											20012	
Form	99	0	Return	of Ore	anization	Exemi	ot Fro	m Inco	me T	ах	OMB No 15	45-0047
1 0111			Under section 501(c)	_		_					201	17
_					l security numbe					•	Open to	Public
Interr	rtment of the	he Treasury e Service	► Go to w	vww.irs.g	ov/Form990 for	instruction	ns and the	e latest info	rmation.	\mathcal{M}	Inspec	tion
Α	For the 2		idar year, or tax year b			1	, 2017, ar	nd ending	Septe	mber 30	, 20 18	
В	Check if a	pplicable	C Name of organization St	<u>undt Four</u>	ndation					D Employe	r identification n	umber
	Address c	Ť	Doing business as	0							86-0935586	
	Name cha	· 1	Number and street (or P	O box if m	all is not delivered t	o street addr	ress)	Room/suite		E Telephone		
_	Initial retui		2015 W. River Road City or town, state or pro-	WINCE COLI	atry and 7IP or fore	ugn postal co	odo	Suite 1	01		<u>520-750-4673</u>	
$\overline{}$	rinai returit Amended	/terminated	Tucson AZ 85704	viiioc, 000i	itty, and zir or lore	ngii postai co	Jue			G Gross red	cointe ¢	665,50
		-	F Name and address of prin	ncipal offic	er Nicole Calar	maio		T,	l(a) is this a		ubordinates? Yes	
			Same as C above					<i>a</i> 1			included? Tyes	
	Tax-exem	pt status	✓ 501(c)(3)	501(c) () ◀ (insert r	10) 🗌 4947	(a)(1) or	527)			list (see instruction	
	Website:		.sundt.com/sundt-four	ndation			1.		H(c) Grou	p exemption r	number ►	
			Corporation Trust	Associa	tion		L Year	of formation	1998	M State o	of legal domicile	ΑZ
Pá	art I	Summa				- 6 1			•••			
0			scribe the organizatio									ations
Activities & Governance			or exemption under se s, Inc. and it's subsidia									
ern	2	Check this	s box ▶☐ if the orga	nization	discontinued its	s operation	ns or dis	posed of m	ore tha	n 25% of it	ts net assets.	
300			f voting members of							. 3	io not acceto.	
8			f independent voting	_			•	line 1b) .		. 4		
ties	5 7	Fotal num	ber of individuals em	ıployed ıı	n calendar year	2017 (Par	rt V, line	2a)		. 5		
ctivi			ber of volunteers (est				RF	CEIVE	ח	. 6		
¥			lated business reven				12	OLIVE.	7	7a		
_	<u> b ۱</u>	vet unrela	ted business taxable	ncome	from Form 990		JUL	0 3 201	ر) Prior	7b	Current Y	
	8 (Contributi	ons and grants (Part	VIII line	1h)	6	300	. 0 0 201.	3 mag		Current	
une			service revenue (Part		•		06	DEN. U		0		664,10
Revenue			nt income (Part VIII, co			_{d 7d)} 📙		DEN, U	+	690		1,40
Œ			enue (Part VIII, colum	-	-	•	11e) .			0		.,
			nue—add lines 8 thro				n (A), line	e 12)		744,374		665,50
			d simılar amounts pa			•				741,438		656,28
			aid to or for member			•				0		
ses			ther compensation, er		•	•	•	⁻¹⁰⁾		0		
Expens			nal fundraising fees (F Iraising expenses (Pa	=	· · ·	•		.		0		
X			enses (Part IX, colum		• • •	·				0	-	
			enses Add lines 13-1				, line 25)		_	741,438		656,28
		•	ess expenses. Subtra		•		-			22,702		9,22
ces								Begin	ning of C	urrent Year	End of Ye	ear
Net Assets or Fund Balances			ets (Part X, line 16)							164,182		173,40
ad A			lities (Part X, line 26)							0		
_	22 N		s or fund balances. Sure Block	ubtract I	ine 21 from line	20				164,182		173,40
			y, I declare that I have exam	nined this i	return including acc		echodulos	and statement	e and to	the best of m	v knowledge, and	t bolief it i
			te Declaration of preparer								y knowledge and	o beller, it is
	$\overline{}$	V	oun de R.	11					Т	10/21	119	
Sig	n	Signat	ture of officer	····		_			D	ate	• • •	
Hei	e	\	CFO				- · · · · · · · · · · · · · · · · · · ·				_	
			or print name and title									
Pai	d	Print/Typ	e preparer's name		Preparer's signatu	re		Date		Check		
	parer									self-emple	oyed	
Us	e Only	Firm's na	me ►						Fin	m's EIN ▶		

May the IRS discuss this return with the preparer shown above? (see instructions)

For Paperwork Reduction Act Notice, see the separate instructions.

