DLN: 93493319198829 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 D Employer identification number B Check if applicable THE JEITO FOUNDATION □ Address change 41-2152824 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P O box if mail is not delivered to street address) Room/suite 1819 EAST SOUTHERN AVE NO B-10 ☐ Amended return ☐ Application pending (480) 505-9500 City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ 3,682,817 Name and address of principal officer H(a) Is this a group return for **DALE JONES** ☐Yes **☑**No subordinates? 1819 EAST SOUTHERN AVE NO B-10 H(b) Are all subordinates MESA, AZ 852045219 ☐Yes ☐No ıncluded? □ 527 **☑** 501(c)(3) **☐** 501(c)() **◄** (Insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► N/A L Year of formation 2004 M State of legal domicile AZ K Form of organization ☐ Corporation ☑ Trust ☐ Association ☐ Other ▶ Summary 1 Briefly describe the organization's mission or most significant activities SUPPORTED THE CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS Activities & Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2018 (Part V, line 2a) 5 **6** Total number of volunteers (estimate if necessary) 6 Total unrelated business revenue from Part VIII, column (C), line 12 7a -32,858 **b** Net unrelated business taxable income from Form 990-T, line 34 -2,096 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . Ravenua 0 0 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) -144,605 -643,858 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 16,294 -13,279 -128,311 -657,137 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 899,163 899,162 0 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 0 0 Expenses **16a** Professional fundraising fees (Part IX, column (A), line 11e) . . **b** Total fundraising expenses (Part IX, column (D), line 25) ▶0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 337,963 672,028 1,237,126 1,571,190 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . -1,365,437 -2,228,327 Net Assets or Fund Balances Beginning of Current Year End of Year 25,391,610 22,979,914 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 25,000 22 Net assets or fund balances Subtract line 21 from line 20 . 25,366,610 22,979,914 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sign Here DALE JONES TRUSTEE Type or print name and title Print/Type preparer's name Preparer's signature Check | If 2019-11-14 P00075126 Paid self-employed Firm's name ► EIDE BAILLY LLP Firm's EIN ► 45-0250958 Preparer Use Only Firm's address ► 1850 N CENTRAL AVE STE 400 Phone no (602) 264-5844 PHOENIX, AZ 850044624 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (2018)					Page 2
Pa	rt III Stateme	ent of Program Service	Accomplis	hments		
	Check if S	Schedule O contains a respon	se or note to	any line in this Part III .		🗆
1		he organization's mission		·		
					Y THROUGH GRANTS, THE CHURCI CALLY IDENTIFIED AFFILIATED OF	
2	Did the organizat	tion undertake any significan	t program ser	vices during the year whi	ch were not listed on	
	the prior Form 99	90 or 990-EZ?				☐ Yes ☑ No
	If "Yes," describe	these new services on Sche	dule O			
3	Did the organizat	tion cease conducting, or ma	ke significant	changes in how it conduc	ts, any program	
		these changes on Schedule				☐ Yes ☑ No
4	Describe the orga Section 501(c)(3	anızatıon's program service a	ccomplishmei	to report the amount of	rgest program services, as measu grants and allocations to others, tl	
4a	(Code) (Expenses \$	899.162	including grants of \$	899,162) (Revenue \$)
	See Additional Data	, , ,	,		,, (+	,
4b	(Code) (Expenses \$		including grants of \$) (Revenue \$	}
4c	(Code) (Expenses \$		including grants of \$) (Revenue \$)
4d	Other program se (Expenses \$	ervices (Describe in Schedule	e O) ding grants of	\$) (Revenue \$)
46	Total program	service expenses >	899.1	62		

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Pai	tiv Checklist of Required Schedules			
			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 2	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
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		No
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		No
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		No
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		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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		No
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 2	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
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	Yes	
	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		No
	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? If "Yes," complete Schedule D, Part IX 🕏	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e		No
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		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12a		No
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		No
13	Is the organization a school described in section $170(b)(1)(A)(II)$? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
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		No
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		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	16		No

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20a

20b

21

22

Yes

Nο

No

Nο

No

Nο

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or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

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

Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic

Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX,

17

18

19

21

orm	Part IV Checklist of Required Schedules (continued)							
Pa								
			Yes	No				
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No				
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		No				

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part Vi 🛸

Check if Schedule O contains a response or note to any line in this Part V .

Statements Regarding Other IRS Filings and Tax Compliance

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

24a		
24b		
24c	·	

24d

25a

25b

26

27

28a

28b

28c

29

30

31

32

33

34

35a

35b

36

37

38

5

0

1a

1b

Yes

Yes

Yes

Yes

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Nο Nο

Nο No

Nο

No

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

29

30

32

37

Part V

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

13b

13c

14a

14b

15

No

No

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Pai	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions	No" respo	onse to	lines					
	Check if Schedule O contains a response or note to any line in this Part VI	<u> </u>		✓					
Se	ection A. Governing Body and Management								
			Yes	No					
1a	a Enter the number of voting members of the governing body at the end of the tax year la	4							
	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	Enter the number of voting members included in line 1a, above, who are independent	1							
2		er 2		No					
3	Did the organization delegate control over management duties customarily performed by or under the direct superv of officers, directors or trustees, or key employees to a management company or other person? .	ision 3		No					
4	4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . 4								
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No					
6	Did the organization have members or stockholders?	6		No					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or members of the governing body?	ore 7a	Yes						
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		No					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year the following	by							
а	The governing body?	8a	Yes						
b	Each committee with authority to act on behalf of the governing body?	. 8b	Yes						
9	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? <i>If "Yes," provide the names and addresses in Schedule O</i>	9		No					
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Rev	enue Code	2.)						
			Yes	No					
	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?								
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing t form?	he 11a	Yes						
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990								
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes						
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise t conflicts?	12b		No					
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	12c	Yes						
13	Did the organization have a written whistleblower policy?	13	Yes						
14	Did the organization have a written document retention and destruction policy?	14	Yes						
15	Did the process for determining compensation of the following persons include a review and approval by independer persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	ıt 📗							
а	The organization's CEO, Executive Director, or top management official	15a		No					
b	Other officers or key employees of the organization	15b		No					
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)								
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		No					
Ь	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participat in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exemstatus with respect to such arrangements?								
Se	ection C. Disclosure								
17	List the States with which a copy of this Form 990 is required to be filed▶								
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply								
	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)								
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year								
20	State the name, address, and telephone number of the person who possesses the organization's books and records								

(A)

 $\overline{\mathbf{v}}$

(F)

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(E)

101111 220	(2010)
Part VII	Compe

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII .

