Department of the Treasury Internal Revenue Service

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

▶ 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.

OMB No 1545-0052

		idal year 2017 of tax year beginning	, and ending			<del></del>		
Na	ime of fo	pundation				A Empl	oyer identification number	
1.	וביד ל	IN HUTER CHARITABLE TRUST	•		•	01	0064074	1
_		nd street (or P O box number if mail is not delivered to street address)	<del></del>		om/suite		-0964874	1
	59	•		ΚU	Onvoule		hone number (see instructions 8-466-9264	• •
		m, state or province, country, and ZIP or foreign postal code					0 400 9204	
, E	AGI	ID 83616				C If exe	mption application is pending,	check here '
G	Check	all that apply X Initial return Initial re	turn of a former public	: cha	arity	D 1 F	reign organizations, check he	re
			ed return ,		,			-
		X Address change Name c	•				preign organizations meeting to 5% test, check here and attach	
	2h a ala					,	, , , , , , , , , , , , , , , , , , , ,	
		type of organization X Section 501(c)(3) exempt priva	•		*, * .		ate foundation status was tem	nnated under
			ble private foundation		·		n 507(b)(1)(A), check here	,
		irket value of all assets at J Accounting method	X Cash	Accr	ual		foundation is in a 60-month ter	
	-	year (from Part II, col (c), Uther (specify)				unger	section 507(b)(1)(B), check h	ere 🕨 🗀
		* 1,523,203 (Part I, column (d) mus	t be on cash basis)	T	<u> </u>		r	T
2	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		(b) Net inv	estment	(c) Adjusted net	(d) Disbursements for chantable
23		the amounts in column (a) (see instructions) )	books		incon	ne	ıncome	purposes (cash basis only)
<del></del>	1	Contributions, gifts, grants, etc., received (attachischedule)	1,418,7	82		影對域勢	4965411114455	
മ	2	Check ► if the formation is increquired to attack sch B				T. F. N		
1	3	Interest on savings and temporary cash investments	5,6	67	en am a turações	5,667	5,667	
_	4	Dividends and interest from securities 2019	23,3	$\overline{}$	-	23,358	23,358	E Charles and the second secon
7	5a	Gross rents G				,		
Ž "	Ь	Net rental income or (loss)						
enue	6a	Net gain or (loss) from age of assets following in	22,7	43				
<u>ية</u>	Ь	Gross sales price for all assets on line 6a . 1,171,41		鲫				
လွှစ်	7	Capital gain net income (from Part IV, line 2)			na i, it . Pierder n. mel it . di i	22,743	Can as any and that a contract the same	
-	8	Net short-term capital gain					22,498	
	9	Income modifications					22,730	
٠	10a	Gross sales less returns and allowances						
	b	Less Cost of goods sold						
	c	Gross profit or (loss) (attach schedule)	Carrier Functions and sale sufficiency	4			e ille fog proudskyrte skerniger e	
	11	Other income (attach schedule) STMT 1	3!	51	a. e'pitrimperii's griffe' -	351	351	
	12	Total. Add lines 1 through 11	1,470,90	+		52,119	51,874	
	13	Compensation of officers, directors, trustees, etc	2/1/0/5	0		,,,,,,	31,074	[4] 14 [4] [4] [4] [4] [4] [4] [4] [4] [4] [4
es	14	Other employee salaries and wages		-		-		
kpenses	15	Pension plans, employee benefits		$\dashv$				
be	16a	Legal fees (attach schedule)		十				***
	ь	Accounting fees (attach schedule)		$\dashv$			•	
۷e	c	Other professional fees (attach schedule)		$\dashv$	<del></del>			
ati	17	Interest		十	• ,		3	t=- , ,
str	18	Taxes (attach schedule) (see instructions) STMT 2	2,38	36			2,386	<u> </u>
Operating and Administrative E	19	Depreciation (attach schedule) and depletion STMT 3	4,18				4,182	
Ę	20	Occupancy .		十			-,102	men and the supplier of 1995 of 1995
Ă	21	Travel, conferences, and meetings		$\dashv$				· · · · · · · · · · · · · · · · · · ·
uq	22	Printing and publications		+				
a	23	Other expenses (att sch ) STMT 4	18,74	10	1	5,279	3,461	
ij	24	Total operating and administrative expenses.	10//3	+		-,-,-	7, -01	137.
rat		Add lines 13 through 23	25,30	180	· · · · · · · · · · · · · · · · · · ·	5,279	10,029	1.7%
e l	25	Contributions, grits, grants paid	25,50	0				3 0
0	26	Total expenses and disbursements. Add lines 24 and 25	25,30	8	պ_ը« տ.շ. – պար'եմ դ 1	5,279	10,029	
	27	Subtract line 26 from line 12		這層				
	<i></i>	Excess of revenue over expenses and disbursements	1,445,59	3				
	b	Net investment income (if negative, enter -0-)			3 ************************************	6,840		
	c	Adjusted net income (if negative, enter -0-)					41,845	
For P		work Reduction Act Notice, see instructions.	Town a separate parameter State Language	- <del></del>	PRINTED TO THE	できた。近年の時間開	41,045	Fem 990-PF (2017)
DAA	F 1	and the state of the stat	•				<i>(</i> ,)	77
							- 1	

