Return of Private Foundation

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

 $29\,\mathbf{\mathring{4}}\,\mathbf{9}\,\mathbf{1}\,\mathbf{\mathring{3}}\,\mathbf{6}\,\mathbf{\overset{0}{2}}\,\mathbf{0}\,\mathbf{0}\,\mathbf{6}\,\mathbf{\overset{1}{1}}\,\mathbf{\overset{8}{8}}_{\text{OMB No 1545-0052}}$

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

FUI	calen	dar year 2018 or tax year beginning	, 21	וא, and			, 20
Nam	e of four	ndation			A Employe	r identification numbe	er
R FO	DUNDA	ATION				84-1409429	
		street (or P O box number if mail is not delivered to street address)	Ro	om/suite	B Telephon	e number (see instruct	ions)
2159	SOUT	TH 700 EAST		200		(801) 467-360	0
City	or town,	state or province, country, and ZIP or foreign postal code			C If exempt	ion application is pend	ling, check here ▶ [
SAL	T LAK	E CITY, UT 84106					
			of a former pub	lic charity	D 1. Foreigi	n organizations, check	here ▶[
		☐ Final return ☐ Amended r	eturn		2 Foreign	n organizations meeting	n the 85% test
		Address change Name char	nge			here and attach compl	
Н	Check	type of organization: Section 501(c)(3) exempt po	rivate foundatio	n ()\(\frac{1}{3}\)		foundation status was	
	Sectio	n 4947(a)(1) nonexempt charitable trust Other tax	able private fou	ndation	section 5	07(b)(1)(A), check here	▶ [
		arket value of all assets at J Accounting method			F If the four	ndation is in a 60-mont	h termination
	end of	year (from Part II, col (c), Other (specify)				ction 507(b)(1)(B), chec	
1	ine 16) ► \$ 462,563 (Part I, column (d) must be	on cash basis)				
Pa	irt I	Analysis of Revenue and Expenses (The total of	(a) Revenue and				(d) Disbursement
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per		t investment ncome	(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instructions))	books				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	263,5	65			
	2	Check ► ☐ if the foundation is not required to attach Sch B			.,		
	3	Interest on savings and temporary cash investments	2	23	223	RECEI	VED IN COR
	4	Dividends and interest from securities	12.7		12,787		S - OSC - 13
l	5a	Gross rents			· · · · · ·		
		Net rental income or (loss)				nı	C 17 2019
a	6a	Net gain or (loss) from sale of assets not on line 10	156,3	10			
Revenue	b	Gross sales price for all assets on line 6a 158,466	100,0	''			
<u> </u>	7	Capital gain net income (from Part IV, line 2)			156,310	υG	DEN, UTAH
₽	8	Net short-term capital gain			,		
_	9	Income modifications			,		
	10a	Gross sales less returns and allowances					
İ		Less: Cost of goods sold					
		Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)	, . ,	1			
	12	Total. Add lines 1 through 11	432,8	0.5	169,320		
	13	Compensation of officers, directors, trustees, etc.	432,8	65	103,320		
es	14	Other employee salaries and wages		1			
Expenses	15	Pension plans, employee benefits					
8	16a	Legal fees (attach schedule)	 				
<u>ا</u> ک		Accounting fees (attach schedule)		62	170		29
9		Other professional fees (attach schedule)	_	62			
at	C 17			52	252		
إيد	17	Interest	4 7	10	20	 	
≝∣	18		1,7	10	29		
<u> </u>	19	Depreciation (attach schedule) and depletion .					
٩l	20	Occupancy					
او	21	Travel, conferences, and meetings		-			
ā	22	Printing and publications					
<u></u>	23	Other expenses (attach schedule)		10			1
;≣	24	Total operating and administrative expenses.					
Operating and Administrativ		Add lines 13 through 23	2,4		451		30
밁	25	Contributions, gifts, grants paid	34,0				34,08
_	26	Total expenses and disbursements. Add lines 24 and 25	36,5	22	451	···	34,38
Ì	27	Subtract line 26 from line 12.					1
	_	Excess of revenue over expenses and disbursements	396,3	63			
	b	Net investment income (if negative, enter -0-) .			168,869	<u> </u>	
- 1	С	Adjusted net income (if negative, enter -0-) .			<u> </u>		orm 990-PF (201