928 13

Yes No
Form 990 (2017)

Cat No 11282Y

Form 99	0 (2017) Page 2
Part	
1	Check if Schedule O contains a response or note to any line in this Part III
•	To provide gifts, grants or loans to organizations qualified for exemption under section 501(c)(3) of the Internal Revenue Code and to
	provide the employees of The Sundt Companies, Inc. and it's subsidiaries, or others, the satisfaction of charitable giving to selected
	charitable organizations.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
_	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	services?
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others the total expenses, and revenue, if any, for each program service reported
	(Code:) (Expenses \$ 373,507 including grants of \$ 373,507) (Revenue \$)
	Grants were provided to various charitable organizations that address children's issues in communities where employees of The
	Sundt Companies, Inc. live and work.
4b	(Code:) (Expenses \$ 185,421 including grants of \$ 185,421) (Revenue \$)
	Grants were provided to various charitable organizations that work to improve communities where employees of The Sundt
	Companies, Inc. live and work
	·····
4c	(Code.) (Expenses \$ 97,357 including grants of \$ 97,357) (Revenue \$)
	Various fundraising activities resulted in grants to the ALS Association and the Muscular Dystrophy Association for ALS research.
	······
	Other program convect (December & Schodule O.)
4d	Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)
4e	Total program service expenses ► 656,285



orm 99	90 (2017)	ント		Page 🕄
Part	IV Checklist of Required Schedules			
4	In the case of an element of product of the control		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	1	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	1	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i>	3		1
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		√
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		1
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		1
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	-	1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes,"</i> complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		1
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		1
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		✓
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		√
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>	11d		1
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions'under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		1
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		1
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		\
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		✓
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		√
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		✓
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		·
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII. lines 1c and 8a? If "Yes." complete Schedule G. Part II.	18	1	

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III

Form 99	0 (2017)		F	age 4
Part	V Checklist of Required Schedules (continued)			
			Yes	No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		✓
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	20b		
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	✓	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	00		,
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	22		✓
20	organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		1
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b			,
•	through 24d and complete Schedule K. If "No," go to line 25a	24a		✓
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24b 24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		1
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		✓
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		✓
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		✓
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		✓
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		→
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		√
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		√
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,	30		
32	Part I	31		✓
22	complete Schedule N, Part II	32		✓_
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		✓
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		✓
35a b	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
36	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable	35b		
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		✓
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	√	

Check if Schedule O contains a response or note to any line in this Part V 1a Enter the number reported in Box 3 of Form 1096. Enter -0 - if not applicable 1a 1a 0 0 1b Enter the number of Forms W-20 included in her 1a. Enter -0 - if not applicable 1b 0 1c Dd the organization comply with backup withholding rules for reportable payments to vendors and reportable garmen garmbling by minings to prize wirner. In the payments of vendors and reportable garmen garmbling by minings to prize wirner. In the payments to vendors and reportable garmen garmbling with packup withholding rules for reportable payments to vendors and reportable garmen garmbling garmbling with packup withholding rules for reportable payments to vendors and reportable garmen garmbling garmbling with packup withholding rules for reportable garmen garmbling garmb					490
18 Enter the number reported in Box 3 of Form 1096 Enter -0 -fi not applicable 1	Part				
table Enter the number reported in Box 3 of Form 1006 Enter -0- if not applicable 1a 0 1b 0 0 0 0 0 0 0 0 0		Check if Schedule O contains a response or note to any line in this Part V	<u> </u>		
b Enter the number of Forms W-2G included in line 1a. Enter-0- if not applicable. c Dd the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this returns? b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1 and 2a is greater than 250, your may be required to e-file (see instructions) 3b Dd the organization have unrelated business gross income of \$1,000 or more during the year? 3a Diff Yes, Thas If ited a Form 990-1 for the year? If 'No' is line 3b, provide an explanation in Schedule O 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country; such as a bank account, securities account, or other financial account in a foreign country; less than a bank account, securities account, or other financial accounts [FBAR]. 5a Was the organization a party to a prohibited tax sheller transaction? 5b If 'Yes, 'anter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts [FBAR]. 5b Was the organization aparty to a prohibited tax sheller transaction? 6c If 'Yes,' did the organization that It was or as party to a prohibited tax sheller transaction? 7c If 'Yes,' did the organization that It was or as a party to a prohibited tax sheller transaction? 7d Do dany travable party notify the organization that It was or as a party to a prohibited tax sheller transaction? 8b If 'Yes,' did the organization intered the very solicitation an express statement that such contributions or gists were not tax deduction? 9c Do the organization shelp and the very solicitation an express statement tha				Yes	No
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners? 2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? 1b of the organization have unrelated business gross income of \$1,000 or more during the year? 2b Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule 0 3b A tary time during the calendar year, did the organization have an interest, or a signature or other authority over, a financial account in a foreign country; be seen instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5b See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5c Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 6 If "Yes" to line 5 aor 5b, did the organization the form 8886-T. 7 Organizations shall may receive deductible contributions under section 170(c). 8 Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 9 Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 1b If "Yes," indicate the number of Forms 8282 filed during the year 1c Did the organization feeders on any funds, directly or indirectly, to pay premiums on a personal benefit contract? 1b Did the organization receive an contribution of qualified millectual property, did the organization file and contributions under section 4966?	1a	'''			
a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return of at iteration is at iteration of the terms of the sum of lines is and 2 as ingreater than 250, you may be required to e-file (see instructions). 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3b If "Yes," has if filed a Form 990-T for this year? If "No" to file mesh, provide an explanation in Schedule 0. 4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country; such as a bank account, securities account, or other financial accounts (FAA). 5b If "Yes," either the name of the foreign country: > 5ce Instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FAA). 5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5b Id any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5i If "Yes," did the organization here or masses 175. 5a Uses the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? 5b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). 8 b If "Yes," did the organization notify the donor of the value of the goods or services provided? 7 Organizations that may receive deductible contributions under section 170(c). 8 b If "Yes," did the organization file promesess of stargible personal property for which it was required to f	b	· · · · · · · · · · · · · · · · · · ·			
2a Enter the number of employees reported on Form W-3. Transmittal of Wage and Tax Statements, field for the celendar year ending with or within the year covered by this return b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions). 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 5a Har Yes, "has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule 0 4a At any time during the celendary year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country; by the see instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5b Ese instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5c Boes the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5c Did any taxable party notify the organization tile Form 8886-1? 5c Did the organization are very animal gross recepts that are normally greater than \$100,000, and did the organization should any earning algosist services provided to the payor? 5d Did the organization state any receive deductible contributions under section 170(c). 5d Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 5d Did the organization receive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the payor? 5d Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 6d Did the organization received a contribution of care, boats, any party as a contribution and party for which it was required to file Form 8282? 6d If "Yes," indicate the n	С				
Statements, filed for the calendar year ending with or within the year covered by this return 2 0 b if at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1 a and 2 a is greater than 250, you may be required to e-file (see instructions) . 3a of the organization have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule 0 . 3b if "Yes," has it filed a Form 101 for this year, did the organization have an interest in, or a signature or other authority over, a financial account, and in a foreign country (such as a bank account, are count, or other financial account)? If "Yes," enter the name of the foreign country: See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? If "Yes is to line 5a or 5b, did the organization that was or is a party to a prohibited tax shelter transaction? If "Yes," did the organization hie Form 8888-T? Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? If "Yes," did the organization in the Yes of the globe should be a contribution of the year of the organization received a contribution of personal benefit contract? If yes," did the organization is contributed to the year of the organization file a form 1094 or year year year year year year year yea			1c		
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b If "Yes," did the organization notify the donor of the value of the goods or services provided?	а				
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? f If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did the sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 b Did the sponsoring organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11a	_		_		
required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? To the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organizations maintaining donor advised funds. Did the sponsoring organizations maintaining donor advised funds. Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross income from members or shareholders. Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the year Section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Liab Did the organization receive any payments for indoor tanning services during the tax year?			7b	✓	
d if "Yes," indicate the number of Forms 8282 filed during the year	С		l _		,
Pid the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? In the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Did the sponsoring organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? The section 501(c)(29) qualified nonprofit health insurance issuers. Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand Did the organization receive any payments for indoor tanning services during the tax year? 14a Did the organization receive any payments for indoor tanning services during the tax year?		·	/c		✓
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9 Sponsoring organizations maintaining donor advised funds. a Did the sponsoring organization make any taxable distributions under section 4966?	0		┈		
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b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter: Initiation fees and capital contributions included on Part VIII, line 12				<u> </u>	
10 Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12	_				
a Initiation fees and capital contributions included on Part VIII, line 12			30		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b		1 1			
Section 501(c)(12) organizations. Enter: a Gross income from members or shareholders	_		ł		
a Gross income from members or shareholders	_	•	ł		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O. b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand 13b 13c 14a Did the organization receive any payments for indoor tanning services during the tax year? 14a					:
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13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state?	_		 -		
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b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	-				
the organization is licensed to issue qualified health plans	b				
c Enter the amount of reserves on hand		and the state of t			
14a Did the organization receive any payments for indoor tanning services during the tax year?	С		1		
· · · · · · · · · · · · · · · · · · ·			14a		1
	_	· · · · · · · · · · · · · · · · · · ·			

