is a state of the state o | nandatory direc    | tions 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 "Y                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | es," complete F    | Part II, col (c), a | nd Part XV | 7             | X        |                      |  |  |
| 8a   | Enter the states to which the foundation reports or with which it is registered. See if                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | nstructions 🕨      |                     |            | - 1           |          |                      |  |  |
|      | None                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                    |                     |            |               |          |                      |  |  |
| b    | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-Pi                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | F to the Attorne   | y General           |            |               |          |                      |  |  |
|      | (or designate) of each state as required by General Instruction G? If "No," attach et                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                    | -                   |            | 8b            | X        |                      |  |  |
| 9    | Is the foundation claiming status as a private operating foundation within the mean                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                    | 942(ı)(3) or        |            |               |          |                      |  |  |
| -    | 4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017? See instru                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | -                  |                     |            | 1             |          |                      |  |  |
|      | complete Part XIV                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | JONOTHO TOTAL CITY | 100,                |            | 9             |          | x /                  |  |  |
| 10   | Did any persons become substantial contributors during the tax year? If "Yes," atta                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ich a schadula l   | isting their        |            | - ا           | $\vdash$ | - 23                 |  |  |
|      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                    | csonna Hiterii      |            |               |          |                      |  |  |
|      | names and addresses                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ion a sonedule i   | ioung trion         |            | 10            |          | X                    |  |  |

| Pa       | rt 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 the                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |    |      |          |
|          | meaning of section 512(b)(13)? If "Yes," attach schedule See instructions                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 11 |      | <u>X</u> |
| 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 |      | <u>X</u> |
| 13       | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 13 | X    |          |
|          | Website address ► N/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |    |      |          |
| 14       | The books are in care of ▶ Florian Solzbacher  Telephone no ▶                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |    |      |          |
|          | 1063 Oak Hills Way                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | ,  |      |          |
| 4-       | Located at ▶ Salt Lake City  UT  ZIP+4 ▶ 84108                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | ,  |      |          |
| 15       | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here and enter the amount of tax-exempt interest received or accrued during the year                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |    | l    |          |
| 16       | and enter the amount of tax-exempt interest received or accrued during the year  At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |    | Yes  | No       |
| 10       | over a bank, securities, or other financial account in a foreign country?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 16 | 163  | X        |
|          | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |    |      |          |
|          | the foreign country                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |    |      |          |
| Pa       | ort 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?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |    |      |          |
|          | (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?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |    |      |          |
|          | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |    |      |          |
|          | (5) Transfer any income or assets to a disqualified person (or make any of either available for                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |    |      |          |
|          | 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 )  Yes X No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |    |      |          |
| b        | If any answer is "Yes" to $1a(1)$ – $(6)$ , did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions $N/A$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 1b |      |          |
|          | 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, that                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |    |      |          |
| ·        | were not corrected before the first day of the tax year beginning in 2017? $N/A$                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 1c |      |          |
| 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |    |      |          |
| þ        | 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 ) N/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | 2b |      |          |
| 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 , 20 , 20 , 20<br>Battle ( and the first transfer of the control of the contro |    |      |          |
| 3a       | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |    |      |          |
| <b>L</b> | at any time during the year?  Yes X No  If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |    |      |          |
| b        | 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.)  N/A                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 3b |      |          |
| 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |    |      | <u> </u> |
|          | charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | 4b |      | X        |
|          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |    | 0-PF | (2017)   |