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

- 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, or 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 nor any related organization compensated any current officer, director, or trustee

(C)

(D)

(B)

Name and Title	Average hours per week (list any hours for related organizations below dotted line)	Position of individual trustee ×	ne b	ox, ι in of tor/t	t che unle: ficer rust	ss pers	son	Reportable compensation from the organization (W- 2/1099-MISC)	Reportable compensation from related organizations (W- 2/1099- MISC)	Estimated amount of other compensation from the organization and related organizations
LENN MCKAY	0 10									
JSTEE		Х						0	0	0
DALE JONES JSTEE	0 10	Х						0	0	0
JOHN M BARGER USTEE	0 10	Х						0	0	0
						-				

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Part VII Section A. Officers, Dire	ctors, Trustees	s, Key	Emp	loye	es,	and I	High	nest Compensate	d Employees (co	ntinued)
(A) Name and Title	(B) Average hours per week (list any hours for related	than o	ne b	ox, u n off	t che inles ficer	and a	on	(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee		key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations

	4		at ed		

1b Sub-Total			*		

1b Sub-Total				•	▶ _			
c Total from continuation sheets to Pa	art VII , Section	Α			▶			
d Total (add lines 1b and 1s)					-	Λl	Δl	0

1b Sub-Total	-	 _	*		

1b Sub-Total				>			
c Total from continuation sheets to Pa	art VII , Section A	١		▶			
-						1	

Yes

3

4

5

(B)

Description of services

No

Nο

Nο

No

(C)

Compensation

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Total number of individuals (including but not limited to those listed above) who received more than \$100,000

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for

from the organization Report compensation for the calendar year ending with or within the organization's tax year

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such

services rendered to the organization? If "Yes," complete Schedule J for such person .

(A)

Name and business address

Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on

of reportable compensation from the organization ▶ 0

Section B. Independent Contractors

compensation from the organization ▶ 0

line 1a? If "Yes," complete Schedule J for such individual .

2

3

4

5

orm 9	90 (2018)							Page 9
Part								
	Check If Schedul	le O contains a r	esponse c	or note to any	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
s	1a Federated campaig	ns	La				1	
ants	b Membership dues	:	lb					
ons, Gifts, Grants Similar Amounts	c Fundraising events	[:	lc					
fts,	d Related organizatio	ons :	ld					
i5 <u>i</u> E	e Government grants (co	ontributions)	le					
Sir	f All other contributions, and similar amounts n	ot included	_					
tributio Other	above		1f					
돌	g Noncash contribution in lines 1a - 1f \$	ons included						
Contributions, Gifts, Grants and Other Similar Amounts	h Total. Add lines 1a	-1f	- 	. •				
				Business	Code			
אושי	2a							
Ę.	b —							
e Ce	_							
ξer	d ————————————————————————————————————							
me (е ———							
Program Service Revenue	f All other program se	rvice revenue			I	I	I	
<u>\$</u>	9Total. Add lines 2a-2	2f	>		-			
	3 Investment income (ii similar amounts) .	ncluding dividen		st, and other	321,50	9		321,509
	4 Income from investme			roceeds >				
	5 Royalties			. •		5		5
	C. Curre weeks	(ı) Real	(1	ı) Personal	1			
	6a Gross rents	18	,152					
	b Less rental expenses		0		1			
	c Rental income or	18	152		-			
	(loss)							
	d Net rental income o	(i) Securities		(II) Other	18,15	2		18,152
	7a Gross amount				1			
	from sales of assets other	245	,309	3,129,278	3			
	than inventory]			
	b Less cost or other basis and	226	,858	4,113,096	5			
	sales expenses C Gain or (loss)	18	451	-983,818	3			
	d Net gain or (loss) .			•	-965,36	7		-965,367
	8a Gross income from f		s	<u> </u>				
Revenue	(not including \$ contributions reporte	of ed on line 1c)						
.ve	See Part IV, line 18		a [
Ä	b Less direct expense		b]			
Other	c Net income or (loss) 9a Gross income from g		events	· · •	1			
ō	See Part IV, line 19							
	b l durat aumana	_	a		-			
	b Less direct expensec Net income or (loss)		b tivities .		J			
	10aGross sales of invent							
	returns and allowand	ces	a					
	b Less cost of goods s	sold	в b		+			
	c Net income or (loss)			•	1			
	Miscellaneous			siness Code				
	11a _{TAX} REFUND			900099	1,42	2		1,422
	b SOLAMERE CAPITAL	FUND II LP 46-	25	900099	59	9	599	
	C LOBO PARTNERS, LL	_C 20-3580871		900099	-11,14	9	-11,149	
	A All Comments							
	d All other revenue . e Total. Add lines 11a				-22,30	8	-22,308	
			• •		-31,43	6		
	12 Total revenue. See	instructions .		· · •	-657,13	7	0 -32,858	
								Form 990 (2018)

Part IV, line 22

4 Benefits paid to or for members

section 4958(c)(3)(B) . 7 Other salaries and wages

9 Other employee benefits . 10 Payroll taxes . . .

a Management . . .

b Legal

c Accounting .

11 Fees for services (non-employees)

d Lobbying

12 Advertising and promotion 13 Office expenses .

14 Information technology .

21 Payments to affiliates . . .

expenses on Schedule O)

c TAXES, LICENSES, FEES

b PROPERTY TAX

e All other expenses

d

a FLOW THROUGH INVESTMENT

22 Depreciation, depletion, and amortization .

15 Royalties . 16 Occupancy . **17** Travel .

20 Interest . .

23 Insurance .

and 16

1 Grants and other assistance to domestic organizations and

2 Grants and other assistance to domestic individuals See

3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15

5 Compensation of current officers, directors, trustees, and

6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in

8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions) . . .

.

e Professional fundraising services See Part IV, line 17

(A) amount, list line 11g expenses on Schedule O)

18 Payments of travel or entertainment expenses for any federal, state, or local public officials . 19 Conferences, conventions, and meetings

24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e

25 Total functional expenses. Add lines 1 through 24e 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 ▶ ☐ If following SOP 98-2 (ASC 958-720)

q Other (If line 11g amount exceeds 10% of line 25, column

f Investment management fees

domestic governments See Part IV, line 21

Part IX	S	tat	eme	nt of	Functio	nal Expen	ses				
Section 5	501(c)((3) a	and 50	01(c)(1) organız	ations must	comple	te all	columns	ΑII	other organizations must complete column (A)
	-										B . 117

	1	D\	(C)		
Check if Schedule O contains a response or note to any line in this	Part IX				
Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns $$ All $$	other organizations	must com	plete column	(A)	

(A)

Program service (D) Management and

899,162

97,223

13,530

14,500

379.136

30.015

130

56,590

60,502

19,572

830

1,571,190

899,162

899,162

97,223

13,530

14,500

379,136

30,015

130

56,590

60,502

19,572

672,028

Form **990** (2018)

830

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. Total expenses Fundraisingexpenses general expenses expenses

Page **11**

20

21

22 23

24

25

26

27 28

29

30

31 32

33

34

0

22.979.914

22,979,914

22,979,914

Form **990** (2018)

25.000

25.000

25.366.610

25,366,610

25,391,610

Form 990 (2018)

20

21

23

24

26

27

28

29

30

31

32

33

34

Liabilities 22

Assets or Fund Balances

Net

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

and other liabilities not included on lines 17 - 24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34.