F	orm 990	O-PF (2017) MELVIN HUTER CHARITABLE TRUST	81-09648	/4	Page 2
	Part I	Balance Sheets Atlached schedules and amounts in the description column	Beginning of year	End o	of year
		Should be for sha-or-year amounts only (Geo instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing		129,944	129,944
	2	Savings and temporary cash investments		o ou come to a charge of bases.	
	3	Accounts receivable >			
i		Less allowance for doubtful accounts ▶			
	4	Pledges receivable >			
	l _	Less allowance for doubtful accounts ▶			
	5	Grants receivable		<u> </u>	
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see			
	_	instructions)			
	7	Other notes and loans receivable (att. schedule)  Less allowance for doubtful accounts  0			
				1	
Assets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges Investments – U S and state government obligations (attach schedule)			
٩	10a	Investments – corporate stock (attach schedule)  SEE STMT 5		868,547	938,168
ĺ	b	Investments – corporate bonds (attach schedule)  SEE STMT 6		301,284	305,091
	c 11	Investments – land, buildings, and equipment basis			
- {	• •	Less accumulated depreciation (attach sch.)			
	12	Investments – mortgage loans			<u> </u>
-	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis ► 150,000			
		Less accumulated depreciation (attach sch) > STMT 7 4,182		145,818	150,000
	15	Other assets (describe )			
	16	Total assets (to be completed by all filers – see the			
-		instructions. Also, see page 1, item I)	0	1,445,593	1,523,203
٦	17	Accounts payable and accrued expenses			
ĺ	18	Grants payable			
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
용	21	Mortgages and other notes payable (attach schedule)			
7	22	Other liabilities (describe ▶ )			
$\bot$	23	Total liabilities (add lines 17 through 22)	0	0	
		Foundations that follow SFAS 117, check here			
S		and complete lines 24 through 26 and lines 30 and 31.			
힏	24	Unrestricted		1,445,593	
or Fund Balance	25	Temporarily restricted			
	26	Permanently restricted			
틹		Foundations that do not follow SFAS 117, check here	,		
-		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
Net Assets	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
AS	29	Retained earnings, accumulated income, endowment, or other funds		4 445 500	
힐	30	Total net assets or fund balances (see instructions)	0	1,445,593	
	31	Total liabilities and net assets/fund balances (see		1 445 500	
	· PERSON	instructions)	]0	1,445,593	<b>电子影响了。第二次等于</b>
-	art II	Analysis of Changes in Net Assets or Fund Balances net assets or fund balances at beginning of year – Part II, column (a), line 30 (must	narao unth	<del></del>	
1		f-year figure reported on prior year's return)	agree with		0
2		amount from Part I, line 27a		$\left  \begin{array}{c} 1 \\ 2 \end{array} \right $	1,445,593
		increases not included in line 2 (itemize)		3	1,440,050
		nes 1, 2, and 3		4	1,445,593
		ases not included in line 2 (itemize)		5	
		net assets or fund balances at end of year (line 4 minus line 5) – Part II, column (b),	line 30	6	1,445,593
<u> </u>		The state of the s			- 000 DE