| Forn                                                                                                                                                | <u> 1990-PF (2017) IBEX Fou</u>     |                                                       |                                       | 739301                      |                                          |               | Pa                                    | <u>age 6</u> |
|-----------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------------------------|---------------------------------------|-----------------------------|------------------------------------------|---------------|---------------------------------------|--------------|
| Pa                                                                                                                                                  | art VII-B Statements R              | egarding Activities for Which Fo                      | orm 4720 May B                        | e Required (d               | continued)                               |               |                                       |              |
| 5a                                                                                                                                                  | During the year did the foundation  | on pay or incur any amount to·                        |                                       | _                           | _                                        |               |                                       |              |
|                                                                                                                                                     | (1) Carry on propaganda, or other   | nerwise attempt to influence legislation (se          | ction 4945(e))?                       | \_ <b>\</b> _\              | ∕es ⊠ No                                 |               |                                       | ĺ            |
| (2) Influence the outcome of any specific public election (see section 4955), or to carry on,                                                       |                                     |                                                       |                                       |                             |                                          |               |                                       |              |
| directly or indirectly, any voter registration drive?  (3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes X No |                                     |                                                       |                                       |                             |                                          |               |                                       |              |
|                                                                                                                                                     | (3) Provide a grant to an individ   | lual for travel, study, or other similar purpo        | ses?                                  | \_ <b>\</b> \               | ∕es ⊠ No │                               |               |                                       |              |
|                                                                                                                                                     | (4) Provide a grant to an organi    | zation other than a charitable, etc., organiz         | zation described in                   | _                           |                                          |               |                                       |              |
|                                                                                                                                                     | section 4945(d)(4)(A)? See          | instructions                                          |                                       | \ \\                        | ∕es 🏻 No                                 |               |                                       |              |
|                                                                                                                                                     | (5) Provide for any purpose oth     | er than religious, charitable, scientific, liter      | ary, or educational                   | _                           |                                          |               |                                       | i            |
|                                                                                                                                                     | purposes, or for the prevent        | ion of cruelty to children or animals?                |                                       | \ <u> </u>                  | res 🛚 X No                               | . 1           |                                       | ĺ            |
| b                                                                                                                                                   | If any answer is "Yes" to 5a(1)-    | (5), did <b>any</b> of the transactions fail to quali | fy under the exceptio                 | ns described in             | .                                        |               |                                       | ĺ            |
|                                                                                                                                                     | Regulations section 53 4945 or      | in a current notice regarding disaster assis          | stance? See instruction               | ons                         | N/A                                      | 5b            |                                       |              |
|                                                                                                                                                     | Organizations relying on a curre    | ent notice regarding disaster assistance, ch          | neck here                             |                             | ▶ ∐                                      |               |                                       | ĺ            |
| С                                                                                                                                                   | If the answer is "Yes" to questio   | n 5a(4), does the foundation claim exempt             | tion from the tax                     | . —                         | _                                        |               |                                       | ł            |
|                                                                                                                                                     | because it maintained expendition   | ure responsibility for the grant?                     |                                       | N/A 📙 ነ                     | ∕es 📙 No                                 |               |                                       | 1            |
|                                                                                                                                                     | if "Yes," attach the statement re   | quired by Regulations section 53.4945–5(              | d).                                   |                             |                                          |               |                                       |              |
| 6a                                                                                                                                                  |                                     | ear, receive any funds, directly or indirectly        | y, to pay premiums                    |                             |                                          |               |                                       |              |
|                                                                                                                                                     | on a personal benefit contract?     |                                                       |                                       |                             | ∕es 🏻 No 📗                               |               |                                       |              |
| b                                                                                                                                                   | Did the foundation, during the y    | ear, pay premiums, directly or indirectly, or         | n a personal benefit o                | contract?                   |                                          | 6b            |                                       | X            |
|                                                                                                                                                     | If "Yes" to 6b, file Form 8870.     |                                                       |                                       |                             |                                          |               |                                       |              |
| 7a                                                                                                                                                  | At any time during the tax year,    | was the foundation a party to a prohibited            | tax shelter transaction               | on? U                       | ∕es Ⅹ No                                 |               |                                       | ĺ            |
|                                                                                                                                                     |                                     | ive any proceeds or have any net income               |                                       |                             | N/A                                      | 7b            |                                       |              |
| P                                                                                                                                                   |                                     | out Officers, Directors, Trustees                     | s, Foundation M                       | lanagers, Hig               | hly Paid Em                              | ploye         | es,                                   |              |
|                                                                                                                                                     | and Contractor                      |                                                       |                                       |                             |                                          |               |                                       |              |
| 1                                                                                                                                                   | List all officers, directors, trust | ees, and foundation managers and thei                 | r compensation. Se                    | e instructions.             |                                          |               |                                       |              |
|                                                                                                                                                     |                                     |                                                       | (b) Title, and average                | (c) Compensation            | (d) Contributions to<br>employee benefit | (e) Ex        | nense a                               | ccount.      |
|                                                                                                                                                     | (a) Na                              | ame and address                                       | hours per week<br>devoted to position | (If not paid,<br>enter -0-) | plans and deferred                       |               | (e) Expense account, other allowances |              |
|                                                                                                                                                     |                                     |                                                       | <u> </u>                              | <u>'</u>                    | compensation                             | ┼             |                                       |              |
|                                                                                                                                                     | lorıan Solzbacher                   | Salt Lake City                                        | President                             | ] _                         |                                          |               |                                       |              |
|                                                                                                                                                     | 063 Oak Hills Way                   | UT 84108                                              | 0.00                                  | 0                           | 0                                        | ├             |                                       | 0            |
|                                                                                                                                                     | laoxin Chen                         | Salt Lake City                                        | Treasurer                             | _                           |                                          |               |                                       | _            |
|                                                                                                                                                     | 063 Oak Hills Way                   | UT 84108                                              | 0.00                                  | 0                           | 0                                        | <del></del>   |                                       | 0            |
| Ma                                                                                                                                                  | arcus C. Gerhardt                   | Salt Lake City                                        | Vice Preside                          | _                           |                                          |               |                                       | _            |
| 63                                                                                                                                                  | 30 Komas Drive                      | UT 84108                                              | 0.00                                  | 0                           | 0                                        | ├─            |                                       | 0            |
|                                                                                                                                                     |                                     |                                                       | -                                     |                             |                                          |               |                                       |              |
|                                                                                                                                                     |                                     |                                                       | <del></del>                           |                             | <u> </u>                                 |               |                                       |              |
| 2                                                                                                                                                   | · · · · · ·                         | -paid employees (other than those incl                | uded on line 1 – see                  | instructions). I            | r none, enter                            |               |                                       |              |
|                                                                                                                                                     | "NONE."                             |                                                       | <del></del>                           | 1                           | (4) Contribution to                      | $\overline{}$ |                                       | —            |
|                                                                                                                                                     |                                     |                                                       | (b) Title, and average                | 4.1.0                       | (d) Contributions to<br>employee benefit | (e) Ex        | pense a                               | ccount,      |
|                                                                                                                                                     | (a) Name and address of each        | employee paid more than \$50,000                      | hours per week devoted to position    | (c) Compensation            | plans and deferred compensation          |               | er allowa                             |              |
|                                                                                                                                                     |                                     |                                                       |                                       |                             | compensation                             | ┼──           |                                       |              |
| N                                                                                                                                                   | ONE                                 |                                                       | -                                     |                             | ľ                                        |               |                                       |              |
|                                                                                                                                                     |                                     |                                                       |                                       |                             |                                          | $\vdash$      |                                       |              |
|                                                                                                                                                     |                                     |                                                       | 1                                     | 1                           | •                                        |               |                                       |              |
|                                                                                                                                                     |                                     |                                                       |                                       | <del> </del>                |                                          | $\vdash$      |                                       |              |
|                                                                                                                                                     |                                     |                                                       |                                       |                             |                                          |               |                                       |              |
|                                                                                                                                                     |                                     |                                                       |                                       |                             | 1                                        | +             |                                       |              |
|                                                                                                                                                     |                                     |                                                       |                                       |                             |                                          |               |                                       |              |
| _                                                                                                                                                   |                                     |                                                       |                                       | -                           |                                          | $\vdash$      |                                       |              |
|                                                                                                                                                     |                                     |                                                       | -                                     |                             |                                          |               |                                       |              |
| Tak                                                                                                                                                 | al number of other employees        | d over \$50,000                                       |                                       | <u> </u>                    | <u> </u>                                 |               |                                       |              |
| 100                                                                                                                                                 | al number of other employees par    | α ονει φου,υυσ                                        |                                       |                             |                                          |               | n-DE                                  | (2017)       |
|                                                                                                                                                     |                                     |                                                       |                                       |                             | F0                                       | ım JJ         | /V-F F                                | (2017)       |