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

Total liabilities. Add lines 17 through 25 .

Escrow or custodial account liability Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here 🕨 🗹 and

1 Cash-non-interest-bearing	6,611,004	1	7,610,994
2 Savings and temporary cash investments	553,254	2	504,912
3 Pledges and grants receivable, net		3	
4 Accounts receivable, net		4	
5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
6 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)		6	

	6	Loans and other receivables from other disquali section 4958(f)(1)), persons described in sectio contributing employers and sponsoring organizations voluntary employees' beneficiary organizations Part II of Schedule L	s(c)(3)(B), and of section 501(c)(9) structions) Complete		6		
Assets	7	Notes and loans receivable, net				7	396,200
SS	8	Inventories for sale or use		8			
٨	9	Prepaid expenses and deferred charges	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	7,679,850			
	b	Less accumulated depreciation 10b			11,594,242	10c	7,679,850
	11	Investments—publicly traded securities .		11			
	12	Investments—other securities See Part IV, line	6,633,110	12	6,787,958		

യ	ı <i>'</i>	Notes and loans receivable, net			ľ	•	030,200
88	8	Inventories for sale or use				8	
A	9	Prepaid expenses and deferred charges		9			
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	7,679,850			
	ь	Less accumulated depreciation	10 b		11,594,242	10 c	7,679,850
	11	Investments—publicly traded securities .		11			
	12	Investments—other securities See Part IV, line	11 .		6,633,110	12	6,787,958
	13	Investments—program-related See Part IV, line	e 11 .	•		13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11		15			
	16	Total assets.Add lines 1 through 15 (must equ	25,391,610	16	22,979,914		
	17	Accounts payable and accrued expenses		17			
	4.0	Complete					

	basis complete i ait vi oi schedule b				
Ь	Less accumulated depreciation	10b	11,594,242	10 c	7,679,850
11	Investments—publicly traded securities .			11	
12	Investments—other securities See Part IV, line	6,633,110	12	6,787,958	
13	Investments—program-related See Part IV, line		13		
14	Intangible assets		14		
15	Other assets See Part IV, line 11			15	
16	Total assets.Add lines 1 through 15 (must equ	al line 34)	25,391,610	16	22,979,914
17	Accounts payable and accrued expenses			17	
18	Grants payable			18	
19	Deferred revenue		19		

3a

3b

No

Form 990 (2018)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Audit Act and OMB Circular A-133?

Additional Data

Software ID: Software Version:

EIN: 41-2152824

Name: THE JEITO FOUNDATION

Form 990 (2018)

THE JEITO FOUNDATION PROVIDED A \$899.162 GRANT TO SUPPORT AND BENEFIT THE CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS

Form 990, Part III, Line 4a:

efile GRAPHIC print - DO NOT PROCESS					As Filed Data -			DLN: 9:	3493319198829
SCI	ΗED	ULE A		Public (Charity Statu	e and Dul	olic Supp	ort	OMB No 1545-0047
	m 990		Com		rganization is a sect 4947(a)(1) nonexe ► Attach to Form	ion 501(c)(3) o empt charitable	organization o		2018
•		the Treasury		► Go to	www.irs.gov/Form	990 for the late	st information	•	Open to Public Inspection
Nam	e of th	ne organiza DUNDATION	tion					Employer identific	ation number
								41-2152824	
Pa Thoro					us (All organization it is (For lines 1 thro			See instructions.	
1			•		sociation of churches	•		(A)(i)	
2		•		,	1)(A)(ii). (Attach Sch				
3					vice organization desc	,	, ,		
4		·	•	·	-). 170(b)(1)(A)(iii). Е	nter the hospital's
•	Ш	name, city,		mzation operate	ed in conjunction with	a nospital descri	bed iii section .	170(D)(1)(A)(III). L	Titel the hospital's
5			ition operated [iv]. (Comple		t of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6				•	governmental unit de	scribed in sectio	on 170(b)(1)(<i>A</i>	\)(v).	
7				mally receives a [vi). (Complete		s support from a	governmental u	init or from the genera	al public described in
8		A communi	ty trust descr	ibed in section	170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in 170(b)(1) ee instructions Enter			with a land-grant coll college or university	ege or university or a
10		from activit	ies related to income and i	its éxempt fun inrelated busin	ctions—subject to cer	taın exceptions, a	and (2) no more	ns, membership fees, than 331/3% of its su sses acquired by the c	
11		An organiza	ition organize	d and operated	exclusively to test fo	r public safety S	ee section 509	(a)(4).	
12	✓	more public	ly supported	organizations o		09(a)(1) or sec	ction 509(a)(2	s of, or to carry out th). See section 509(a s 12e, 12f, and 12g	
a	✓	Type I. A s organizatio	upporting org n(s) the powe	ganızatıon opera	ated, supervised, or co	ontrolled by its s	upported organi	zation(s), typically by of the supporting orga	
b		manageme	nt of the supp		ation vested in the sar			organization(s), by ha ge the supported orga	
С		Type III f	inctionally i	ntegrated. A s				nd functionally integra	ted with, its
d		Type III n	on-function integrated	ally integrated The organization	d. A supporting organ	Ization operated fy a distribution i	in connection wi requirement and	th its supported orgar d an attentiveness req	1. 4
e	✓	Check this	oox if the org	anızatıon receiv	•	nation from the II		pe I, Type II, Type II	I functionally
f	Enter			organizations	micegrated supporting	organization		6	
g	Provid	de the follow	ıng ınformatı	on about the su	pported organization((s)			
	(i) N	lame of supp organization		(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the orgain your govern	anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
See	Addıtıc	onal Data Tal	ole						
Tota		uant Dad	6	ina nas etc. T	structions for	Cat No 11285		Cabadula A (Farma O	899,162 90 or 990-EZ) 2018

(Complete only if you checked the box on line 5, 7, 8, or 9 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 vear (d) 2017 (e) 2018 (a) 2014 **(b)** 2015 (c) 2016 (f) Total (or fiscal year beginning in) ▶ Gifts, grants, contributions, and membership fees received (Do not

	include any unusual grant) L						
2	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the amount						
	shown on line 11, column (f)						
5	Public support. Subtract line 5 from						
	line 4						
5	Section B. Total Support						
	Calendar year	(a)2014	(b) 2015	(c)2016	(d)2017	(e)2018	(f)Total
	(or fiscal year beginning in) ▶	(a)2014	(D) 2015	(6)2016	(a)2017	(e)2018	(I)Total
7	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain or						
LU	other income bo not include gain of						
LU	loss from the sale of capital assets						