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If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

Part VI instructions

8 Enter qualifying distributions from Part XII, line 4

		0964874				F	age 4
<b>₽P</b> a	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948	- see instructions)					
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A"	on line 1					
	Date of ruling or determination letter (attach copy of letter if necessary—se	ee instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	· •	1			rnes, epephas	737
	here ▶ ☐ and enter 1% of Part I, line 27b						
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of						
-	Part I, line 12, col (b)		Mittel and Mildeline	eterraries			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter	-0-1	2				0
3	Add lines 1 and 2	, i	3				737
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter	0_\	4				0
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	-0-)	5				<del>737</del>
6	Credits/Payments						
	· 1 1						
a	2017 estimated tax payments and 2016 overpayment credited to 2017  6a						
b	Exempt foreign organizations – tax withheld at source  Toward with population for extension of time to file (Form 9869)	1 000					
C	Tax paid with application for extension of time to file (Form 8868)  6c	1,000					
d -	Backup withholding erroneously withheld 6d 6d	(71.0)					
7	Total credits and payments Add lines 6a through 6d O.R. OVERPAYMENT	(713)	7				287
8	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached		8			_	22
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶	9				472
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶	10				
11	Enter the amount of line 10 to be. Credited to 2018 estimated tax ▶	Refunded ▶	11				
≅ Ra	Statements Regarding Activities				Tokate All Ma		
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	d it		l		Yes	No
	participate or intervene in any political campaign?				1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the	e		,			
	Instructions for the definition				1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mate	rials					
	published or distributed by the foundation in connection with the activities						
C	Did the foundation file Form 1120-POL for this year?				1c		X
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 ▶ \$		_	ŀ			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imp	posed		ŀ			
	on foundation managers > \$						
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?				2		X
	If "Yes," attach a detailed description of the activities						24
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument,	articles of					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	s		İ	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			J	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		1	A\V	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
	If "Yes," attach the statement required by General Instruction T						
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either						
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory directions	that		J			
	conflict with the state law remain in the governing instrument?			ľ	6	X	
	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II	I. col. (c), and Part XV		Ī	7	X	
	Enter the states to which the foundation reports or with which it is registered. See instructions.	(-),					
	NONE						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gei	neral		ľ			
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	· · <del>- · · · · ·</del>		ŀ	8b	X	_08657555
	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j	ı)(3) or		Ì			
	4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017? See instructions for Part XIV			ا	era skat	eresta es	
	complete Part XIV	., , , ,		l	9		X
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing	ı their		}			
	names and addresses	STMT 8	3		40	x	
			<del>-</del>		10		

Form 990-PF.(2017) MELVIN HUTER CHARITABLE TRUST 81-0964874 Page 5 Statements Regarding Activities (continued) No Yes 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 X 11 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 X 12 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? X 13 13 Website address ▶ N/A MICHAEL HUTER Telephone no ▶ 208-466-9264 The books are in care of ▶ 459 E. RIVERSEDGE LN. 83616 Located at ▶ EAGLE 15 Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority 16 over a bank, securities, or other financial account in a foreign country? 16 See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes," enter the name of the foreign country Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. Yes 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? X No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes No X (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No X (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available for X the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after X No termination of government service, if terminating within 90 days ) Yes If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A 1b Organizations relying on a current notice regarding disaster assistance, check here Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that N/A were not corrected before the first day of the tax year beginning in 2017? 1c 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)) At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and Yes X No 6e, Part XIII) for tax year(s) beginning before 2017? If "Yes," list the years ▶ 20 . 20 , 20 , 20 Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to N/A all years listed, answer "No" and attach statement - see instructions ) 2b 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 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise X No at any time during the year? Yes If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the N/A foundation had excess business holdings in 2017) 3b Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017? 4b X