| Form 990-PF (2)                        | 017) IBEX Foundation                                                                                                                                                                 | 83-1739301                             | Page 7           |
|----------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|------------------|
| Part VIII                              | Information About Officers, Directors, Trustees,                                                                                                                                     | Foundation Managers, Highly Pa         | id Employees,    |
| a ==================================== | and Contractors (continued)                                                                                                                                                          | instructions If none order (GALOAIT II |                  |
| 3 Five high                            | est-paid independent contractors for professional services. Se                                                                                                                       |                                        | (4) Campanatura  |
| NONE                                   | (a) Name and address of each person paid more than \$50,000                                                                                                                          | (b) Type of service                    | (c) Compensation |
| NONE                                   |                                                                                                                                                                                      |                                        |                  |
| <del></del>                            |                                                                                                                                                                                      |                                        |                  |
|                                        |                                                                                                                                                                                      |                                        |                  |
|                                        |                                                                                                                                                                                      |                                        |                  |
|                                        |                                                                                                                                                                                      |                                        |                  |
|                                        |                                                                                                                                                                                      |                                        |                  |
|                                        |                                                                                                                                                                                      |                                        |                  |
|                                        |                                                                                                                                                                                      |                                        |                  |
|                                        | · · · · · · · · · · · · · · · · · · ·                                                                                                                                                |                                        |                  |
| Total number of                        | f others receiving over \$50,000 for professional services                                                                                                                           |                                        | <u> </u>         |
| Part IX-A                              | Summary of Direct Charitable Activities                                                                                                                                              |                                        |                  |
|                                        | 's four largest direct chantable activities during the tax year. Include relevant statistical in<br>other beneficiaries served, conferences convened, research papers produced, etc. | formation such as the number of        | Expenses         |
| 1 N/A                                  | <del> </del>                                                                                                                                                                         |                                        |                  |
|                                        |                                                                                                                                                                                      |                                        |                  |
| -                                      |                                                                                                                                                                                      |                                        | _                |
| 2                                      |                                                                                                                                                                                      |                                        |                  |
|                                        |                                                                                                                                                                                      |                                        |                  |
|                                        |                                                                                                                                                                                      |                                        |                  |
| 3                                      |                                                                                                                                                                                      |                                        |                  |
|                                        |                                                                                                                                                                                      |                                        |                  |
| 4                                      |                                                                                                                                                                                      |                                        |                  |
| -                                      |                                                                                                                                                                                      |                                        |                  |
|                                        |                                                                                                                                                                                      |                                        |                  |
| Part IX-B                              | Summary of Program-Related Investments (see                                                                                                                                          | instructions)                          | <u> </u>         |
|                                        | argest program-related investments made by the foundation during the tax year on lines                                                                                               | and 2                                  | Amount           |
| 1 N/A                                  |                                                                                                                                                                                      |                                        |                  |
|                                        |                                                                                                                                                                                      |                                        |                  |
|                                        |                                                                                                                                                                                      |                                        | <u> </u>         |
| 2                                      |                                                                                                                                                                                      |                                        |                  |
|                                        |                                                                                                                                                                                      |                                        |                  |
| All other program-i                    | related investments. See instructions                                                                                                                                                | · · · · · · · · · · · · · · · · · · ·  |                  |
| 3                                      |                                                                                                                                                                                      |                                        |                  |
|                                        |                                                                                                                                                                                      |                                        |                  |
|                                        |                                                                                                                                                                                      |                                        |                  |
| Total. Add lines                       | 1 through 3                                                                                                                                                                          | <u> </u>                               |                  |

Form 990-PF (2017)

O

3b

4

<u>5</u>

b

4

Cash distribution test (attach the required schedule)

Adjusted qualifying distributions. Subtract line 5 from line 4

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

Enter 1% of Part I, line 27b. See instructions

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.