(Explain in Part VI) Total support. Add lines 7 through 12 Gross receipts from related activities, etc. (see instructions) 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) organization, Section C. Computation of Public Support Percentage

Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f))

b 33 1/3% support test—2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this

-	

16a	33 1/3% support test—2018. If the organization did not check the
15	Public support percentage for 2017 Schedule A, Part II, line 14
14	Table support percentage for 2010 (inte o, column (i) divided by inte

i
l
l

rubiic support percentage for	2010 (line o, column (i) divided by lin
Public support percentage for	2017 Schedule A, Part II, line 14

1	

15

14	
15	

e box on line 13, and line 14 is 33 1/3% or more,

_	hack	th

١		,	
٦	dıd	not	check

17a 10%-facts-and-circumstances test—2018. 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—2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line

c	heck	thi

s	box		

		'	_		•	•			
33 1/3 ⁰	% sup	port te	st—2018.	If the org	anızatıon	did no	ot check	the box	on lii
and sto	p here	e. The o	rganization	qualifies	as a publ	icly su	upported	organiza	ation

heck	this

Schedule A (Form 990 or 990-EZ) 2018

- supported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see
- instructions

organization

11

14

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

box and stop here. The organization qualifies as a publicly supported organization

20

Р	Support Schedule for					d + 1.6	law Dawk II - IS
	(Complete only if you c the organization fails to						ier Part II. If
Se	ection A. Public Support	quality affact t	ine cests fisced i	below, piedse ed	ompiete i die III	/	
	Calendar year	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
	(or fiscal year beginning in) ▶	(a) 2014	(B) 2013	(6) 2010	(u) 2017	(e) 2018	(I) Iotai
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 furnished in						
	any activity that is related to the						
2	organization's tax-exempt purpose Gross receipts from activities that are						
3	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 The value of services or facilities						
9	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
	3 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						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
	ection B. Total Support	T	T	1	1	1	T
	Calendar year (or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
	income from similar sources						
b	Unrelated business taxable income (less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
C	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						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is fo	r the organization	's first, second, tl	hird, fourth, or fift	h tax vear as a se	ction 501(c)(3) o	organization.
	check this box and stop here	.		,,,	,		▶ □
Se	ection C. Computation of Public	Support Perce	ntage				
15	Public support percentage for 2018 (lin			column (f))		15	
16	Public support percentage from 2017 S		•	(//		16	
	ection D. Computation of Invest					••	
17	Investment income percentage for 20:			line 13. column (f	7)	17	
	Investment income percentage for 20.	•		==, ==; (1	,,		
18	-			on line 14 and lin	o 15 is more than	18	ne 17 is not
	331/3% support tests—2018. If the	_					_
	more than 33 1/3%, check this box and s	•					
b	33 1/3% support tests—2017. If the	_					_
	not more than 33 1/3%, check this box	and stop here. `	i ne organization i	qualifies as a publ	icly supported org	janization – – – – – – – – – – – – – – – – – – –	▶□

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

ightharpoons

Part IV Supporting Organizations (Complete only if you checked a box on line 12 of 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

Schedule A (Form 990 or 990-EZ) 2018

amendment to the organizing document)

complete Part I of Schedule L (Form 990 or 990-EZ)

the organization had excess business holdings)

organization had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

provide detail in Part VI.

answer line 10b below

5a

6

7

8

10a

Sections A and D, and complete Part V) Section A. All Supporting Organizations Yes No

Page 4

4c

5a

5b

5c

6

7

8

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

No

No

No

No

No

No

No

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		No
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)			
	11 Section 303(a)(1) 01 (2)	٠.	V	

	They describe in the supported organizations are designated by erass or purpose,		l	1
	describe the designation If historic and continuing relationship, explain	1		I
	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			
	ın section 509(a)(1) or (2)	2	Yes	
а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			ĺ
	below	3a		Ī

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			
	ın section 509(a)(1) or (2)	2	Yes	
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a		No
b	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	3h		

	below	3a		No	
b	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				
c	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				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked 12a or 12b ın Part I, answer (b) and (c) below			No	

	the public support tests under section 309(a)(2). If Tes, describe in Part VI when and now the organization made the			
	determination	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 ın 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 despite being controlled or supervised by or in connection with its supported organizations	4b		
С	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) purposes	40		

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

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

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

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

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

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,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,

Substitutions only. Was the substitution the result of an event beyond the organization's control?

organization's supported organizations? If "Yes," provide detail in Part VI.

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

	The West State Companies Companies (continued)			aye 3
i k	Supporting Organizations (continued)			
	The the consequence of the first control of the con		Yes	No
	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?	11a		No
b	A family member of a person described in (a) above?	11b		No
	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		No
	Section B. Type I Supporting Organizations	<u> </u>	l	
	,, <u>, , , , , , , , , , , , , , , , , ,</u>		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	Yes	
2	Did the organization operate for the benefit of any supported organization other than the supported 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		103	No
S	Section C. Type II Supporting Organizations		V	₿1.:
	Wang a manufacture of the annual state of the state of th		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors 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 D. All Type III Supporting Organizations			
	ection D. All Type III Supporting Organizations		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the 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)			
		2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a 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		
S	Section 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 instruct	ions)		
	a			
	b The organization is the parent of each of its supported organizations Complete line 3 below			
	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	. ınstru	ctions)	
2	Activities Test Answer (a) and (b) below.		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of 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		
	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.			
	 a 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 	3h		

3b

Sched	lule A (Form 990 or 990-EZ) 2018			Page 6
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organizations.			
	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)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	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-functionally-instructions)	ntegrat	ed Type III supporting or	ganızatıon (see

5 Remaining underdistributions for years prior to 2018, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI

See instructions

6 Remaining underdistributions for 2018 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI See instructions

7 Excess distributions carryover to 2019. Add lines 31 and 4c

8 Breakdown of line 7 a Excess from 2014.

b Excess from 2015. c Excess from 2016.

d Excess from 2017. e Excess from 2018.