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Pá	art il	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
$\overline{}$		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash-non-interest-bearing	4,652	8,132	8,132
	2	Savings and temporary cash investments		246,612	246,610
	3	Accounts receivable ▶			
		Less: allowance for doubtful accounts ▶	361		
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
	Ì	disqualified persons (attach schedule) (see instructions) .			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less [,] allowance for doubtful accounts ▶			
its	8	Inventories for sale or use			
sse	9	Prepaid expenses and deferred charges			
Ÿ	10a	investments—U.S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	82,449	167,834	207,821
	С	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶			
		Less¹ accumulated depreciation (attach schedule) ▶			
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment: basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers—see the			
		ınstructions. Also, see page 1, item l)	87,462	422,578	462,563
	17	Accounts payable and accrued expenses	220	1,349	
Š	18	Grants payable			
Liabilities	19	Deferred revenue			
þil	20	Loans from officers, directors, trustees, and other disqualified persons			
Lia	21	Mortgages and other notes payable (attach schedule) .			
_	22	Other liabilities (describe ▶)			
_	23	lotal liabilities (add lines 17 through 22)	220	1,349	
S		Foundations that follow SFAS 117, check here			
Balances		and complete lines 24 through 26, and lines 30 and 31.			
lar	24	Unrestricted		_ ,	
Ва	25	Temporarily restricted			
Þ	26	Permanently restricted			
Net Assets or Fund		Foundations that do not follow SFAS 117, check here ▶ □			
ř		and complete lines 27 through 31.			
S	27	Capital stock, trust principal, or current funds	4,661	4,661	
šet	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
ΑS	29 ราช	Retained earnings, accumulated income, endowment, or other funds	82,581	416,568	
jt/		Total net assets or fund balances (see instructions)	87,242	421,229	
ž	3136	Total liabilities and net assets/fund balances (see instructions)	27.400	400 570	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances	87,462	422,578	
_		I net assets or fund balances at beginning of year-Part II, colur	nn (a), line 30 (must	agree with	<u> </u>
•		of-year figure reported on prior year's return)			87,242
2		r amount from Part I, line 27a		2	396,363
3		er increases not included in line 2 (itemize) > APPRECIATION OF D	ONATED ASSETS	3	33,661
4		lines 1, 2, and 3		. 4	517,266
5		eases not included in line 2 (itemize) ► UNREALIZED GAIN ON STO			-96,037
6		I net assets or fund balances at end of year (line 4 minus line 5)—F			421,229
			 		Form 990-PF (2018)