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	See ins	struct	ions.
Secti	on A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year . If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b 2	Enter the number of voting members included in line 1a, above, who are independent . 1b 12 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2	1	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? .	3		1
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		1
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		V
6	Did the organization have members or stockholders?	6	✓_	<u> </u>
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	_7a	1	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	✓	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	✓_	
ь 9	Each committee with authority to act on behalf of the governing body?	8b	✓	-
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		✓
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Reven	ue C	ode.) Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	√	NO
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	√	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	<u> </u>	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a b	Did the organization have a written conflict of interest policy? <i>If "No," go to line 13 </i>	12a 12b	√	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	1	
13	Did the organization have a written whistleblower policy?	13	✓	
14 15	Did the organization have a written document retention and destruction policy?	14	✓	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			ļ
a	The organization's CEO, Executive Director, or top management official	15a		
b	Other officers or key employees of the organization	15b		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its	Ioa		✓
J	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
Secti	on C. Disclosure	1.00		<u> </u>
17	List the states with which a copy of this Form 990 is required to be filed ▶ Arizona			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section available for public inspection. Indicate how you made these available. Check all that apply.	า 501(c)(3)s	only
19	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O) Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year	erest	policy	, and
20	State the name, address, and telephone number of the person who possesses the organization's books and re Lisette G. Guevara 2015 W. River Road, Suite 101 Tucson AZ 85704 520-750-4673	cords	>	

Form 99	0 (2	01	7	
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Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Cł	eck if Schedule O contains a response or note to any line in this Part VII					_					Г	٦
	to the transfer of the transfe	•	•	•	•	 •	•	•	-		L	_

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order. individual trustees or directors; institutional trustees, officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization no	r any relate	d org	anız	atic	n c	ompe	nsa	ited any currer	nt officer, director	r, or trustee.
				(6	C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and Title	Average					than o		Reportable	Reportable	Estimated
viamo ano via	hours per					or/trust		compensation	compensation from	amount of
	week (list any	ı	Ι.		_			from	related	other
	hours for related	호호	stit	Officer	ey	g	Former	the organization	organizations (W-2/1099-MISC)	compensation from the
	organizations	Individual trustee or director	Institutional trustee	Q	Key employee	est o	亞	(W-2/1099-MISC)		organization
	below dotted	의 불	nal		οŞ	[®] 9		ľ		and related
	line)	l ist	Tr.		8	Pen				organizations
		ř.	tee			Highest compensated employee				
-						ă				
(1) Andrew Apostolik	2									
President				1				ا ا	0	0
(2) Randall Rusing	1									
Director		✓			l			o	o	0
(3) Victoria Trebian	1									
Director		✓						0	o	0
(4) Edward Segovia	1									
Director		✓						0	О	0
(5) Robert Stokes	1									
Director		✓						0	0	0
(6) Terri Pasley	11									
Director		✓	Ш					0	0	0
(7) Joseph Riccillo	11	_								
Director		✓						0	0	0
(8) Elizabeth Harvey	11									
Director		✓	Щ					0	0	0
(9) Mike Hoover	11									
Director		✓						0	0	0
(10) Dan Haag	11									
Director		✓						0	0	0
(11) Nicole Calamaio	11									
Director		✓	Щ		<u> </u>			0	0	0
(12) Stefanie Teller	1									
Director		✓		L.				0	0	0
(13) Michelle Ashmore	22			١,						
Secretary				_	_			0	0	0
(14) Marian Enriquez	2			ارا						
Executive Director				✓	L			0	o	0