Form	990-PF (2017) MELVIN HUTER CHARITABLE TRUST	81-0	0964874		Page <b>6</b>
Pa	MAYIEB Statements Regarding Activities for Which Form	4720 May Be R	equired (conti	nued)	
5a	During the year did the foundation pay or incur any amount to				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 49)	45(e))?	$\Box$	res X No	
	(2) Influence the outcome of any specific public election (see section 4955), or to	carry on,			
	directly or indirectly, any voter registration drive?		$\Box$	res X No	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?		T v	res 🗓 No	
	(4) Provide a grant to an organization other than a charitable, etc., organization d	escribed in	_		
	section 4945(d)(4)(A)? See instructions			res X No	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or e	educational			
	purposes, or for the prevention of cruelty to children or animals?			res X No	
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under	the exceptions desi	_		
	Regulations section 53 4945 or in a current notice regarding disaster assistance?	· ·		N/A	5b
	Organizations relying on a current notice regarding disaster assistance, check her			▶ □	
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from			, ,	
-	because it maintained expenditure responsibility for the grant?		N/A 🗌	res No	
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)			E3	
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay	promume			
Va	on a personal benefit contract?	premiums	$\Box$	es X No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a persi	anal banasit santurat		es X No	6b X
D	If "Yes" to 6b, file Form 8870	onal benefit contract	, •		6b X
7-	·		т,	, <del>v</del>	
	At any time during the tax year, was the foundation a party to a prohibited tax shell			es X No	
- Martin Martin Park	If "Yes," did the foundation receive any proceeds or have any net income attributa Information About Officers, Directors, Trustees, Fo			N/A	7b
		unuation mana	igers, nightly r	ald Employe	es,
4 1	and Contractors ist all officers, directors, trustees, and foundation managers and their comp	anastian Cas inst			
	ist an officers, directors, trustees, and foundation managers and their comp	ensation. See mst	ructions.	Co-d-b-d	<del></del>
	(a) Nama and address	(b) Title, and average hours per week	(c) Compensation (If not paid,	<ul><li>(d) Contributions to employee benefit</li></ul>	(e) Expense account,
	(a) Name and address	devoted to position	enter -0-)	plans and deferred compensation	other allowances
	NIATI INTERP			сопрепзавоп	ļ
	CHAEL HUTER EAGLE	TRUSTEE			,
45	DE. RIVERSEDGE LN. ID 83616	2.00	0		0
		<u> </u>			<del></del>
					<del> </del>
		<u> </u>			<u> </u>
2	Compensation of five highest-paid employees (other than those included of "NONE."	1 line 1 – see instri	uctions). If none,	enter	
_	NONE.	T			
	(a) Name and address of such associations of such associations (FD 000)	(b) Title, and average		<ul><li>(d) Contributions to employee benefit</li></ul>	(e) Expense account,
	(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred	other allowances
		<u> </u>		compensation	
NON	IE.	1			ļ
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		.			
		<u> </u>	<u> </u>	·	
otal	number of other employees paid over \$50,000				0

Form 990-PF (2017) ME	ELVIN HUTER CHARITABLE TRUST	81-0964874	Page 7
	nation About Officers, Directors, Trustees, Foontractors (continued)	undation Managers, Highly Paid Em	ployees,
3 Five highest-paid in	ndependent contractors for professional services. See in	structions. If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
Total number of others rece	eiving over \$50,000 for professional services		<b>N</b>
Part X A Sumi	mary of Direct Charitable Activities		
	firect chantable activities duning the tax year. Include relevant statistical information nes served, conferences convened, research papers produced, etc.	n such as the number of	Expenses
	, RELIGIOUS, SCIENTIFIC, LITE L PURPOSES, OR THE PREVENTION R ANIMALS.		
2			
3	, <del>- 1</del> , , , , , , , , , , , , , , , , , ,		
4			
Part X-B Sumr	mary of Program-Related Investments (see ins	structions)	
	related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
All other program-related investment	ints See instructions		
•			-