Schedule A (Form 990 or 990-EZ) (2018)

Schedule A ((Form 990 or 990-E	Z) 2018 Pa	ige 8
Part VI	Section A, lines 1, Part IV, Section D	Iformation. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part II, 3, 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, 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 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information (See	
		Facts And Circumstances Test	
<u>J</u> 990 S ched	dule A, Supplem	nental Information	
Ret	turn Reference	Explanation	
DART LIN	IE 436 601 1/5	THE ORGANIZATION CONTRIBUTED A 100% I MITTER PARTNER INTEREST IN WINDOW ROCK RECIPENTIAL	

PART I, LINE 12G, COL VI THE ORGANIZATION CONTRIBUTED A 10% LIMITED PARTNER INTEREST IN WINDOW ROCK RESIDENTIAL RECOVERY FUND LP

990 Schedule A, Supplemental Information						
Return Reference	Explanation					
	THE TRUST IS ORGANIZED EXCLUSIVELY TO SUPPORT AND BENEFIT THE CHURCH OF JESUS CHRIST OF LA TTER-DAY SAINTS AND ITS SPECIFICALLY IDENTIFIED AFFILIATED RELIGIOUS, EDUCATIONAL AND CHAR ITABLE ORGANIZATIONS THAT ARE EXEMPT ORGANIZATIONS DESCRIBED IN SECTION 501(C)(3) AND SECT ION 509(A)(1) OR 509(A)(2) OF THE INTERNAL REVENUE CODE					

990 Schedule A, Supplemental Information						
Return Reference Explanation						
PART IV, SECTION A, LINE 2	THE PRIMARY SUPPORTED ORGANIZATION IS THE CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS AS A CHURCH, IT IS EXEMPT FROM THE REQUIREMENT TO FILE FOR EXEMPTION UNDER IRS REG 1 508-1(A)(3) AND, ACCORDINGLY, WE ASSUME IT HAS NOT IF OUR ASSUMPTION IS CORRECT, IT WOULD NOT HAVE AN IRS DETERMINATION OF STATUS BECAUSE A FORMAL DETERMINATION IS NOT REQUIRED, WE HAVE NOT INQUIRED OF THE CHURCH WHETHER IT HAS A LETTER OR NOT THE CHURCH CLEARLY QUALIFIES A S AN ORGANIZATION EXEMPT UNDER 509(A)(1)/170(B)(1)(A)(I) BASED ON THE NATURE OF ITS ACTIVITIES					

Additional Data

Software ID:

Software Version:

EIN: 41-2152824

Name: THE JEITO FOUNDATION

Form 990, Sch A, Part I, Line 12g - Provide the following information about the supported organization(s).										
(i)Name of supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv Is the org listed ii governing o	anızatıon n your	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see Instructions)				
			Yes	No						
(A) THE CHURCH OF JESUS CHRIST OF LATTER- DAY SAINTS	237300405	1	Yes		0	899,162				
(A) BRINGHAM YOUNG UNIVERSITY	870217280	2	Yes		0	0				
(B) BRIGHAM YOUNG UNIVERSITY - IDAHO	820207699	2	Yes		0	0				
(C) BRIGHAM YOUNG UNIVERSITY - HAWAII	990083825	2	Yes		0	0				
(D) LDS BUSINESS COLLEGE	870280678	2	Yes		0	0				
(E) THE POLYNESIAN CULTURAL CENTER	990109908	10	Yes		0	0				

efile GRAPHIC print - DO NOT PROCESS **SCHEDULE D**

As Filed Data -

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Cat No 52283D

Schedule D (Form 990) 2018

OMB No 1545-0047

DLN: 93493319198829

Department of the Treasury Internal Revenue Service Name of the organization

b Assets included in Form 990, Part X

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

(Form 990)

▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for the latest information.

Open to Public **Inspection** Employer identification number

ГНЕ	JEITO FOUNDATION			
			41-2152824	
?∂	rt I Organizations Maintaining Donor Adv		or Accounts.	
	Complete if the organization answered "Y		(1-)5	L
	Tatal number at and af year	(a) Donor advised funds	(b)Funds and ot	ner accounts
	Total number at end of year			
	Aggregate value of contributions to (during year)			
	Aggregate value of grants from (during year)			
	Aggregate value at end of year			
	Did the organization inform all donors and donor advisorganization's property, subject to the organization's e		dvised funds are the	☐ Yes ☐ No
	Did the organization inform all grantees, donors, and di charitable purposes and not for the benefit of the dono private benefit?			☐ Yes ☐ No
a	rt III Conservation Easements. Complete if t	he organization answered "Yes" on For	rm 990, Part IV, line 7	
	Purpose(s) of conservation easements held by the orga	anızatıon (check all that apply)		
	\square Preservation of land for public use (e g , recreation	on or education) \square Preservation of a	n historically important la	ind area
	Protection of natural habitat	Preservation of a	certified historic structur	e
	☐ Preservation of open space			
	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year	qualified conservation contribution in the fo		nd of the Year
а	Total number of conservation easements		2a	id of the real
b	Total acreage restricted by conservation easements		2b	
c	Number of conservation easements on a certified histor	ric structure included in (a)	2c	
d	Number of conservation easements included in (c) acquistructure listed in the National Register	` '	2d	
	Number of conservation easements modified, transferr tax year ▶	ed, released, extinguished, or terminated by	y the organization during	the
	Number of states where property subject to conservati	on easement is located >		
	Does the organization have a written policy regarding to and enforcement of the conservation easements it holds		g of violations,	s 🗆 No
	Staff and volunteer hours devoted to monitoring, inspe	ecting, handling of violations, and enforcing o	conservation easements o	luring the year
	Amount of expenses incurred in monitoring, inspecting \$ \\$, handling of violations, and enforcing conse	ervation easements during	the year
	Does each conservation easement reported on line 2(d) shove esticfy the requirements of section	170(b)(4)(B)(i)	
	and section 170(h)(4)(B)(\parallel)?	y above satisfy the requirements of section :	□ Y e	s 🗆 No
	In Part XIII, describe how the organization reports con balance sheet, and include, if applicable, the text of the the organization's accounting for conservation easeme	e footnote to the organization's financial stat	ense statement, and	<u> Э</u>
ar	t III Organizations Maintaining Collections Complete if the organization answered "You	of Art, Historical Treasures, or Ot	her Similar Assets.	
<u> </u>	If the organization elected, as permitted under SFAS 1	·	tatement and balance she	et works of
a	art, historical treasures, or other similar assets held fo provide, in Part XIII, the text of the footnote to its fina	r public exhibition, education, or research in		
b	If the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for pul following amounts relating to these items	16 (ASC 958), to report in its revenue state plic exhibition, education, or research in furt	ment and balance sheet where the service, and public service,	vorks of art, provide the
((i) Revenue included on Form 990, Part VIII, line 1		▶ \$	
(i	ii)Assets included in Form 990, Part X		▶ \$	
-	If the organization received or held works of art, histor following amounts required to be reported under SFAS		ancial gain, provide the	
а	Revenue included on Form 990, Part VIII, line 1	· -	▶ \$	