	90 (2017)								_				Pa	age 8
Part	VII Section A. Officers, Directors, Trust	tees, Key E	mploy	/ees			lighes	st C	ompensated E	mployees (cor	ntinue	ed)		
	(A) Name and title	(B) Average hours per	box i	unles	Pos neck ss pe	rson	e than o is both or/trust	n an	(D) Reportable compensation	(E) Reportable compensation from	om	Esti	(F) mated ount of	
		week (list any hours for related organizations below dotted line)		Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC	>)	comp fro orgai and	ther ensation m the nization related nizations	
(15)	Lisette Guevara	2		-	-			-			+			
Treasu	ırer				✓				0		0			0
(16)		<u></u>	-											
(17)														
(18)											1			
(19)											\top		-	
(20)					-						T			
(21)											+			
(22)														
(23)														
(24)			<u>-</u>											_
(25)											\dagger			
1b	Sub-total			L	<u>. </u>				0		0			
c	Total from continuation sheets to Part	•						•	0	•	0			0
<u>d</u>	Total (add lines 1b and 1c)						ahove	2) W	ho received m		<u>0</u>	of.		0
	reportable compensation from the organi		10 (1)		, 1130			., vv	0			<u> </u>		
3	Did the organization list any former of										ated		Yes	No
4	employee on line 1a? If "Yes," complete s											3	\vdash	✓
4	For any individual listed on line 1a, is the organization and related organizations individual	greater the	an \$1	50,	000	? //	f "Ye	s, "	complete Sch				-	
5	Did any person listed on line 1a receive of for services rendered to the organization?	r accrue co	ompei	nsat	tion	fror	m any	un un	related organiz			_		<u>√</u>
Section	on B. Independent Contractors	: 11 165, 0	יוקויוט.		301	eut	ne o i	OI S		· · · · ·	<u> </u>	5		✓
1	Complete this table for your five highest of compensation from the organization. Replyear.													x
	(A) Name and business add	ress							(B) Description of s	ervices	С	(C) Compens	ation	
								<u> </u>						
2	Total number of independent contracto	re (includir	na bu	t n	O† 1	ımı+	ed to		ince listed abo	ave) who				i
~	received more than \$100,000 of compens	•	_					, 111	iose listeu aut	JVE) WIIU				

Part	VIII			_		
		Check if Schedule O contains a response or note to				<u> </u>
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
nts nts	1a	Federated campaigns 1a				
Grants no unts	b	Membership dues 1b 3,700				
ts, (Am	С	Fundraising events 1c 97,357				
Gi∄	d	Related organizations 1d				
ns, Sim	е	Government grants (contributions) 1e				
rtio er (f	All other contributions, gifts, grants, and similar amounts not included above 1f 553 048				•
Contributions, Gifts, Grants and Other Similar Amounts		11 303,040	ł		! 	:
i b	g h	Noncash contributions included in lines 1a-1f \$ Total. Add lines 1a-1f				
	п	Business Code	664,105			
Program Service Revenue	2a				·	
Re	ь					
<u>.</u> 2	C			*.		
Şeι	d					
Ĕ	е					
ogue	f	All other program service revenue				
_ <u>₽</u> _	g	Total. Add lines 2a–2f ▶				
	3	Investment income (including dividends, interest,				
	_	and other similar amounts)	1,403			1,403
	4	Income from investment of tax-exempt bond proceeds ▶				
	5	Royalties		·		
	6a	Gross rents				
	b	Less: rental expenses				
	c	Rental income or (loss)				
	d	Net rental income or (loss)	·			
	7a	Gross amount from sales of (i) Securities (ii) Other		•		
		assets other than inventory				:
	b	Less cost or other basis				
		and sales expenses .	1			
	C	Gain or (loss)				
	d	Net gain or (loss)				
e	8a	Gross income from fundraising				j
_	- Oa	events (not including \$ 97,357				
Other Rever		of contributions reported on line 1c).				
<u> </u>		See Part IV, line 18 a 76,380				
ŧ	b	Less: direct expenses b 76,380				
0	С	Net income or (loss) from fundraising events . ▶	0			
	9a	Gross income from gaming activities.				
		See Part IV, line 19 a				
		Less direct expenses b	·			
	C	Net income or (loss) from gaming activities ▶			-	
	iva	Gross sales of inventory, less returns and allowances a				
	ь	Less. cost of goods sold b				
	0	Net income or (loss) from sales of inventory	· · · · · · · · · · · · · · · · · · ·			
		Miscellaneous Revenue Business Code				
	11a				·	
	b					
	c					
	d	All other revenue				
	е	Total. Add lines 11a–11d				1
	12	Total revenue. See instructions	665 500			1 402