Total. Add lines 1 through 3

	n 990-PF (2017) MELVIN HUTER CHARITABLE TRUST	81-096487	4	Page 8
P	Minimum Investment Return (All domestic foundation	ns must complete this part	Foreign founda	tions,
	see instructions )			
1	Fair market value of assets not used (or held for use) directly in carrying out cha	antable, etc ,		
	purposes			
а	Average monthly fair market value of securities		1a	919,872
b	Average of monthly cash balances		1b	88,586
С	Fair market value of all other assets (see instructions)		1c	0
d	Total (add lines 1a, b, and c)		1d	1,008,458
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation)	1e	0	
2	Acquisition indebtedness applicable to line 1 assets		2	0
3	Subtract line 2 from line 1d		3	1,008,458
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amo	ount, see		
	instructions)		4	15,127
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here	and on Part V, line 4	5	993,331
6	Minimum investment return. Enter 5% of line 5	•	6	49,667
P	Distributable Amount (see instructions) (Section 494)	2(i)(3) and (i)(5) private ope	erating foundation	
Meridania (Constitution of Constitution of Con	and certain foreign organizations check here ▶ ☐ ai			
1	Minimum investment return from Part X, line 6		1	49,667
2a	Tax on investment income for 2017 from Part VI, line 5	2a	737	
b	Income tax for 2017 (This does not include the tax from Part VI)	2b		
С	Add lines 2a and 2b		2c	737
3	Distributable amount before adjustments. Subtract line 2c from line 1		3	48,930
4	Recoveries of amounts treated as qualifying distributions		4	,,,,,
5	Add lines 3 and 4		5	48,930
6	Deduction from distributable amount (see instructions)		6	40,330
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and c	on Part XIII		<del></del>
•	line 1	mr art Am,	7	48,930
500000			<del></del>	40,930
₽R:	Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc	nurnoses		
a	Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26	, parposes	1a	0
Ь	Program-related investments – total from Part IX-B		1b	<del>_</del>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out cha	aritable etc	"	
_	purposes	anasie, etc ,		
3	Amounts set aside for specific charitable projects that satisfy the			
a	Suitability test (prior IRS approval required)		1 - 1	
b	Cash distribution test (attach the required schedule)		3a 3b	<del></del>
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, lin	is 8, and Part VIII, line 4	4	0
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net		4	
•	Enter 1% of Part I, line 27b See instructions	myesunent income	_	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4		6	
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent ye	om when coloulation whether the		
	THOSE THE UNIONS OF THE OWNS DE USECULT FAIT V, COLUMN (D), III SUDSEQUENT VE	ars when calculating whether the	iouridation)	

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

P	art XIII Undistributed Income	(see instructions)				
1	Distributable amount for 2017 from Part X	.t,	(a) Corpus	(b) Years pnor to 2016	(c) 2016	(d) 2017
	line 7					48,930
2	Undistributed income, if any, as of the end	l of 2017				
а	Enter amount for 2016 only					
b	Total for prior years 20, 20	, 20		T		
3	Excess distributions carryover, if any, to 2	017				
а	From 2012					
b	From 2013					
Ç	From 2014					
d	From 2015					
e	From 2016					
f	Total of lines 3a through e					
4	Qualifying distributions for 2017 from Part	XII,				
	line 4 ▶ \$					
а	Applied to 2016, but not more than line 2a					
b	Applied to undistributed income of prior ye	ars				
	(Election required – see instructions)					
С	Treated as distributions out of corpus (Elec	ction	•			
	required – see instructions)					
d	Applied to 2017 distributable amount					
е	Remaining amount distributed out of corpu	ıs				
5	Excess distributions carryover applied to 2	017				
	(if an amount appears in column (d), the sa	ame				
	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	t				
	line 4b from line 2b					
C	Enter the amount of pnor years' undistribut	led				
	income for which a notice of deficiency has	5				
	been issued, or on which the section 4942	(a)				
	tax has been previously assessed					
d	Subtract line 6c from line 6b Taxable					
	amount - see instructions					
е	Undistributed income for 2016 Subtract lin	е				
	4a from line 2a Taxable amount – see					
	instructions					
f	Undistributed income for 2017 Subtract lin					
	4d and 5 from line 1. This amount must be					
	distributed in 2018	<u></u>				48,930
•	Amounts treated as distributions out of corp	pus				
	to satisfy requirements imposed by section					
	170(b)(1)(F) or 4942(g)(3) (Election may be	e				
	required—see instructions)	ļ				
	Excess distributions carryover from 2012 no	ot				
	applied on line 5 or line 7 (see instructions)					
	Excess distributions carryover to 2018.					
	Subtract lines 7 and 8 from line 6a	ļ	St. webschaft für gebehr - vor weber			
	Analysis of line 9	12				
	Excess from 2013					
	Excess from 2014					
	Excess from 2015					
	Excess from 2016					
•	Excess from 2017	i i				