Par	t III	Organizations Ma	intaining Col	lections o	of Art, I	Histori	cal T	reas	ures, oi	r Other	Similar	Assets (continuec	1)
3		the organization's acqu (check all that apply)	iisition, accessior	n, and other	records	, check :	any of	the fo	ollowing t	hat are a	sıgnıfıcar	nt use of it	s collectio	n
a		Public exhibition				d		Loar	n or excha	ange prog	ırams			
b		Scholarly research				е		Othe	er					
С		Preservation for future	generations											
4	Provid Part	de a description of the o KIII	rganization's col	lections and	l explain	how the	y furtl	ner th	ne organiz	zation's ex	xempt pu	rpose in		
5		g the year, did the orga s to be sold to raise fund									ıılar	□ Y	es 🗆	No
Pa	rt IV	Escrow and Custo Complete if the org X, line 21.			" on For	m 990	, Part	IV, I	line 9, o	r reporte	ed an am			
1a		e organization an agent, ded on Form 990, Part X		an or other	ıntermed	liary for	contri	butioi	ns or othe	er assets	not	□ Y	es 🗌	No
b	If "Y∈	es," explain the arranger	ment ın Part XIII	and comple	ete the fo	ollowing	table					Amount		
c		ining balance		'		,				1c				
d	Addıt	ions during the year								1d				
е	Dıstrı	butions during the year								1e				
f	Endın	ig balance								1f				
2a	Did th	re organization include a	an amount on Fo	rm 990, Par	t X, line	21, for	escrow	or c	ustodial a	ccount lia	ability?.	🗆 Y	es 🗆	No
b	If "Ye	s," explain the arrangen	ment in Part XIII	Check here	e if the e	xplanatı	on has	beer	n provide	d in Part :	XIII	🗆		
Pa	rt V	Endowment Fund	s. Complete ıf	the organ	ızatıon .	answer	ed "Y	es" o	n Form	990, Pai	t IV, lın	e 10.		
				(a)Currer	nt year	(b) P	rıor yea	r	(c) Two y	ears back	(d)Three	years back	(e)Four y	ears back
	_	ing of year balance .												
		outions												
		estment earnings, gains												
		or scholarships												
	and pr	expenditures for facilities ograms	s											
f	Admını	strative expenses .												
g		year balance												
2 a		de the estimated percen d designated or quasi-en		ent year end	l balance	(line 1	g, colu	mn (a	a)) held a	S				
b	Perm	anent endowment 🟲												
С	Temp	orarily restricted endow	ment 🟲											
	The p	ercentages on lines 2a,	2b, and 2c shou	ld equal 100	0%									
3a		here endowment funds r nization by	not in the posses	sion of the	organizal	tion that	t are h	eld ar	nd admini	istered fo	r the	_	Ye	s No
	(i) ur	nrelated organizations					•						a(i)	
		-					ا ماداد					3	a(ii) 3b	
ь 4		es" on 3a(II), are the rela Tibe In Part XIII the Inter	-		•			•			• •		30	
	rt VI	Land, Buildings, a			ir 5 chiqo	William	unus							
		Complete if the org			" on For	m 990	, Part	IV, ا	lıne 11a.	. See Fo	rm 990,	Part X, lı	ne 10.	
	Descri	ption of property	(a) Cost or oth (Investme		(b) Cost	or other	basis (other)	(c) Acc	umulated o	depreciatioi	n	(d) Book v	alue
1a	Land			7,679,850										7,679,850
b	Buildin	gs												
		old improvements												
d	Equipn	nent												
		lines 1a through 1e (Col	lumn (d) must e	qual Form 9	90, Part	X, colur	nn (B)	, line	10(c))		>			7,679,850

Schedule D (Form 990) 2018			Page 3
Part VII Investments—Other Securities. Complete if the See Form 990, Part X, line 12.	ne organization answei		
(a) Description of security or category (including name of security)	(b) Book value	(c) Method o Cost or end-of-ye	
(1) Financial derivatives			
(2) Closely-held equity interests	255 526		_
(A) LOBO PARTNERS, LLC	865,686	C	
(B) K-1 PRIVATE INVESTORS LLC	2,575,882	C	
(C) RWLS V HOLDINGS, LLC	24,024	C	
(D) SOLAMERE CAP FUND II, LP	915,821	С	
(E) TITAN DEVELOPMENT REAL ESTATE I, LP	1,088,353	С	
(F) ENLIGHTENMENT CAPITAL SOLUTIONS FUND III, L P	23,354	С	
(G) TRINITY CAPITAL FUND IV, L P	997,569	С	
(H) SUPRISE FOOTHILLS 33 INVESTORS LLC Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	297,269 6,787,958	С	
Part VIII Investments—Program Related.		44 - 6 - 5 - 200 - 5 -	
Complete if the organization answered 'Yes' on F (a) Description of investment	(b) Book value	(c) Method o	f valuation
(1)		Cost or end-of-ye	ar market value
(2)			
(3)			
(4)			
(5)			
(6)			_
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 13) Part IX Other Assets. Complete if the organization answered	Yes' on Form 990, Part	IV, line 11d See Form 990	, Part X, line 15
(a) Description			(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 15) Part X Other Liabilities. Complete if the organization a	nswered 'Yes' on Form		or 11f
See Form 990, Part X, line 25.	(b) Boo		
1. (a) Description of liability (1) Federal income taxes	(6) 800	k value	
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) 2. Liability for uncertain tax positions In Part XIII, provide the text of	► f the footnote to the orga	nızatıon's financıal stateme	nts that reports the
organization's liability for uncertain tax positions under FIN 48 (ASC 7			

1

Schedule D (Form 990) 2018

Total revenue, gains, and other support per audited financial statements . . .

Amounts included on line 1 but not on Form 990. Part VIII. line 12

1

Page 4

2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities		
С	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
С	Add lines 4a and 4b	4c	
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	
Par	Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	per Returi	n.
1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII)		
С	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)	5	
Par	t XIII Supplemental Information		
	vide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional informatio		4, Part X, line 2, Part
	Return Reference Explanation		

Schedule D (Fo	orm 990) 2018	Page 5	
Part XIII	Supplemental Info		
Return Reference		Explanation	
			Schedule D (Form 990) 2018

Additional Data

(F) TRINITY CAPITAL FUND IV, L P

(G) SUPRISE FOOTHILLS 33 INVESTORS LLC

Softwa	are ID:		
Software Ve	ersion:		
	EIN:	41-2152824	
	Name:	THE JEITO FOUNDATION	
Form 990, Schedule D, Part VII - Investments Other Se	curities	;	
(a) Description of security or category (including name of security)		(b)Book value	(c) Method of valuation Cost or end-of-year market value
(including harrie of security)			cost of end of year market value

(A) LOBO PARTNERS, LLC	865,686	С
(A) K-1 PRIVATE INVESTORS LLC	2,575,882	С
(B) RWLS V HOLDINGS, LLC	24,024	С
(C) SOLAMERE CAP FUND II, LP	915,821	С