Part IX	Statement	of Functiona	i Expenses

Sectio	n 501(c)(3) and 501(c)(4) organizations must con	nplete all columns. A	Il other organization	ns must complete co	olumn (A).
	Check if Schedule O contains a respon	se or note to any lir	ne in this Part IX		🗆
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	656,285			
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7 8	Other salaries and wages				
9 10	Other employee benefits				
11 a	Fees for services (non-employees): Management				
b C	Legal				
d e f	Lobbying				
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				
12 13	Advertising and promotion				
14	Information technology				
15	Royalties				
16	Occupancy				
17 18	Travel				
19	for any federal, state, or local public officials Conferences, conventions, and meetings.				
20 21	Interest				
22	Depreciation, depletion, and amortization .				
23 24	Insurance	ण र १५॥वस्तुः १११	,		т таряВ-10
а	Golf Fundraiser - Expenses				67,597
b	Fun Shoot Fundraiser - Expenses				8,783
С					
d					
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	656,285		<u> </u>	76,380
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here following SOP 98-2 (ASC 958-720)				

Form 990 (2017) Page **11** Part X **Balance Sheet** Check if Schedule O contains a response or note to any line in this Part X (B) End of year Beginning of year Cash—non-interest-bearing 1 92 (28,612)2 Savings and temporary cash investments 2 164.090 202,017 3 Pledges and grants receivable, net 3 4 4 0 Loans and other receivables from current and former officers, directors, 5 trustees, key employees, and highest compensated employees. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 7 8 Prepaid expenses and deferred charges . . . 9 9 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 10b **b** Less: accumulated depreciation 10c 11 Investments—publicly traded securities 11 12 Investments—other securities. See Part IV, line 11 12 13 13 Investments—program-related. See Part IV, line 11. 14 Intangible assets 14 Other assets. See Part IV, line 11 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) 164,182 16 173,405 17 17 18 18 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 Escrow or custodial account liability. Complete Part IV of Schedule D . 21 Loans and other payables to current and former officers, directors, Liabilities trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L. 22 23 23 Secured mortgages and notes payable to unrelated third parties . . . 24 Unsecured notes and loans payable to unrelated third parties . . . 24 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X 25 26 **Total liabilities.** Add lines 17 through 25 26 Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and Net Assets or Fund Balances complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 3,397 27 5,028 160 785 28 28 Temporarily restricted net assets . . .

Total liabilities and net assets/fund balances . .

complete lines 30 through 34.

30

31 32

33

Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and

Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds.

100,763	ì	100,377
	29	
	30	
	31	
	32	
164,182	33	173,405
164,182		173,405
		Form 990 (2017)

Page	1	2

					· ago	
Part						
	Check if Schedule O contains a response or note to any line in this Part XI	<u> </u>				
1	Total revenue (must equal Part VIII, column (A), line 12)	1			665,	508
2	Total expenses (must equal Part IX, column (A), line 25)	2			656,	285
3	Revenue less expenses Subtract line 2 from line 1	3			9,	223
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			164,	182
5	Net unrealized gains (losses) on investments	5				
6	Donated services and use of facilities	6	-			
7	Investment expenses	7				
8	Prior period adjustments	_8				
9	Other changes in net assets or fund balances (explain in Schedule O)	9				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10			<u>173,</u>	405
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
				Ye	s I	No
1	Accounting method used to prepare the Form 990: ☐ Cash ☐ Accrual ☐ Other	_	_ 1	ı		- 1
	If the organization changed its method of accounting from a prior year or checked "Other," ex	plaın ı	ın			
	Schedule O.			_ _	_	
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?			3 ✓		
	If "Yes," check a box below to indicate whether the financial statements for the year were com	oiled o	or			
	reviewed on a separate basis, consolidated basis, or both:					ı
	Separate basis Consolidated basis Both consolidated and separate basis		ļ		_	
b	Were the organization's financial statements audited by an independent accountant?		. 21)	,	<u>/_</u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	ed on	a			
	separate basis, consolidated basis, or both:				ŀ	
	Separate basis Consolidated basis Both consolidated and separate basis			_	_ _	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or		. 1	1		
	of the audit, review, or compilation of its financial statements and selection of an independent account			> ✓		
	If the organization changed either its oversight process or selection process during the tax year, ex	plain i	n	İ		- 1
	Schedule O.		<u></u> -	_ _	_ _	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth i	n		-	
	the Single Audit Act and OMB Circular A-133?		. 3	3		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under					
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits.	31			
			F	orm 9 9	90 (2	017)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Employer identification number

Sundt Foundation 86-0935586 Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box) 1 \(\subseteq \) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) ☐ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 ☐ An organization that normally receives: (1) more than 33½% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33½% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) d that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (i) Name of supported organization (III) Type of organization (iv) is the organization (v) Amount of monetary (vi) Amount of (described on lines 1-10 listed in your governing other support (see support (see document? above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E)