Form 990-PF (2017) MELVIN HUTER CHARITABLE TRUST
Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the		uture Payment	·	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid duning the year N/A				
Total	<del></del>	· · · · · · · · · · · · · · · · · · ·	▶ 3a	
b Approved for future payment N/A				
Tatal				
Total			<b>&gt;</b> 3b	

m 990-PF (2	2017) MELVIN HUTER CHARITA	BLE TRUST	81-	-0964874	, As Amend	JEU Pag
art XVI-A	Analysis of Income-Producing A					
er gross am	ounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	(e)
D		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions
-	Fees and contracts from government agencies dembership dues and assessments atterest on savings and temporary cash investments dividends and interest from securities deterntal income or (loss) from real estate. Debt-financed property. Not debt-financed property. Not debt-financed property deterental income or (loss) from personal property deterental income or (loss) from sales of assets other than inventory det income or (loss) from special events dross profit or (loss) from sales of inventory deterence a determined by their revenue a deter		<del></del> -			<u>.</u>
			<del></del>	<b>-</b> † †		
e						
· - <u>-</u>				<del></del>		
-						
		<del></del>	<del></del>	14	5,667	
				14	23,358	
				are moreover as as a second		
						3-31,51 - 60 11-01-21 - 1111 - 72
Not deb	ot-financed property					
let rental in	ncome or (loss) from personal property					
				14	351	
		<b></b>		18	22,743	
	•		<del></del>	<del>  </del>		<del></del>
		<del></del>				
				<del></del>		
·						
Subtotal Ac	dd columns (b), (d), and (e)		<del></del>	0	52,119	
					13	52,
		Accomplishmen	of Evenant C	···	<del></del>	
					anortantly to the	
N/A					<u> </u>	
			<u> </u>			
		-		·		
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						·
	<del> </del>					
						·

81-0964874

Part XVII	Information Regarding Transfers To and Transactions and Relationships With Noncharitable
	Exempt Organizations

	Exemp	t Organizatio	าร								
1	Did the organization d	rectly or indirectly	engage in any	of the follo	wing with any oth	er organization desc	ribed			Yes	No
	in section 501(c) (oth	er than section 50	1(c)(3) organiz	ations) or in	section 527, rel	ating to political					
	organizations?										
а	Transfers from the rep	porting foundation	to a noncharita	ble exempt	organization of						
	(1) Cash								1a(1)		X
	(2) Other assets								1a(2)	unica neces	X
	Other transactions										
	(1) Sales of assets to								1b(1)		<u> </u>
	(2) Purchases of asset	ets from a noncha	ritable exempt	organizatioi	n				1b(2)		_X
	(3) Rental of facilities		ner assets						1b(3)		X
	(4) Reimbursement a	-							1b(4)		X
	(5) Loans or loan gua								1b(5)		<u>X</u>
	(6) Performance of se			_					1b(6)		X
	Sharing of facilities, ed								1c		X
	If the answer to any of										
	value of the goods, otl				=						
	value in any transaction										
		ount involved	(c) Name of nonc	hantable exem	pt organization	(d) Descript	ion of transfers, t	ransactions, and sharing arr	angements	<u> </u>	
N/A	<b>`</b>										
						<del> </del>					
		<del></del>				<del> </del>					
					<del></del>						
		<del></del>			<del></del>	<del> </del>					
	<del>'</del>	<del></del>			<del></del>	<del> </del>					
			<del></del>		<del></del>	<del> </del>		<del></del>			
	···	<del></del>	<del></del>	·		<del> </del>	<del></del>				
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					-·			<del> </del>			
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					<del></del>	<del> </del>		<del></del>			
					<del></del>	<u> </u>		<del></del>			
	Is the foundation direc					kempt organizations			C7	<b>T</b>	
	described in section 50	• • •		s)) or in sec	tion 5277				Yes	X	No
	If "Yes," complete the		<del></del>	/b) To a c o f o		<del>1</del>					
	(a) Name of or	ganization		(b) Type of a	organization	<del> </del>	(¢) Descri	otion of relationship			
	/A					<del></del>					
			<del></del>				<del></del>				
		<del></del>	<del></del>			<del></del>		<del></del>			
	<del></del>		<del></del>			<del> </del>		<del></del>			
	Under penalties of peni	Inv. I declare that I have	e examined this rel	turn including	accompanying sched	ules and statements, and t	to the hest of my	knowledge and helief it is	tnie		
						nich preparer has any know					—
C:								May the IRS discu			- [
Sign	1		1					See instructions	X		No
Here		١., ١	F / \.	100	112	12.119	TRUS	me:e	_=_	_=	لــــــــــــــــــــــــــــــــــــــ
	Signature of officer	or Injetee	1 Jan	100	Date	12/11	Trtle	TEE			
	<del></del>	<del></del>					Title	<del></del>	<del></del>		
	Print/Type preparer's	name			Preparer's signatur	+	)	Date	1 1	heck	
Paid	TOPTE DIRICH	IN CDA		/	TORTE AND			11/25	/19 s	elf-emp	loyed
Prepai	rer JORIE DUNCA	RIPLEY I	) MADO	COMT		CAN, CPA	<del></del>	701	2445	142	
Use O	nly Firm's name ▶	217 W GI				10.00			2448 0476		
	Firm's address			86-283							
		MARIEM,	0300	00-203		<del></del>		Phone no 208	-466	-92	