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

| Form | 1990-RF (2017) IBEX Foundation                                             |               | 83-173930                                        | 1           | Page <b>9</b> |
|------|----------------------------------------------------------------------------|---------------|--------------------------------------------------|-------------|---------------|
|      | art XIII Undistributed Income (see instruction                             | ns)           |                                                  |             |               |
| 1    | Distributable amount for 2017 from Part XI,                                | (a)<br>Corpus | (b)<br>Years prior to 2016                       | (c)<br>2016 | (d)<br>2017   |
|      | line 7                                                                     |               |                                                  |             | 243           |
| 2    | Undistributed income, if any, as of the end of 2017                        |               |                                                  |             |               |
|      | Enter amount for 2016 only                                                 |               |                                                  |             |               |
| b    | Total for prior years 20, 20, 20                                           |               | <u> </u>                                         |             |               |
| 3    | Excess distributions carryover, if any, to 2017:                           |               |                                                  |             |               |
|      | From 2012                                                                  | 4             |                                                  |             |               |
|      | From 2013                                                                  | 4             |                                                  |             |               |
| -    | From 2014                                                                  | 4             |                                                  |             |               |
|      | From 2015                                                                  | -{            |                                                  |             |               |
|      | From 2016                                                                  | -{            |                                                  |             |               |
|      | 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                                 |               |                                                  |             |               |
| þ    | Applied to undistributed income of prior years                             |               |                                                  |             |               |
|      | (Election required – see instructions)                                     |               |                                                  |             |               |
| С    | Treated as distributions out of corpus (Election                           |               |                                                  |             |               |
| _    | required – see instructions)                                               |               |                                                  |             |               |
|      | Applied to 2017 distributable amount                                       |               | <del>    -</del>                                 |             |               |
|      | Remaining amount distributed out of corpus                                 |               | <del>                                     </del> |             |               |
| 5    | Excess distributions carryover applied to 2017                             |               | -                                                |             |               |
|      | (If an amount appears in column (d), the same                              |               |                                                  |             |               |
| 6    | amount must be shown in column (a) ) Enter the net total of each column as |               |                                                  |             |               |
| U    | indicated below:                                                           |               |                                                  |             |               |
|      | Corpus Add lines 3f, 4c, and 4e Subtract line 5                            |               |                                                  |             |               |
|      | Prior years' undistributed income Subtract                                 |               | 1                                                |             |               |
| _    | line 4b from line 2b                                                       |               |                                                  |             |               |
| c    | Enter the amount of prior years' undistributed                             |               |                                                  |             |               |
| Ū    | 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                                                               |               |                                                  |             |               |
| f    | Undistributed income for 2017 Subtract lines                               |               |                                                  |             |               |
|      | 4d and 5 from line 1. This amount must be                                  |               |                                                  |             |               |
|      | distributed in 2018                                                        |               |                                                  |             | 243           |
| 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.                                    |               |                                                  |             |               |
| 40   | Subtract lines 7 and 8 from line 6a                                        |               | +                                                |             |               |
| 10   | Analysis of line 9                                                         |               |                                                  |             |               |
| a    | Excess from 2013                                                           | 1             |                                                  |             |               |
| b    | Excess from 2014                                                           | -             |                                                  |             |               |
| q    | Excess from 2015                                                           | ┪             |                                                  |             |               |
| d    | Excess from 2016  Excess from 2017                                         | ┪             |                                                  |             |               |