18

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) ▶ (a) 2013 **(b)** 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants") . . . 455,096 510,962 597,459 743.684 664,104 2,971,305 2 revenues levied for the organization's benefit and either paid to or expended on its behalf . . . The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3. . . . 455,096 510,962 597,459 743,684 664,104 2,971,305 5 The portion of total contributions by person (other than governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . 1,140,987 Public support. Subtract line 5 from line 4 1,830,318 Section B. Total Support (a) 2013 **(b)** 2014 (c) 2015 (d) 2016 (e) 2017 Calendar year (or fiscal year beginning in) (f) Total 7 Amounts from line 4 455,096 510,962 597,459 743,684 664,104 2,971,305 8 Gross income from interest, dividends. payments received on securities loans, rents, royalties, and income from similar sources . Net income from unrelated business activities, whether or not the business is regularly carried on 217 132 137 690 1,403 2,579 Other income. Do not include gain or 10 loss from the sale of capital assets (Explain in Part VI.) 11 Total support. Add lines 7 through 10 2,973,884 12 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage Public support percentage for 2017 (line 6, column (f) divided by line 11, column (f)) 14 14 Public support percentage from 2016 Schedule A, Part II, line 14 15 40.61 % 331/3% support test - 2017. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this b 331/3% support test - 2016. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test-2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Part	III Support Schedule for Organiza	ations Descr	ibed in Sect	ion 509(a)(2)			
	(Complete only if you checked the						nder Part II.
	If the organization fails to qualify	under the te	sts listed bel	ow, please co	omplete Part	II.)	
	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services performed, or facilities		ŀ				
	furnished in any activity that is related to the			1			
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
_	·				/	-	
5	The value of services or facilities furnished by a governmental unit to the						
	organization without charge			/			
	· ·						
6	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3						
'a	received from disqualified persons .						
				/			
b	Amounts included on lines 2 and 3 received from other than disqualified		,	/			
	persons that exceed the greater of \$5,000		/				
	or 1% of the amount on line 13 for the year		/				
_	Add lines 7a and 7b		 				
8	Public support. (Subtract line 7c from		 / 				
J	line 6.)		/			1	
Secti	on B. Total Support		/		<u>I</u>		
	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	(4) 2010/	(2) 23	(6) 25:0	(4) 2010	(0) 2011	(1) 10101
10a	Gross income from interest, dividends,						
	payments received on securities loans, rents,						
	royalties, and income from similar sources.						
b	Unrelated business taxable income (less	1			 '		
	section 511 taxes) from businesses						
	acquired after June 30, 1975 /				ļ		
С	Add lines 10a and 10b						
11	Net income from unrelated business						
• •	activities not included in line 10b, whether						
	or not the business is regularly carried on		}				
12	Other income Do not include gain or						
	loss from the sale of capital assets		1	}			
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for the	ne organizatioi	n's first, secon	d, third, fourth	, or fifth tax y	ear as a sectio	n 501(c)(3)
	organization, check this box and stop he	re					▶ 🗆
Secti	on C. Computation of Public Suppor	t Percentag	e	<u>.</u>			
15	Public support, percentage for 2017 (line	B, column (f) d	ivided by line 1	13, column (f))		15	%
16	Public support percentage from 2016 Scl	nedule A, Part	III, line 15 .		<u>.</u>	16	%
Secti	on D. Computation of Investment In	come Perce	ntage				
17	Investment income percentage for 2017 (lıne 10c, colur	nn (f) divided b	y line 13, colui	mn (f))	17	%
18	Investment income percentage from 2016	Schedule A,	Part III, line 17			18	%
19a	331/3%/support tests-2017. If the organ						
	17 is not more than 331/3%, check this box	and stop here	. The organizati	on qualifies as	a publicly supp	orted organizat	on . ▶ 🗌
b	331/3% support tests-2016. If the organiz						33 ¹ /3%, and
	line 18 is not more than 331/3%, check this	box and stop h	nere. The organ	ization qualifies	as a publicly s	supported organ	ization ▶ □
20	Private foundation. If the organization di	d not check a	box on line 14	, 19a, or 19b, o	check this box	and see instru	ctions ▶ □

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizatio

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)			
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer			
b	(b) and (c) below. Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3a 3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
С	despite being controlled or supervised by or in connection with its supported organizations. Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)	4b		
	purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a		<u> </u>
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		<u> </u>
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .			
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to	iva		
U	determine whether the organization had excess business holdings in the tax year? (Use Schedule C, Form 4720, to	10b		

Schedule	A /Earm	aan or	aan.	.F7\	2017

Page 5

Part	V Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	112		
b	A family member of a person described in (a) above?	11a 11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		_
	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			1
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.			
Coati	on C. Type II Supporting Organizations	2		<u> </u>
Secu	on C. Type if Supporting Organizations		Voc	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		163	140
·	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1		
Section	on D. All Type III Supporting Organizations		.	
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
'	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s)	_		
3	By reason of the relationship described in (2), did the organization's supported organizations have a	2		
3	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see it	nstru	ction	s).
а	☐ The organization satisfied the Activities Test. Complete line 2 below.			
b	☐ The organization is the parent of each of its supported organizations. Complete line 3 below.			
C	☐ The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	struct	ions)
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			1
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
h	•	Za		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			_
	activities but for the organization's involvement	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	zations		
1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI) See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.				
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)	
1 Net short-term capital gain	1			
2 Recoveries of prior-year distributions	2			
3 Other gross income (see instructions)	3			
4 Add lines 1 through 3.	4			
5 Depreciation and depletion	5			
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6			
7 Other expenses (see instructions)	7			
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8			
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)	
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):				
a Average monthly value of securities	1a			
b Average monthly cash balances	1b			
c Fair market value of other non-exempt-use assets	1c			
d Total (add lines 1a, 1b, and 1c)	1d			
e Discount claimed for blockage or other factors (explain in detail in Part VI):				
2 Acquisition indebtedness applicable to non-exempt-use assets	2			
3 Subtract line 2 from line 1d.	3			
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4			
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5			
6 Multiply line 5 by .035	6			
7 Recoveries of prior-year distributions	7			
8 Minimum Asset Amount (add line 7 to line 6)	8			
Section C - Distributable Amount			Current Year	
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1			
2 Enter 85% of line 1	2	·		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3			
4 Enter greater of line 2 or line 3.	4			
5 Income tax imposed in prior year	5			
6 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6			
 7 Check here if the current year is the organization's first as a non-functional instructions). 	y in	tegrated Type III support	ng organization (see	