С

C

C

997,569

297,269

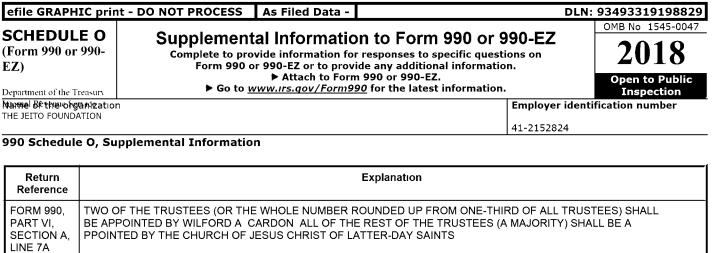
(B) RWLS V HOLDINGS, LLC	24,024	
(C) SOLAMERE CAP FUND II, LP	915,821	
(D) TITAN DEVELOPMENT REAL ESTATE I, LP	1,088,353	

(B) RWLS V HOLDINGS, LLC	24,024	
(C) SOLAMERE CAP FUND II, LP	915,821	
(D) TITAN DEVELOPMENT REAL ESTATE I, LP	1,088,353	

(C) SOLAMERE CAP FUND II, LP	915,821
(D) TITAN DEVELOPMENT REAL ESTATE I, LP	1,088,353
(E) ENLIGHTENMENT CAPITAL SOLUTIONS FUND III, L P	23,354

efile GRAPHIC print	t - DO NOT PROCESS	As Filed Data -					DLN	l: 93493319198829
Schedule I (Form 990) Department of the Treasury Internal Revenue Service		Grants and C Governments mplete if the organiza	lect landscape mode other Assistance and Individuals tion answered "Yes," o ► Attach to Form w.irs.qov/Form990 for	ce to Organiza s in the Unite on Form 990, Part IV 1990.	ations, d States , line 21 or 22.			2018 Open to Public Inspection
Name of the organization THE JEITO FOUNDATION							Employer identifica 41-2152824	tion number
the selection criteri Describe in Part IV Part II Grants and	on maintain records to subs a used to award the grants the organization's procedure Other Assistance to Dom	or assistance? es for monitoring the us estic Organizations ar	e of grant funds in the Ur	nited States		r	990, Part IV, line 2	✓ Yes ☐ No
(a) Name and addres organization or government	ration (if applicable) grant cash (book, FMV, appraisal, noncash ass		Description of ish assistance	(h) Purpose of grant or assistance				
(1) 23-7300405 501(C)(3) THE CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS 50 E NORTH TEMPLE STREET SALT LAKE CITY, UT 84150		899,162	TAX BASIS			SUPPORTED THE CHURCH OF JESUS CHRIST OF LATTER- DAY SAINTS IN RESPONSE TO ITS NEEDS		
3 Enter total number	of section 501(c)(3) and go of other organizations listed	in the line 1 table				· · ·		1 0 dule I (Form 990) 2018

Schedule I (Form 990) 2018						Page 2
Part III Grants and Other Assista				inization answered "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
(1)				1		
(2)				1		
(3)				1		
(4)						
(5)						
(6)						
(7)						
Part IV Supplemental Info	iormation.	Provide the inf	ormation required in !	Part I, line 2; Part III	I, column (b); and any other a	additional information.
Return Reference Ex	xplanation					
PART I, LINE 2 THE	THE TRUSTEES AFFILIATED WITH THE SUPPORTED ORGANIZATION REPORT TO THE FOUNDATION'S BOARD AS TO THE USE OF THE GRANT FUNDS					



Return Explanation
Reference

990 Schedule O, Supplemental Information

FORM 990, PART VI, SECTION B, LINE 11B

Return Explanation

990 Schedule O, Supplemental Information

FORM 990, PART VI, ANY INVESTMENTS, CONTRACTS OR GRANTS
SECTION B, LINE 12C

990 Schedule O, Supplemental Information

Return Explanation

Reference

FORM 990,	THE FOUNDATION COMPLIES WITH THE LEGAL REQUIREMENTS TO PROVIDE COPIES OF THE ANNUAL IRS FO
PART VI,	RM 990 AND THE APPLICATION FOR EXEMPTION, BY RETAINING THESE DOCUMENTS AND PROVIDING COPIE
SECTION C,	S TO THE PUBLIC UPON REQUEST THE FOUNDATION DOES NOT MAKE ITS GOVERNING DOCUMENTS, CONFLI
LINE 19	CT OF INTEREST POLICY OR FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC

990 Schedule O, Supplemental Information

Doturn

Reference	Explanation	
COMPENSATION	THREE OF THE BOARD MEMBERS ARE FULL-TIME EMPLOYEES OF THE CHURCH OF JESUS CHRIST OF LATTER	
FROM RELATED	-DAY SAINTS OR ONE OF ITS CHARITABLE AFFILIATES THEIR COMPENSATION IS DETERMINED SOLELY W	
ORGANIZATIONS	ITH REFERENCE TO THEIR DUTIES IN SUCH FULL-TIME EMPLOYMENT, AND IS NOT AFFECTED BY THEIR D	
	UTIES OR SERVICE AS TRUSTEE OF THE FOUNDATION THE BOARD MEMBERS HAVE BEEN ASKED TO PROVID	
	E THE INFORMATION REQUIRED FOR THE FORM 990, PART VII AND, IF APPLICABLE, SCHEDULE J THE	
	BOARD MEMBERS HAVE BEEN INSTRUCTED BY THEIR EMPLOYER THAT THEIR COMPENSATION IS CONFIDENTI	
	AL AND THEY ARE NOT AT LIBERTY TO DISCLOSE	

Evolunation

Return Explanation

990 Schedule O, Supplemental Information

FORM 990, BOOK-TAX DIFFERENCE FROM K1 PRIVATE INVESTORS 27-5411266 -153,730 BOOK-TAX DIFFERENCE FRO PART XI, M SOLAMERE CAPITAL FUND II LP 46-2502981 90,726 BOOK-TAX DIFF FROM ENLIGHTENMENT CAPITAL SOLUTIONS FUND III, LP 82-4046445 -2,933 BOOK-TAX DIFFERENCE FROM TITAN DEVELOPMENT REAL ESTATE FUND I LP 82-2353928 -15.119

efile GRAPHIC print - DO NOT PROCESS As

As Filed Data -

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37. ► Attach to Form 990.