|    | 990-PF (2017) IBEX Foundat                                                                       |                         |                          | 83-1/39                 |                     | Page 10                |  |  |
|----|--------------------------------------------------------------------------------------------------|-------------------------|--------------------------|-------------------------|---------------------|------------------------|--|--|
|    | art XIV Private Operating Fo                                                                     |                         |                          |                         | ion 9)              | <del>/</del>           |  |  |
| 1a | a 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                   |                         |                          |                         |                     |                        |  |  |
| b  | Check box to indicate whether the found                                                          | dation is a private op  | erating foundation de    |                         | 4942(j)(3) or       | 4942(J)(5)             |  |  |
| 2a | Enter the lesser of the adjusted net                                                             | Tax year                | _                        | Prior 3 years           |                     | (e) Total              |  |  |
|    | income from Part I or the minimum                                                                | (a) 2017                | (b) 2016                 | (c) 2015                | (d) 2014            | 1 (0) 1010.            |  |  |
|    | investment return from Part X for                                                                |                         |                          |                         |                     |                        |  |  |
|    | each year listed                                                                                 |                         |                          |                         |                     | /                      |  |  |
| b  | 85% of line 2a                                                                                   |                         |                          |                         |                     |                        |  |  |
| С  | Qualifying distributions from Part XII,                                                          |                         |                          |                         |                     |                        |  |  |
| -  | line 4 for each year listed                                                                      |                         |                          |                         |                     |                        |  |  |
| d  | Amounts included in line 2c not used directly                                                    | -                       |                          |                         |                     |                        |  |  |
| _  | for active conduct of exempt activities                                                          |                         |                          | ,                       | 4                   |                        |  |  |
| е  | Qualifying distributions made directly                                                           | _                       |                          |                         |                     |                        |  |  |
| е  | , ,                                                                                              |                         |                          |                         |                     |                        |  |  |
|    | for active conduct of exempt activities                                                          |                         |                          |                         |                     |                        |  |  |
| _  | Subtract line 2d from line 2c                                                                    |                         |                          | /                       | +                   |                        |  |  |
| 3  | Complete 3a, b, or c for the                                                                     |                         |                          |                         |                     |                        |  |  |
|    | alternative test relied upon:                                                                    |                         |                          |                         |                     | 1                      |  |  |
| а  | "Assets" alternative test – enter                                                                |                         | 1                        |                         |                     |                        |  |  |
|    | (1) Value of all assets                                                                          |                         | ,                        | <u>/</u>                |                     |                        |  |  |
|    | (2) Value of assets qualifying under                                                             |                         | /                        |                         |                     |                        |  |  |
|    | section 4942(j)(3)(B)(i)                                                                         | <del></del>             |                          |                         |                     |                        |  |  |
| b  | "Endowment" alternative test – enter 2                                                           | 3                       | /                        |                         |                     |                        |  |  |
|    | of minimum investment return shown เท                                                            |                         | /                        |                         |                     |                        |  |  |
|    | Part X, line 6 for each year listed                                                              |                         |                          |                         |                     |                        |  |  |
| С  | "Support" alternative test – enter                                                               |                         | /                        |                         | 1                   |                        |  |  |
|    | (1) Total support other than gross                                                               |                         | /                        |                         | 1                   |                        |  |  |
|    | investment income (interest,                                                                     |                         | /                        |                         |                     | ļ                      |  |  |
|    | dividends, rents, payments on                                                                    |                         | /                        |                         |                     |                        |  |  |
|    | securities loans (section                                                                        |                         | /                        |                         |                     |                        |  |  |
|    | 512(a)(5)), or royalties)                                                                        |                         | /                        |                         | <del></del>         |                        |  |  |
|    | (2) Support from general public                                                                  |                         | Y                        |                         |                     |                        |  |  |
|    | and 5 or more exempt                                                                             | /                       |                          |                         |                     |                        |  |  |
|    | organizations as provided in section 4942(j)(3)(B)(iii)                                          | /                       |                          |                         |                     |                        |  |  |
|    | (3) Largest amount of support from                                                               |                         |                          |                         |                     |                        |  |  |
|    | an exempt organization                                                                           | /                       |                          |                         |                     |                        |  |  |
|    |                                                                                                  |                         |                          |                         |                     |                        |  |  |
| D. | (4) Gross investment income art XV Supplementary Infor                                           | mation /Comple          | to this part only        | if the foundation       | on had \$5.00       | 00 or more in assets a |  |  |
| Г  | any time during the y                                                                            |                         |                          | ii tile loulidati       | on nau 45,00        | o or more in assets a  |  |  |
| _  |                                                                                                  |                         | ictions.)                |                         |                     |                        |  |  |
| 1  | Information Regarding Foundation M                                                               | •                       | 46 20/ -646-4-           | tal acatub those ac     | annad brotha fari   | undation               |  |  |
| а  | List any managers of the foundation wh                                                           |                         |                          |                         |                     | indation               |  |  |
|    | before the close of any tax year (but on                                                         | ly if they have contrit | outed more than \$5,00   | JU) (See section 50     | /(a)(2) )           |                        |  |  |
|    | N/A                                                                                              |                         |                          |                         |                     |                        |  |  |
| b  | List any managers of the foundation wh                                                           |                         |                          | •                       | y large portion o   | f the                  |  |  |
|    | ownership of a partnership or other enti                                                         | ty) of which the foun   | dation has a 10% or g    | reater interest         |                     |                        |  |  |
|    | N/A                                                                                              |                         | <del></del>              |                         |                     |                        |  |  |
| 2  | Information Regarding Contribution,                                                              |                         |                          | _                       |                     |                        |  |  |
|    | Check here ▶ ☐ If the foundation onl                                                             | y makes contribution    | s to preselected char    | table organizations     | and does not ac     | cept                   |  |  |
|    | unsolicited requests for funds. If the four                                                      | ındatıon makes gıfts,   | grants, etc., to individ | luals or organizatior   | is under other co   | onditions,             |  |  |
|    | complete items 2a, b, c, and d. See ins                                                          | tructions               |                          |                         |                     |                        |  |  |
| а  | The name, address, and telephone nun                                                             | nber or email addres    | s of the person to who   | om applications sho     | uld be addresse     | d:                     |  |  |
|    | N/A                                                                                              |                         |                          |                         |                     |                        |  |  |
|    |                                                                                                  |                         |                          |                         |                     |                        |  |  |
| b  | The form in which applications should be                                                         | e submitted and info    | rmation and materials    | they should include     | <del></del>         |                        |  |  |
|    | N/A                                                                                              |                         |                          |                         |                     |                        |  |  |
| С  | Any submission deadlines:                                                                        |                         | <del></del>              |                         |                     |                        |  |  |
| -  | N/A                                                                                              |                         |                          |                         |                     |                        |  |  |
| d  | Any restrictions or limitations on awards                                                        | s, such as by geogra    | phical areas, charitab   | le fields, kinds of ins | stitutions, or othe | <br>er                 |  |  |
| _  | factors:                                                                                         | .,                      | ,                        | ,                       |                     |                        |  |  |
|    | N/A                                                                                              |                         |                          |                         |                     |                        |  |  |
|    |                                                                                                  |                         |                          |                         |                     | - 000 PE               |  |  |

| Grants and Contributions Paid Duri | ng the Year or Approved to                                                           | r ruture Paymen      | <u> </u>                         |        |
|------------------------------------|--------------------------------------------------------------------------------------|----------------------|----------------------------------|--------|
| Recipient                          | If recipient is an individual,<br>show any relationship to<br>any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or busines  | s) or substantial contributor                                                        | recipient            |                                  |        |
| a Paid during the year             |                                                                                      |                      |                                  |        |
| N/A                                |                                                                                      |                      |                                  |        |
|                                    |                                                                                      |                      |                                  |        |
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|                                    |                                                                                      |                      |                                  |        |
|                                    |                                                                                      |                      |                                  |        |
|                                    |                                                                                      |                      |                                  |        |
| Total                              |                                                                                      | T** .                | ▶ 3a                             |        |
| Approved for future payment        |                                                                                      |                      |                                  |        |
| N/A                                |                                                                                      |                      |                                  |        |
|                                    |                                                                                      |                      |                                  |        |
|                                    |                                                                                      |                      |                                  |        |
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|                                    |                                                                                      |                      |                                  |        |
| Total                              |                                                                                      |                      | <b>▶</b> 3b                      |        |