Part		d Losses for Tax on Investments Indicate the control of the contr		(b) Ho	w acquired	(c) Date ac	coursed	(d) Date sold
_		ise, or common stock, 200 shs MLC Co)			Purchase Donation	(mo , day		(mo , day, yr)
1a	20,549 SHS GENERAL ELE	CTRIC			D	12/24/2	013	12/3/2018
b	.42 SHS WELLS FARO ADV	GLOBAL DIV OPPORTUNITY FUN	ID		Р	3/27/20)07	12/3/2018
<u>C</u>	BLACCKROCK ENHANCED	GLOBAL DIVIDEND TRUST			Р	12/31/2	018	12/31/2018
<u>d</u>								
_ <u> </u>		<u> </u>	(-) ((1)
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other ba opense of sa				ı or (loss)) mınus (g))
- <u></u> а	157,651			-	2,151			155,500
b	4				2			-1
с	811				0			811
d								
е								
	Complete only for assets sho	owing gain in column (h) and owned l	by the foundati	on on 12/	31/69			(h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col				less than -0-) or om col (h))
		23 01 12/01/03			<u>, </u>	 -		· · · · · · · · · · · · · · · · · · ·
<u>a</u> b	· 			·				
 _								
d								
е								
2	Capital gain net income o		also enter in l enter -0- in F			2		156,310
3	Net short-term capital gail	n or (loss) as defined in sections		•				100/010
		I, line 8, column (c) See instruc			-0- in \			
		<u> </u>			<u> J</u>	3		
Part	V Qualification Und	er Section 4940(e) for Redu	ced Tax on	Net Inv	<u>restment</u>	Income		
Was tl		section 4942 tax on the distribut qualify under section 4940(e). Do				ase period	1?	☐ Yes 🗸 No
1		ount in each column for each yea				aking any e	entries.	·
Cale	(a) Base penod years ndar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value	(c) e of noncha	ntable-use as	ssets		(d) abution ratio ivided by col (c))
	2017		9,018		67	0,250		058214
	2016		5,095			2,192		044301
	2015	34	1,071		71	4,518		047684
	2014	1;	2,835		68	9,913		018604
	2013		9,410		25	9,020		036329
_	T-4-1 -6 los - 4 los (al)							
2	Total of line 1, column (d)			. , ,		. 2	 	.205132
3		for the 5-year base period—div bundation has been in existence				. 3		.041026
4	Enter the net value of non-	charitable-use assets for 2018 fr	om Part X, Iır	ie 5		. 4		399,110
5	Multiply line 4 by line 3					. 5	<u></u>	16,374
6	Enter 1% of net investmen	nt income (1% of Part I, line 27b)				. 6	ļ 	1,689
7	Add lines 5 and 6					. 7		18,063
8		ns from Part XII, line 4				. 8		34,382
	If line 8 is equal to or great	iter than line 7, check the box in	Part VI, line	1b, and o	complete t	nat part us	ing a 19	% tax rate. See the

3

Part		instri	uctio	ns)
√ 1a	· Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.			
	Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)			
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1,689	 -
_	here All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of			
C	Part i, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			<u> </u>
3	Add lines 1 and 2		1,689	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)			<u> </u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		1,689	
6	Credits/Payments ⁻			1 1
a	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 340			
b,	Exempt foreign organizations—tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) . 6c			
d 7	Backup withholding erroneously withheld			 -
8	Total credits and payments. Add lines 6a through 6d		340	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		1,349	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ► 10		1,343	
11	Enter the amount of line 10 to be: Credited to 2019 estimated tax ▶ Refunded ▶ 11		_	
Part	VII-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in any political campaign?	1a		✓
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		1
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities	 		
C	Did the foundation file Form 1120-POL for this year?	1c		✓
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
_	(1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
2	on foundation managers. \$	2		
-	If "Yes," attach a detailed description of the activities.	-		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
4	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .	3		✓
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		
5	If "Yes," has it filed a tax return on Form 990-T for this year?	4b 5		✓
•	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	1		
_	By language in the governing instrument, or	İ		
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	1	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	1	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. ▶			
	UTAH			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G?</i> If "No," attach explanation	8b	<u></u>	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			
	4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV If "Yes,"]	1
	complete Part XIV	9		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	,_		,
	names and addresses	10		<u>√</u>
	Fo	orm 99	リーピト	(2018)

Par	tVII-A Statements Regarding Activities (continued)			
,			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		1
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement See instructions	12		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13_	<u> </u>	<u></u>
	Website address ► N/A			
14	***************************************	1 467-		
45	Located at ► 2159 SO. 700 EAST #200, SALT LAKE CITY, UTAH ZIP+4 ► Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here	8410		
15	and enter the amount of tax-exempt interest received or accrued during the year	•	•	
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Yes	No
10	over a bank, securities, or other financial account in a foreign country?	16		1
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country ▶			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	<u></u>	Yes	No
1a	During the year, did the foundation (either directly or indirectly).			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? . ☐ Yes ☑ No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			İ
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? . Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?	l	ł	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in			İ
_	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions .	1b		1
	Organizations relying on a current notice regarding disaster assistance, check here ▶ □			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
•	were not corrected before the first day of the tax year beginning in 2018?	1c	<u> </u>	1
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
а				
	6e, Part XIII) for tax year(s) beginning before 2018?			
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	1	Ì	
•	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20, 20, 20, 20, 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the		}	
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018)			
4a	toundation had excess business holdings in 2018) Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b 4a		1
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	Ta		"
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		1