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

OMB No 1545-0047

2018

Open to Public Inspection

Internal Revenue Service
Name of the organization
THE JEITO FOUNDATION

Department of the Treasury

SCHEDULE R

(Form 990)

Employer identification number

				41-2152824				
Part I Identification of Disregarded Entities Complete	ıf the organization ansv	wered "Yes" on Form	n 990, Part IV, line	33.				
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (sta or foreign country		(e) End-of-year assets	(f) Direct controlling entity			
(1) PALM BAY CONDO LENDER LLC 1819 EAST SOUTHERN AVE STE B-10 MESA, AZ 85204 20-368358	INVESTMENT	AZ	0	2,500,000	THE JEITO FOUNDATION		_	
(2) JWL IV LLC 1819 EAST SOUTHERN AVE STE B-10 MESA, AZ 85204 41-2152824	INVESTMENT	AZ	-607,378	25,441	THE JEITO FOUNDATION			
							_	
							_	
Part II Identification of Related Tax-Exempt Organizat related tax-exempt organizations during the tax year		ganization answered	l "Yes" on Form 99	0, Part IV, line 34	because it had one or r	nore		
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section (13) co ent	ntrolle tity?	
(1)THE CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS 50 E NORTH TEMPLE	CHURCH	UT	501(C)(3)	LINE 1		Yes	No No	
SALT LAKE CITY, UT 84150 23-7300405								
(2)THE CARDON FOUNDATION 1819 E SOUTHERN AVE B-10	GRANT MAKING	AZ	501(C)(3)	LINE 12A, I	THE CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS		No	
MESA, AZ 85204 77-0647801								
(3)BRIGHAM YOUNG UNIVERSITY PO BOX 21128	EDUCATION	UT	501(C)(3)	LINE 2	THE CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS		No	
PROVO, UT 84602 87-0217280	EDUCATION	10	F04(S)(2)	LINE	THE CHARGE OF TECHS		L	
(4)BRIGHAM YOUNG UNIVERSITY - IDAHO 525 S CENTER STREET REXBURG, ID 83460	EDUCATION	ID	501(C)(3)	LINE 2	THE CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS		No	
82-0207699 (5)BRIGHAM YOUNG UNIVERSITY - HAWAII	EDUCATION	117	F01/C)/3)	LINE 2	THE CHURCH OF JESUS		l N-	
55-220 KULANUI STREET 1955 LAIE, HI 96762	EDUCATION	HI	501(C)(3)	LINE 2	CHRIST OF LATTER-DAY SAINTS		No	
99-0083825 (6)LDS BUSINESS COLLEGE	EDUCATION	UT	501(C)(3)	LINE 2	THE CHURCH OF JESUS		No	
120 N 200 W SALT LAKE CITY, UT 84103	EDUCATION		301(0)(3)	LINE Z	CHRIST OF LATTER-DAY SAINTS		140	
87-0280678 (7)POLYNESIAN CULTURAL CENTER	CULTURAL AWARENESS	HI	501(C)(3)	LINE 10	CORPORATION OF THE		No	
SS-370 KAMEHAMEHA HIGHWAY LAIE, HI 96762	SOCIONAL AWAILEDS	111			PRESIDING BISHOP OF THE CHURCH OF JESUS CHRIST OF LDS			
99-0109908 For Paperwork Reduction Act Notice, see the Instructions for Forr	n 990.		1 35Y	I	Schedule R (Form 9	990) 20	018	

Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total Income	(g) Share of end-of-year assets	(h Dispropi allocat	tionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	aging ner?	(k Percer owner
I) RWLS IV HOLDINGS LLC		INVESTMENT	AZ	JWL IV LLC	INVESTMENT	-108,024			No			No	53 6
E SOUTHERN AVENUE STE B10 , AZ 85204)94374													
t IV Identification of Related Organ because it had one or more related						nization ans	wered "Ye	s" on f	orm 9	990, Part I\	/, lin	e 34	
(a) Name, address, and EIN of related organization	(b) Primary activity	d (state	(c) Legal omicile or foreig			(e) /pe of entity corp, S corp, or trust)	(f) Share of tota Income	al Shar	(g) e of end year assets	d-of- Perc	(h) entag nership		(ı Section (13) cor enti
		CC	ountry)					_					Yes

Sched	ule R (Form 990) 2018				Pag	ge 3
Par	Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, I	art IV, line 34, 35b	, or 36.			
	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	No
1 Du	iring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed	ın Parts II-IV?				
а	Receipt of (i) interest, (iii) annuities, (iii) royalties, or(iv) rent from a controlled entity			1a		No
ь	Gift, grant, or capital contribution to related organization(s)			1 b	Yes	
c	Gift, grant, or capital contribution from related organization(s)			1c		No
d	Loans or loan guarantees to or for related organization(s)			1 d		No
e	Loans or loan guarantees by related organization(s)			1e		No
f	Dividends from related organization(s)			1f		No
g	Sale of assets to related organization(s)			1 g		No
h	Purchase of assets from related organization(s)			1h		No
i	Exchange of assets with related organization(s)			1i		No
j	Lease of facilities, equipment, or other assets to related organization(s)			1j		No
k	Lease of facilities, equipment, or other assets from related organization(s)			1k		No
ı	Performance of services or membership or fundraising solicitations for related organization(s)			11		No
m	Performance of services or membership or fundraising solicitations by related organization(s)			1m		No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			1n	Yes	
0	Sharing of paid employees with related organization(s)			10		No
р	Reimbursement paid to related organization(s) for expenses			1 p		No
q	Reimbursement paid by related organization(s) for expenses			1q		No
r	Other transfer of cash or property to related organization(s)			1r		No
s	Other transfer of cash or property from related organization(s)			1s	Yes	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covere	d relationships and tra	nsaction thresholds			
	(a) (b) Name of related organization Transaction type (a-s)	(c) Amount involved	(d) Method of determining am	ount inv	volved	
(1) RW	LS IV LLC	394,754	CASH			

			1	
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		No
1	Performance of services or membership or fundraising solicitations for related organization(s)	11		No
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m	•	No
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes	5
0	Sharing of paid employees with related organization(s)	10		No
р	Reimbursement paid to related organization(s) for expenses	1 p		No
q	Reimbursement paid by related organization(s) for expenses	1 q		No
r	Other transfer of cash or property to related organization(s)	1r		No
s	Other transfer of cash or property from related organization(s)	1s	Yes	5
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
	(a) Name of related organization (b) Transaction type (a-s) (c) Amount involved Method of determining ar	nount	ınvolv	ed
(1 \D\)	US TV LIC S 204 7E4 CASH			

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

was not a related organization. See mistractions regarding exclusion													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		ganizations?	(f) Share of total Income	(g) Share of end-of-year assets		_	(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)		or ig ?	(k) Percentage ownership
			514)	Yes	No			Yes	No		Yes	No	
										Schedul	e R (Forn	n 99	0) 2018

Schedule R (Form 990) 2018 Page **5** Part VII Supplemental Information Provide additional information for responses to questions on Schedule R (see instructions) Return Reference Explanation SCHEDULE R, PART II OTHER THE FOUNDATION IS CONTROLLED BY THE CHURCH OF JESUS CHRIST OF LATTER-DAY SAINTS, WHICH IS A WORLD-WIDE ORGANIZATION THE FOUNDATION RELATED ORGANIZATION DOES NOT HAVE ACCESS TO A COMPLETE LIST OF ORGANIZATIONS THE CHURCH CONTROLS, ALL OF WHICH WOULD BE RELATED TO THE FOUNDATION IN A BROTHER-SISTER RELATIONSHIP THE FOUNDATION HAS DISCLOSED ALL OF ITS KNOWN RELATIONSHIPS

Schedule R (Form 990) 2018