| orm 990-RF (2017) IBEX Foundation  Part XVI-A Analysis of Income-Producing                             | Activities           |                    | -173930:                                           |                          | Page <b>1</b> 2                                      |
|--------------------------------------------------------------------------------------------------------|----------------------|--------------------|----------------------------------------------------|--------------------------|------------------------------------------------------|
| nter gross amounts unless otherwise indicated                                                          | i                    | business income    | Excluded by s                                      | section 512, 513, or 514 | (e)                                                  |
|                                                                                                        | (a)<br>Business code | (b)<br>Amount      | (c)<br>Exclusion<br>code                           | (d)<br>Amount            | Related or exempt function income (See instructions) |
| Program service revenue                                                                                |                      |                    |                                                    |                          |                                                      |
| ab                                                                                                     |                      |                    |                                                    |                          |                                                      |
| С                                                                                                      |                      |                    |                                                    |                          |                                                      |
| d                                                                                                      | _                    |                    |                                                    |                          |                                                      |
| e                                                                                                      |                      | ·                  |                                                    |                          |                                                      |
| f                                                                                                      | -                    |                    | <del></del>                                        | <del></del>              |                                                      |
| g Fees and contracts from government agencies                                                          |                      |                    |                                                    |                          |                                                      |
| 2 Membership dues and assessments                                                                      | -                    | <del>-</del>       |                                                    |                          | <del></del>                                          |
| Interest on savings and temporary cash investments Dividends and interest from securities              |                      |                    | 1                                                  |                          | <u> </u>                                             |
| 5 Net rental income or (loss) from real estate                                                         |                      | -                  | <del>-   -   -   -   -   -   -   -   -   -  </del> |                          | <del></del>                                          |
| a Debt-financed property                                                                               |                      |                    |                                                    |                          |                                                      |
| b Not debt-financed property                                                                           |                      |                    |                                                    |                          |                                                      |
| Net rental income or (loss) from personal property                                                     |                      |                    |                                                    |                          |                                                      |
| 7 Other investment income                                                                              |                      |                    |                                                    |                          |                                                      |
| Gain or (loss) from sales of assets other than inventory                                               |                      |                    |                                                    |                          |                                                      |
| Net income or (loss) from special events                                                               |                      | -                  | <del>-    </del> -                                 |                          |                                                      |
| O Gross profit or (loss) from sales of inventory                                                       | <del></del>          |                    |                                                    |                          |                                                      |
| 1 Other revenue a                                                                                      |                      |                    | <del>-    </del> -                                 |                          |                                                      |
| b                                                                                                      | _                    |                    | <del>                                     </del>   |                          |                                                      |
| c                                                                                                      |                      |                    | <del>  - -</del>                                   |                          |                                                      |
| e                                                                                                      | _                    |                    |                                                    |                          |                                                      |
| 2 Subtotal. Add columns (b), (d), and (e)                                                              |                      |                    | 0                                                  | 0                        |                                                      |
| 3 Total. Add line 12, columns (b), (d), and (e)                                                        |                      |                    |                                                    | 13                       |                                                      |
| See worksheet in line 13 instructions to verify calculations.)                                         |                      |                    |                                                    |                          |                                                      |
| Part XVI-B Relationship of Activities to the                                                           |                      |                    |                                                    |                          |                                                      |
| Line No. Explain below how each activity for which include accomplishment of the foundation's exempt p |                      |                    |                                                    |                          |                                                      |
| N/A                                                                                                    | ourposes (ourier una | in by providing in | unus ioi sucii p                                   | ourposes/ (See insi      | il detions /                                         |
| IV/ FA                                                                                                 |                      | ·                  |                                                    |                          | <del>-</del> .                                       |
|                                                                                                        | -                    |                    |                                                    |                          |                                                      |
|                                                                                                        |                      |                    | -                                                  |                          |                                                      |
|                                                                                                        |                      |                    | ***                                                |                          |                                                      |
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|                                                                                                        |                      |                    |                                                    |                          |                                                      |
|                                                                                                        |                      |                    | <u>.                                    </u>       |                          | - ·-                                                 |
|                                                                                                        |                      |                    |                                                    |                          |                                                      |
|                                                                                                        |                      |                    |                                                    |                          |                                                      |
|                                                                                                        |                      |                    |                                                    |                          |                                                      |
|                                                                                                        |                      |                    |                                                    |                          | <del> </del>                                         |
|                                                                                                        |                      |                    |                                                    |                          |                                                      |
|                                                                                                        |                      |                    |                                                    |                          |                                                      |