Daa	_	G
raq	е	u

	VIES Statements Regarding Activities			4/20	iviay be r	equire	ed (Contil	nueu)			
· 5a	During the year, did the foundation pay or incur						_	_	ļ	Yes	No
	(1) Carry on propaganda, or otherwise attempt t						Yes	✓ No			
	(2) Influence the outcome of any specific public				55); or to c	arry on,		_	, '	<u> </u> '	
	directly or indirectly, any voter registration dr					•	∐ Yes	✓ No			_
	(3) Provide a grant to an individual for travel, stu						☐ Yes	✓ No	-		
	(4) Provide a grant to an organization other than			-	ation desc	ribed in	_		1.	,	
	section 4945(d)(4)(A)? See instructions					• • •	∐ Yes	✓ No	`		1
	(5) Provide for any purpose other than religious					cational	_				1
	purposes, or for the prevention of cruelty to						∐Yes	✓ No	١٠.		٠.]
b	If any answer is "Yes" to 5a(1)-(5), did any of the							scribed	-		
	in Regulations section 53.4945 or in a current no		-						5b	$ldsymbol{ldsymbol{ldsymbol{eta}}}$	
	Organizations relying on a current notice regards	-						▶□	'	١	1
С	If the answer is "Yes" to question 5a(4), does t				-	the tax	_				
	because it maintained expenditure responsibility		_				∐ Yes	☐ No			i
	If "Yes," attach the statement required by Regula									»	
6a	Did the foundation, during the year, receive any		=	-		emiums	_	_	•		·. 1
	•						∐ Yes	∐ No			لــــــا
b	Did the foundation, during the year, pay premiun	ns, dıre	ctly or indire	ctly, on	a persona	benefit	t contract	:? .	6b	لِبِــا	
	If "Yes" to 6b, file Form 8870						_	_	4		
7a	At any time during the tax year, was the foundation		-				∐ Yes	✓ No	_ 		لــــا
b	If "Yes," did the foundation receive any proceed		•					n? .	7b	igsquare	<u> </u>
8	Is the foundation subject to the section 4960 ta						_	_	٠,	2 , 4	
	remuneration or excess parachute payment(s) di						Yes	✓ No			-".
Par	VIII Information About Officers, Direc	tors, 1	rustees, F	ounda	ition Man	agers,	Highly F	Paid E	mploy	ees,	
	and Contractors										
	List all officers, directors, trustees, and found								•		
	(a) Name and address		e, and average rs per week	(Hr	mpensation not paid,	emplo	Contribution byee benefit	plans	(e) Expe	ense aco allowan	
		devot	ed to position	er	nter -0-)	and defe	erred compe	ensation	Other	anowan	
CLAIR	E D RYBERG	i									
	700 E #200 SALT LAKE CITY UT 84106	TRUST	EE 1HR/WK		0			. 0			0
	HEN M RYBERG										
	700 E #200 SALT LAKE CITY UT 84106	TRUST	EE 1HR/WK		0			0			0
	RYBERG NELSON	•		ŀ							
<u>2159 S</u>	700 E #200 SALT LAKE CITY UT 84106	TRUST	EE 1HR/WK		0	ļ	,	. 0			0
		<u></u>		L		L			1		
2	Compensation of five highest-paid employed "NONE."	es (oth	er than tho	se inci	uded on li	ne ı—:	see instr	uctions	s). It n	one,	enter
	"NONE."										
	(-) Name and address of a ship and a second second from \$60.00		(b) Title, and a	average	(4) Campa		(d) Contribi employee		(e) Expe	ense acc	count,
	(a) Name and address of each employee paid more than \$50,00	,0	hours per v devoted to p		(c) Compe	isation	plans and compens		other	allowan	ices
					 		Compani	3011011			
NONE			ļ								
				<u> </u>							
					1						
			ļ								
					L						
Total	number of other employees paid over \$50,000	<u> </u>	· · · ·	<u> </u>	<u> </u>	<u> </u>	<u> </u>	. ▶			
								F	orm 99	0-PF	(2018)