Part) Supporting Organi	zations (continued)	
Secti	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish	exempt purposes		
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	rted	
	organizations, in excess of income from activity			
3_	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets	·		
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to whic (provide details in Part VI). See instructions.	h the organization is res	ponsive	
9	Distributable amount for 2017 from Section C, line 6	· · · · · · · · · · · · · · · · · · ·		
10	Line 8 amount divided by line 9 amount			
-10	Line o amount divided by line 3 amount		/::\	/:::\
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
С	From 2014			_
d	From 2015			
е	From 2016	_		
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2017 distributable amount			
<u>i</u>	Carryover from 2012 not applied (see instructions)			
i	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from Section D, line 7: \$			•
а	Applied to underdistributions of prior years			
<u>b</u>	Applied to 2017 distributable amount			
c	Remainder, Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if			
3	any. Subtract lines 3g and 4a from line 2. For result			
	greater than zero, explain in Part VI. See instructions.			}
6	Remaining underdistributions for 2017. Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain in			
	Part VI. See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j and 4c			
8	Breakdown of line 7:			
a	Excess from 2013			
b	Excess from 2014			Ì
С	Excess from 2015	_		
d	Excess from 2016		**	İ
е	Excess from 2017			

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)
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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for the latest instructions.

OMB No 1545-0047

Open to Public

Name o	of the organization					Employer identific	cation number
Sundt	Foundation						0935586
Par					vered "Yes" on Fo	orm 990, Part IV,	line 17.
	Form 990-EZ filers are n						
1	Indicate whether the organizatio	n raised funds f	through any	of the follo	owing activities. Ch	eck all that apply.	
а	☐ Mail solicitations		e [] Solicitat	on of non-governm	nent grants	
b	Internet and email solicitation	ns	f [] Solicitat	on of government	grants	
С	Phone solicitations		g □] Special i	fundraising events		
d	In-person solicitations						
2a	Did the organization have a writing						
	or key employees listed in Form	· ·	-		•	-	
b	If "Yes," list the 10 highest paid			draisers) pi	ursuant to agreeme	ents under which th	e fundraiser is to be
	compensated at least \$5,000 by	the organization	n				
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	custody o	draiser have or control of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
			Yes	No	 		
1				<u> </u>	1		1
•							
2							<u> </u>
3							
4					1		
5							
				ļ			
6							
7							
8			 	ļ			
0							
9					 		
•							
10						· · · · · · · · · · · · · · · · · · ·	
						`	
Total	<u> </u>			🕨			
3	List all states in which the orga	nization is regis	stered or lic	ensed to s	solicit contributions	or has been notifi-	ed it is exempt from
	registration or licensing.						
					•••••		
			- 				
							••••

_	edule G	than \$15,000 of fundraisir	ng event contributions			
_		gross receipts greater tha	(a) Event #1 Golf (Sacramento) (event type)	(b) Event #2 Fun Shoot (Irvine) (event type)	(c) Other events 6 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1	Gross receipts	50,200	27,700	95,837	173,737
c c	2	Less: Contributions . Gross income (line 1 minus line 2)	14,112 36 088	5,672		76,380
	4	Cash prizes	30 086	22 028	39.241	97,357
	5	Noncash prizes		· · · · · ·		
sesu	6	Rent/facility costs .				
Direct Expenses	7	Food and beverages				
Direc	8	Entertainment				
	9	Other direct expenses .	36,088	22,028	39,241	97,357
-	10 11	Direct expense summary. Ad Net income summary. Subtra	act line 10 from line 3, c	olumn (d)		97,357
	rt III	Gaming. Complete if the than \$15,000 on Form 99			o, Part IV, line 19, or	*
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
<u>~</u>	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Noncash prizes				
Direct	4	Rent/facility costs				
_	5	Other direct expenses .	☐ Yes %	□ Yes %	☐ Yes %	
	6	Volunteer labor	☐ Yes%	☐ Yes% ☐ No	☐ Yes%	
	7	Direct expense summary. Ad	d lines 2 through 5 in co	olumn (d)		
	8	Net gaming income summary	y. Subtract line 7 from li	ne 1, column (d)		
9	a Is		onduct gaming activities	s in each of these states	s?	
10		/ere any of the organization's g	amıng licenses revoked	, suspended, or termina		? . 🗌 Yes 🗌 No

Schedu	ele G (Form 990 or 990-EZ) 2017
11 12	Does the organization conduct gaming activities with nonmembers?
13	Indicate the percentage of gaming activity conducted in.
а	The organization's facility
b	An outside facility
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:
	Name ▶
	Address ▶
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$
С	If "Yes," enter name and address of the third party:
	Name ►
	Address ▶
16	Gaming manager information:
	Name ►
	Gaming manager compensation ▶ \$
	Description of services provided ►
	□ Director/officer □ Employee □ Independent contractor
17 a	Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.
	·
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SCHEDULEI (Form 990)

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

OMB No 1545-0047

Open to Public Inspection

	Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.)]
Contract of the Contract of Co	▶ Attach to Form 990.	Open t
Internal Revenue Service	▶ Go to www.irs.gov/Form990 for the latest information.	dsul
Name of the organization	Employer	Employer identification nu
Sundt Foundation		86-0935586