|             |                         | <b>Exempt Organiz</b>                                      | ations                               |                                                      |                                             |                                                                                               |          |       |          |
|-------------|-------------------------|------------------------------------------------------------|--------------------------------------|------------------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------------------------------|----------|-------|----------|
| 1 D         |                         |                                                            |                                      | age in any of the f                                  | following with ai                           | ny other organization described                                                               |          | Yes   | No       |
| ır          | section 5               | 01(c) (other than sec                                      | tion 501(c)(3                        | 3) organizations) (                                  | or in section 52                            | 7, relating to political                                                                      |          |       |          |
| 0           | rganızatıor             | ns?                                                        |                                      |                                                      |                                             |                                                                                               |          |       |          |
| аT          | ransfers fr             | om the reporting four                                      | dation to a r                        | noncharitable exe                                    | mpt organizatio                             | n of:                                                                                         |          |       |          |
| (*          | 1) Cash                 | , ,                                                        |                                      |                                                      |                                             |                                                                                               | 1a(1)    |       | <u>X</u> |
| -           | 2) Other as             | ssets                                                      |                                      |                                                      |                                             |                                                                                               | 1a(2)    |       | X        |
|             | Other transa            |                                                            |                                      |                                                      |                                             |                                                                                               |          |       |          |
|             |                         | f assets to a nonchar                                      | table exemp                          | ot organization                                      |                                             |                                                                                               | 1b(1)    |       | <u>X</u> |
| •           | •                       | ses of assets from a r                                     |                                      | •                                                    | ation                                       |                                                                                               | 1b(2)    |       | X        |
| •           | -                       | of facilities, equipmen                                    |                                      |                                                      | 4.0.7                                       |                                                                                               | 1b(3)    |       | X        |
| -           | -                       | rsement arrangemen                                         |                                      |                                                      |                                             |                                                                                               | 1b(4)    |       | X        |
| •           | -                       | r loan guarantees                                          |                                      |                                                      |                                             |                                                                                               | 1b(5)    |       | X        |
| •           | •                       | ance of services or n                                      | nembershin (                         | or fundraising soli                                  | icitations                                  |                                                                                               | 1b(6)    |       | X        |
| •           | •                       | acilities, equipment, r                                    | •                                    |                                                      |                                             |                                                                                               | 1c       |       | X        |
|             | -                       |                                                            | -                                    | ·                                                    |                                             | olumn (b) should always show the fair market                                                  |          |       |          |
|             |                         |                                                            |                                      |                                                      |                                             | If the foundation received less than fair market                                              |          |       |          |
|             |                         |                                                            |                                      |                                                      |                                             | e of the goods, other assets, or services received                                            |          |       |          |
|             | Line no                 | (b) Amount involved                                        |                                      | of nonchantable exem                                 |                                             | (d) Description of transfers, transactions, and sharing                                       |          | ents  |          |
| N/A         | Line no                 | (B) FUNDANT INVOIVED                                       | (0) (10                              | or nononanaono oxoni                                 | p. o.gaa.a.                                 | (0,0000,000,000,000,000,000,000,000,000                                                       |          |       |          |
| IV/A        |                         |                                                            |                                      | <u> </u>                                             |                                             |                                                                                               |          |       |          |
|             |                         |                                                            |                                      | ···                                                  |                                             |                                                                                               |          |       |          |
|             |                         |                                                            |                                      |                                                      |                                             |                                                                                               |          |       |          |
|             |                         |                                                            |                                      | <del></del>                                          |                                             |                                                                                               |          |       |          |
|             |                         |                                                            |                                      |                                                      |                                             |                                                                                               |          |       |          |
|             |                         |                                                            |                                      |                                                      |                                             |                                                                                               |          |       |          |
|             |                         |                                                            |                                      |                                                      |                                             |                                                                                               |          |       | —        |
|             | <del></del> -           |                                                            |                                      |                                                      |                                             |                                                                                               |          |       |          |
|             |                         |                                                            |                                      |                                                      |                                             |                                                                                               |          |       |          |
|             |                         |                                                            |                                      |                                                      |                                             |                                                                                               |          |       |          |
|             |                         |                                                            |                                      | <del></del>                                          |                                             |                                                                                               |          |       |          |
|             |                         |                                                            |                                      |                                                      |                                             |                                                                                               |          |       |          |
|             | .,                      |                                                            |                                      |                                                      |                                             |                                                                                               |          |       |          |
|             |                         |                                                            | -                                    |                                                      |                                             |                                                                                               |          |       |          |
|             |                         |                                                            |                                      |                                                      |                                             |                                                                                               |          |       |          |
|             |                         |                                                            |                                      |                                                      |                                             | <u></u>                                                                                       |          |       |          |
|             |                         | •                                                          | -                                    |                                                      |                                             | tax-exempt organizations                                                                      | <u> </u> | 177   | a        |
|             |                         | n section 501(c) (other                                    |                                      | on 501(c)(3)) or in                                  | section 527?                                |                                                                                               | U Y₁     | es X  | .] No    |
| <b>b</b> II | •                       | mplete the following s                                     | chedule.                             |                                                      |                                             |                                                                                               |          |       |          |
|             |                         | ) Name of organization                                     |                                      | (b) Type of o                                        | rganization                                 | (c) Description of relationship                                                               |          |       |          |
| N           | /A                      |                                                            |                                      |                                                      | -                                           | <del></del>                                                                                   |          |       |          |
|             |                         |                                                            |                                      |                                                      |                                             |                                                                                               |          |       |          |
|             |                         |                                                            |                                      |                                                      |                                             |                                                                                               |          |       |          |
|             |                         |                                                            |                                      |                                                      |                                             |                                                                                               |          |       |          |
|             | 1                       |                                                            |                                      | <u> </u>                                             |                                             |                                                                                               |          |       |          |
|             | Under per<br>correct, a | nalties of perjury, I declare<br>nd complete Declaration o | that I have exar<br>f preparer (othe | mined this return, inclu<br>er than taxpayer) is bas | iding accompanying<br>sed on all informatio | schedules and statements, and to the best of my knowledge of which preparer has any knowledge |          |       | ie,      |
|             | ·                       | •                                                          | , , ,                                | ,                                                    |                                             | May the IRS of with the prepa                                                                 |          |       |          |
| Sign        |                         |                                                            |                                      |                                                      |                                             | See instruction                                                                               |          | Yes   | ¬ No l   |
| Here        | 1, 1                    | 1 k                                                        |                                      |                                                      |                                             | (LL) = 10                                                                                     | (23)     |       |          |
|             |                         | V                                                          |                                      |                                                      | 117                                         | H2019 President                                                                               |          |       |          |
|             | Signa                   | ature of officer or trustee                                |                                      |                                                      | Date                                        | THE                                                                                           |          |       |          |
|             | Print/Ty                | pe preparer's name                                         |                                      |                                                      | Preparer's signat                           | Date                                                                                          | 1        | Check | ☐ ıf     |
| Daid        |                         |                                                            |                                      |                                                      | `                                           | XUIII SAN                                                                                     |          |       | nployed  |
| Paid        | Scot                    | t A. Czaja, (                                              | CPA                                  |                                                      | Scott A/                                    | Czaja, CPA                                                                                    | 28/18    |       |          |
| Prepai      | rer Firm's r            | 77000                                                      |                                      |                                                      |                                             | PTIN P(                                                                                       | 0044     | 006   | 5        |
| Use O       | nly                     |                                                            |                                      | W Ste 400                                            | )                                           |                                                                                               | -051     |       | _        |
|             |                         |                                                            |                                      | City, UT                                             | 84103                                       | Phone no 80                                                                                   |          |       | 2011     |
|             |                         |                                                            |                                      |                                                      |                                             |                                                                                               | QQ       |       |          |