Part VIII	Information About Officers, Directors, Trustees, Foundation and Contractors (continued)		
3 Five	highest-paid independent contractors for professional services. See	instructions. If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
N/A			
	<u>·</u>		
		•	1
Total num	ber of others receiving over \$50,000 for professional services	· · · · · · <u> </u>	l i
Part IX-			
List the fo	undation's four largest direct charitable activities during the tax year. Include relevant stat	istical information such as the number of	Expenses
organizati	ons and other beneficiaries served, conferences convened, research papers produced, etc	<u> </u>	
1 N/A			
2			
3			
4			
Part IX-	Summary of Program-Related Investments (see instruction	ons)	
Describe	he two largest program-related investments made by the foundation during the tax year on I	ines 1 and 2	Amount
1 N/A			
2			
	rogram-related investments. See instructions		
3 N/A			
			-
Total. Add	lines 1 through 3	<u></u>	L
			Form 990-PF (2018

Part		ign found	lations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
_	purposes: Average monthly fair market value of securities	1a	256 040
a		1b	356,849
b	E College Coll	1c	36,721
C	· · · · · · · · · · · · · · · · · · ·	1d	202 570
d e	Total (add lines 1a, b, and c)	14	393,570
-	1c (attach detailed explanation)		
•		2	
2	Acquisition indebtedness applicable to line 1 assets	3	
3 4	Subtract line 2 from line 1d	-	393,570
7	· · · · · · · · · · · · · · · · · · ·	4	
5	Instructions)	5	5,904
6	Minimum investment return. Enter 5% of line 5	6	387,666
Part			19,383
rart	and certain foreign organizations, check here ► and do not complete this part.)	oundatio	115
1		1	
	Minimum investment return from Part X, line 6		19,383
2a		4	
b	Income tax for 2018. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	1,689
3	Distributable amount before adjustments Subtract line 2c from line 1	3	17,694
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	17,694
6 7	Deduction from distributable amount (see instructions)	6	
′	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,	1 _	
Dow	line 1	7	17,694
	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	<u> </u>	
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	34,382
þ	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	34,382
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	_	
_	Enter 1% of Part I, line 27b. See instructions	5	1,689
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	32,693
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	g whether	the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		- 990- PE (2018)

Part	XIII Undistributed Income (see instruction	ons)			
		(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1	Distributable amount for 2018 from Part XI, line 7				17,694
2	Undistributed income, if any, as of the end of 2018:				
а	Enter amount for 2017 only			32,848	
b	Total for prior years 20, 20, 20				
3	Excess distributions carryover, if any, to 2018				
а	From 2013				
b	From 2014			ĺ	
С	From 2015				
d	From 2016				
е	From 2017				
f	Total of lines 3a through e				
4	Qualifying distributions for 2018 from Part XII, line 4. ▶ \$ 34,382				
а	Applied to 2017, but not more than line 2a .			32,848	
b	Applied to undistributed income of prior years (Election required—see instructions)	·			
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2018 distributable amount .				1,534
e	Remaining amount distributed out of corpus				1,004
5	Excess distributions carryover applied to 2018	-	 		
•	(If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				·
b	Prior years' undistributed income. Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
	amount see instructions		·- 		
е	Undistributed income for 2017. Subtract line				
	4a from line 2a. Taxable amount—see instructions				
f	Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be				
	distributed in 2019	,			10 100
_	· · · · · · · · · · · · · · · · · · ·				16,160
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2013 not		 		
9	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2019.	-			
7	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:				
-	Excess from 2014				
b	Excess from 2015				-
c	Excess from 2016				-
d	Excess from 2017			•	,
	Excess from 2018		1.	İ	,

N/A

3	Grants and Contributions Paid During	the Year or Approv	ed for Fu	ture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient		
а	Paid during the year				
	ALL MEMORIAL HOSPITAL FOUNDATION STATE STREET, MCCALL, ID 83638	N/A	501(C)(3)	EDUCATIONAL COMPONENT FOR	34,080
				CAPITAL CAMPAIGN PHASE II	
				D 02	
	Total	· · · · · · · · · · · · · · · · · · ·	 1	▶ 3a	34,080
D	Approved for future payment				
					- <u></u>
	Takal			26	