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and

Part | General Information on Grants and Assistance

· · · · · · · · · · · · · · · · · · ·		Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.	(g) Description of (h) Purpose of grant noncash assistance or assistance		ALS Research		Military Families		Leadership Development	Mentoring	-	Underprivileged Children		Youth Program-Pet Adopt		ALS Research							4	Schedule I (Form 990) (2017)
	tes.	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization ans 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed	(f) Method of valuation (g) Describook, FMV, appraisal, noncash a other)										· ·											Cat No 50055P
	nds in the United Sta	estic Governmen Part II can be dupl	(e) Amount of non-cash assistance (bot			•																	ne 1 table	Cat N
· · · · · · · · · ·	the use of grant fur	ations and Dom ore than \$5,000.	(d) Amount of cash grant		71,104		5,500		6,500	7.200		9'000		7,400		35,753							tions listed in the li	
or assistance?	res for monitoring	mestic Organiz that received me	(c) IRC section (if applicable)		501(c)(3)		501(c)(3)		501(c)(3)	501(c)(3)		501(c)(3)		501(c)(3)		501(c)(3)							vernment organiza	ns for Form 990.
award the grants	ization's procedu	s sistance to D o for any recipient	(b) EIN		13-3271855		52-6045308		95-1945908	23-1365190		13-5562976		81-1373513		13-1665552							1501(c)(3) and gov rganizations listed	see the Instruction
the selection criteria used to award the grants or assistance?	2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	Part II Grants and Other As 990, Part IV, line 21, f	1 (a) Name and address of organization or government	(1) ALS Association	1275 K Street NW Ste 250, Wash. DC	(2) American Gold Star Mothers	2128 Leroy PI NW, Washington DC	(3) Assistance League	3100 W Burbank, Burbank CA 91505	(4) Big Brothers Big Sisters 2202 N Westshore. Tampa FL 33607	(5) Boys and Girls Club of America	1275 Peachtree St NE, Atlanta GA	(6) Good Sense Dogs	4241 River Swan Ln, Sacramento CA	(7) Muscular Dystrophy Assoc.	222 W Riverside Plaza, Chicago IL	(8)	(6)	(17)	(61)	(11)	(12)	 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table Enter total number of other organizations listed in the line 1 table 	For Paperwork Reduction Act Notice, see the Instructions for Form

schedule I (F	Schedule I (Form 990) (2017)		-	-		Pa
Part III	Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.	nestic Individu space is needec	als. Complete if the 1.	organization answ	ered "Yes" on Form 990,	Part IV, line 22.
	(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
-						
2			•			
ო						
4						
ស	:					
9						
7						
Part IV	Supplemental Information. Provide the		equired in Part I, lin	e 2; Part III, columr	nformation required in Part I, line 2; Part III, column (b); and any other additional information.	onal information.
Form 990, 5	Form 990, Schedule I, Part I, Line 2: All organizations requesting a grant must submit a grant application along with a list of the organization's current board of directors and a copy of the	Jesting a grant mus	st submit a grant applic	cation along with a list	of the organization's current	board of directors and a copy of th
organizatio	organization's 501(c)(3) determination letter from the IRS. The grant application requires a detailed description of what the grant would be used for. The Sundt Foundation's executive	The grant applicat	ion requires a detailed	description of what the	grant would be used for. Th	e Sundt Foundation's executive

က

director reviews all applications for compliance with giving quidelines and IRS regulations. The application is then forwarded to committees comprised of employee members who decide fill out and return a grant follow-up form within one year after receiving funds or sooner if another grant is requested. On the follow-up form, the grantee must describe how the funds were to recommend or deny funding. The Board of Directors makes the final decision on funding any grants recommended by the committees. All organizations receiving grants are asked to used. The executive director reviews all follow-up forms to monitor the use of grants. Form (organi

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

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

Sundt Foundation	86-0935586
Form 990, Part VI, Section A, Line 2: All officers and directors of the Sundt Foundation are employees	of Sundt Construction, Inc. or it's
parent company, The Sundt Companies. Inc.	
Form 990, Part VI, Section A, Line 6: The Sundt Foundation has two catagories of membership: employ	ree membership and non-employee
membership. A Sundt employee becomes a member by contributing \$5 or more per year. Membership	entitles an employee to vote in
accordance with the bylaws and to hold elective office. A non-employee becomes a member by contrib	outing \$5 or more per year.
Non-employee members are non-voting members.	
Form 990, Part VI, Section A, Line 7a: The Board of Directors, consisting of at least nine members but n	ot more than fifteen members,
controls all activities of the Sundt Foundation. The Sundt Companies, Inc. appoints four directors. The	remaining directors are elected by
the membership, with one director serving from each of the principal geographic areas where Sundt ha	s an office or subsidiary company
and serving staggered three-year terms.	
Form 990, Part VI, Section A, Line 7b: Decisions by the Board of Directors are not subject to approval to	y members or other persons.
·	
Form 990, Part VI, Section B, Line 11b:The Form 990 is reviewed by members of the Board of Directors	and the CFO of The Sundt Companies.
·	
Form 990, Part VI, Section B, Line 12c: An annual letter is sent to all officers and directors requiring the	em to disclose any possible conflicts
of interest.	
	
Form 990, Part VI, Section C, Line 19: The Sundt Foundation makes it's governing documents, conflict	of interest policy, and financial
statements available to the public upon request.	••••

Name of the organization	Page Z
Sundt Foundation	Employer identification number
Sunat Foundation	86-0935586
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