Schedule B (Form 990, 990-EZ, or 990-PF)
Department of the Treasury Internal Revenue Service

**Schedule of Contributors** 

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

| Name of the organization                                                 | Employer identification number                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                          |
|--------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------|
| IBEX Foundati                                                            | on                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | 83-1739301                               |
| Organization type (check or                                              | <del></del>                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 00 27000                                 |
| Filers of:                                                               | Section:                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                          |
| Form 990 or 990-EZ                                                       | 501(c)( ) (enter number) organization                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |
|                                                                          | 4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation                                                                                                                                                                                                                                                                                                                                                                                                  |                                          |
|                                                                          | 527 political organization                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                          |
| Form 990-PF                                                              | X 501(c)(3) exempt private foundation                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |
|                                                                          | 4947(a)(1) nonexempt charitable trust treated as a private foundation                                                                                                                                                                                                                                                                                                                                                                                                             |                                          |
|                                                                          | 501(c)(3) taxable private foundation                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                          |
|                                                                          | covered by the <b>General Rule</b> or a <b>Special Rule</b> .  7), (8), or (10) organization can check boxes for both the General Rule and a Special                                                                                                                                                                                                                                                                                                                              | al Rule. See                             |
| General Rule                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |
| _                                                                        | filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling property) from any one contributor. Complete Parts I and II. See instructions for defortributions                                                                                                                                                                                                                                                                                       |                                          |
| Special Rules                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                          |
| regulations under se<br>13, 16a, or 16b, and                             | described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> /3% supportions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of the great the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1 Complete                                                                                                                  | Z), Part II, line<br>eater of <b>(1)</b> |
| contributor, during th                                                   | described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from e year, total contributions of more than \$1,000 exclusively for religious, charitable, so all purposes, or for the prevention of cruelty to children or animals. Complete Parts I,                                                                                                                                                                                                     | cientific,                               |
| contributor, during th<br>contributions totaled<br>during the year for a | described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from the year, contributions exclusively for religious, charitable, etc., purposes, but no such more than \$1,000. If this box is checked, enter here the total contributions that were nexclusively religious, charitable, etc., purpose. Don't complete any of the parts unless to this organization because it received nonexclusively religious, charitable, etc., core during the year. | received<br>ess the                      |
| 990-EZ, or 990-PF), but it m                                             | at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule E<br>ust answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its<br>to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-E                                                                                                                                                                                                         | Form 990-EZ or on its                    |

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200 2

Name of organization

Employer identification number 83–1739301

83-1739301 IBEX Foundation Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 Total contributions Type of contribution 1 Florian Solzbacher Person 1063 Oak Hills Way **Payroll** 450,000 Noncash Salt Lake City UT 84108 (Complete Part II for noncash contributions) (d) (a) (b) (c) **Total contributions** Type of contribution No. Name, address, and ZIP + 4 2 Marcus Gerhardt Person 630 Komas Drive Payroll \$ 150,000 Noncash Salt Lake City UT 84108 (Complete Part II for noncash contributions.) (b) (c) (d) (a) Type of contribution Name, address, and ZIP + 4 **Total contributions** No. Person **Payroll** \$ Noncash (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution Person **Payroll** \$ Noncash (Complete Part II for noncash contributions) (a) (c) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** Person **Payroll** Noncash \$ (Complete Part II for noncash contributions) (c) (d) (a) (b) Type of contribution Name, address, and ZIP + 4 Total contributions No. Person **Payroll** \$ Noncash (Complete Part II for noncash contributions)

| Part II | Noncash Property (see instructions). Use duplication | e copies of Part II if additional space is needed. |  |  |
|---------|------------------------------------------------------|----------------------------------------------------|--|--|
| (a) No  |                                                      | (6)                                                |  |  |

| (a) No.<br>from<br>Part I | (b)  Description of noncash property given |          | (c) FMV (or estimate) (See instructions.) | (d)<br>Date received |
|---------------------------|--------------------------------------------|----------|-------------------------------------------|----------------------|
| 1                         | Blackrock Microsystems Stock               |          |                                           |                      |
|                           |                                            | \$       | 450,000                                   | 12/29/17             |
| (a) No.<br>from<br>Part I | (b)  Description of noncash property given |          | (c) FMV (or estimate) (See instructions.) | (d)<br>Date received |
| 2                         | Blackrock Microsystems Stock               |          |                                           |                      |
|                           |                                            | \$       | 150,000                                   | 12/29/17             |
| (a) No.<br>from<br>Part I | (b)  Description of noncash property given |          | (c) FMV (or estimate) (See instructions.) | (d)<br>Date received |
|                           |                                            |          |                                           |                      |
|                           |                                            | \$       |                                           |                      |
| (a) No.<br>from<br>Part I | (b)  Description of noncash property given | <u> </u> | (c) FMV (or estimate) (See instructions.) | (d) Date received    |
|                           |                                            | \$       |                                           |                      |
| (a) No.                   |                                            |          | (c)                                       |                      |
| from<br>Part I            | (b)  Description of noncash property given |          | FMV (or estimate) (See instructions.)     | (d) Date received    |
|                           |                                            |          |                                           |                      |
|                           |                                            | \$       |                                           |                      |
| (a) No.<br>from<br>Part I | (b)  Description of noncash property given |          | (c) FMV (or estimate) (See instructions.) | (d)<br>Date received |
|                           |                                            |          |                                           |                      |
|                           |                                            | \$       |                                           |                      |

12/28/2018 600,000 600,000 Fair Market Value Basis of Valuation Market Statement 1 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments 600,000 600,000 End of Year **Federal Statements** Beginning of Year Description Blackrock Microsystems 09043 IBEX Foundation FYE: 12/31/2017 83-1739301 Total