Pa	Analysis of I	ncome-Producing Ac	ctivities				
Ente	r-gross amounts unless other	erwise indicated.	Unrelated bu	isiness income	Excluded by section	on 512, 513, or 514	(e)
		•	(a)	(b)	(c)	(d)	Related or exempt
			Business code	Amount	Exclusion code	Amount	function income (See instructions)
1	Program service revenue:					···-	(See mstructions)
	a						
	b						
	С						
	4						
	е						
	f						
	g Fees and contracts from	n government agencies			† 	 -	
2	Membership dues and asse	_			 		
3	Interest on savings and temp		-		14	223	
4	Dividends and interest from	-			14	12,787	
5	Net rental income or (loss)		-		14	12,707	
3	•				 		
	a Debt-financed property		-				
_	b Not debt-financed prop	-	<u> </u>	 			
6	Net rental income or (loss)			·			
7	Other investment income						
8	Gain or (loss) from sales of as	_			18	169,320	
9	Net income or (loss) from s				ļ		
10	Gross profit or (loss) from s	sales of inventory .					
11	Other revenue: a						
	b			.===			
	c						
	е						
12						169,320	
	е	(d), and (e)				169,320 13	
13	e Subtotal. Add columns (b),	(d), and (e) s (b), (d), and (e)					169,320
13 (See	e Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruc	(d), and (e) s (b), (d), and (e)	 as)				
13 (See Par Lin	e Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	e Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship	(d), and (e) s (b), (d), and (e)	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	e Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	e Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320
13 (See Par Lin	Subtotal. Add columns (b), Total. Add line 12, columns worksheet in line 13 instruct t XVI-B Relationship No. Explain below how accomplishment of t	(d), and (e) s (b), (d), and (e) tions to verify calculation of Activities to the A	s) accomplishm	ent of Exemp	ot Purposes	13	169,320

Part	XVII	Information Organization	n Regarding Tra	nsfers to and	Transactio	ns and R	elationshi	ps With I	Nonchar			
1	ın sed organı	ction 501(c) (o zations?	directly or indirectly ther than section	501(c)(3) org	anızations) or	n section	on 527, re	nization de lating to	escribed political		Yes	No
а			porting foundation to a noncharitable exempt organization of:						10/11			
										1a(1) 1a(2)		-
L	٠,	her assets .							•	14(2)		- 1
þ		transactions:	a nanaharitahla ay	omat organizat	uon.					1b(1)		
			a noncharitable ex					•	• •	1b(1)		-
	(2) Purchases of assets from a noncharitable exempt organization				• •	1b(2)	_					
	• •	-				•				1b(3)		
		imbursement ar	-						•	1b(5)		▼
		ans or loan gua	rantees	hin or frindraid			•	•	•	1b(6)		*
•					-					1c		-
		_	quipment, mailing li								four m	
ď	d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.											
(a) Line) Amount involved		haritable exempt o			ption of transfe					
N/A												
	<u> </u>											
	1						_		_			
				·								
												
											-	—
				<u> </u>								
			· · · · · · · · · · · · · · · · · · ·					<u> </u>				
											-	
												
									·			
			 _									
	descri	bed in section 5 s," complete the	ectly or indirectly a 601(c) (other than se following schedule	ection 501(c)(3)) or in section			· · · · ·		Ye	s 🗸	No
		(a) Name of organi	zation	(b) Type of organization			.	(c) Description of relationship				
							_					
												
	Linder	penatties of perium I	declare that I have examin	ad this return includ	ing accompanying i	chadulas and	statements and	I to the best of	my knowled	no and h	noliof it	ic taio
Sign		Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge correct, and gomplete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge										
	\ /	1 Mila 7	Skalo	11.4,19 DESIDENT					May the IR with the pre			
Here	Signal	ture of officer or trus	Y X Z	Date PRESIDENT Title					See instruc			
	<u> </u>	Print/Type preparer'		Preparer's sign		, -	I Date	 		TIN		
Paid		,		rieparer's signi		/	Date /		:k [✔] If [
Prepa	ırer 🖺	DENISE R JOHNS	SEN	wenese)~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	csen	1 10 [26]		employed	P01	07083	<u>5</u>
Use C	יוויי ⊢	Firm's name						Firm's EIN				
		Firm's address 🕨 🛭	PO BOX 776, KAYSV	ILLE, UT 84037				Phone no		rm 99 0		(2018)

Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

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

Employer identification number

84-1409429

R FOUNDATION Organization type (check one) Filers of: Section: Form 990 or 990-EZ ☐ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation ☐ 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year . . **>** \$_____

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

Name of organization Employer identification number R FOUNDATION 84-1409429

Parti	Contributors (see instructions). Ose duplicate copies of	rantin additional space is	needed.		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
1	CLAIRE RYBERG CHARITABLE REMAINDER UNITRUST 2159 SOUTH 700 EAST #200 SALT LAKE CITY, UT 84106	\$132,853	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
2	STEPHEN M RYBERG CHARITABLE REMAINDER TRUST 2159 SOUTH 700 EAS #200 SALT LAKE CITY, UT 84106	\$130,712	Person Payroll Noncash (Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person Payroll Oncash Complete Part II for noncash contributions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution		
		\$	Person		

Name of organization Employer identification number - R FOUNDATION 84-1409429

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (d) FMV (or estimate) from Date received Description of noncash property given Part I (See instructions) **150 SHARES ABBVIE INC** . 1 13,402 11/29/2018 (c) FMV (or estimate) (a) No. (b) from Date received Description of noncash property given (See instructions) Part I **55 SHARES APPLE INC** 11/29/18 9,914 (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (See instructions) Part I 100 SHARES C H ROBINSON WORLDWIDE . 1 9,164 (a) No. (c) (b) (d) FMV (or estimate) from Date received Description of noncash property given (See instructions) Part I **250 SHARES CARNIVAL CORP** 1 \$ 15,261 (a) No. (c) (d) (b) FMV (or estimate) from Description of noncash property given Date received (See instructions) Part I **50 SHARES COSTCO WHOLESALE** . 1 11,499 (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions) **85 SHARES DIGITAL REALTY** 9,618

Name of organization

R FOUNDATION

Employer identification number
84-1409429

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (d) (b) FMV (or estimate) from Date received Description of noncash property given (See instructions) Part I 100 SHARES HOME DEPOT 1 11,315 (c) FMV (or estimate) (a) No. (b) (d) from Date received Description of noncash property given (See instructions) Part I 200 SHARES PACCAR INC 11/29/18 12,319 (a) No. (c) (d) (b) from FMV (or estimate) **Date received** Description of noncash property given (See instructions) Part I (c) (a) No. (d) (b) FMV (or estimate) from **Date received** Description of noncash property given Part I (See instructions) (a) No. (c) (b) (d) FMV (or estimate) from **Date received** Description of noncash property given (See instructions) Part I (c) (a) No. (d) (b) FMV (or estimate) from Description of noncash property given **Date received** (See instructions) Part I

Name of organization

R FOUNDATION

84-1409429

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. Part II (a) No. (c) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions) 150 SHARES ABBVIE INC 2 11/29/2018 13,402 (c) FMV (or estimate) (a) No. (b) (d) from Date received Description of noncash property given (See instructions) Part I **55 SHARES APPLE INC** 2 9,914 11/29/18 (a) No. (c) (d) (b) FMV (or estimate) from **Date received** Description of noncash property given (See instructions) Part I 100 SHARES C H ROBINSON WORLDWIDE 2 9,164 (a) No. (c) (d) (b) from FMV (or estimate) Date received Description of noncash property given (See instructions) Part I **250 SHARES CARNIVAL CORP** 2 15,261 (a) No. (c) (d) (b) from FMV (or estimate) Date received Description of noncash property given (See instructions) Part I **50 SHARES COSTCO WHOLESALE** 2 11,499 (a) No. (c) (d) FMV (or estimate) from Description of noncash property given **Date received** Part I (See instructions) **85 SHARES DIGITAL REALTY** . . 2 9,618

Name of organization Employer identification number
• R FOUNDATION 84-1409429

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

	, , , , ,	· · · · · · · · · · · · · · · · · · ·	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	100 SHARES HOME DEPOT	\$11,315	11/29/2018
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
2	200 SHARES PACCAR INC	\$ 12,319	11/29/18
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	