## Schedule B

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

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

As Amended

OMB No 1545-0047

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

2017

Name of the organization

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

Employer identification number

MELVIN HUTER C	HARITABLE '	TRUST	81-0964874	
Organization type (check one)	)			
Filers of:	Section:			
Form 990 or 990-EZ	501(c)(	) (enter number) organization		
	4947(a)(1) none	exempt charitable trust not treated as a private foundation		
	527 political org	anızatıon		
Form 990-PF	<b>X</b> 501(c)(3) exem	pt private foundation		
	4947(a)(1) none	exempt chantable trust treated as a private foundation		
	501(c)(3) taxab	le private foundation		
Check if your organization is cov. Note: Only a section 501(c)(7), instructions		Rule or a Special Rule. on can check boxes for both the General Rule and a Speci	al Rule See	
General Rule				
	roperty) from any one	or 990-PF that received, during the year, contributions tota contributor. Complete Parts I and II. See instructions for de	_ <del>-</del>	
Special Rules				
regulations under section 13, 16a, or 16b, and that \$5,000, or (2) 2% of the	ons 509(a)(1) and 170 at received from any o a amount on (i) Form 9	c)(3) filing Form 990 or 990-EZ that met the 33 <sup>1</sup> / <sub>3</sub> % suppor (b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-E ne contributor, during the year, total contributions of the green part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete	Z), Part II, line eater of (1) Parts I and II	
contributor, during the ye	ear, total contribution	c)(7), (8), or (10) filing Form 990 or 990-EZ that received fr s of more than \$1,000 <i>exclusively</i> for religious, charitable, s evention of cruelty to children or animals. Complete Parts I	cientific,	
contributor, during the ye contributions totaled moduring the year for an ex	ear, contributions exc ore than \$1,000 If this exclusively religious, ch to this organization bec	c)(7), (8), or (10) filing Form 990 or 990-EZ that received fr lusively for religious, charitable, etc., purposes, but no such box is checked, enter here the total contributions that were arritable, etc., purpose. Don't complete any of the parts unli- cause it received nonexclusively religious, charitable, etc., or	n received ess the	
990-EZ, or 990-PF), but it <b>must</b> :	answer "No" on Part I	neral Rule and/or the Special Rules doesn't file Schedule B V, line 2, of its Form 990, or check the box on line H of its l set the filing requirements of Schedule B (Form 990, 990-E	Form 990-EZ or on its	

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

PAGE 1 OF 1

Page 2

Name of organization
MELVIN HUTER CHARITABLE TRUST

Employer identification number 81-0964874

Part	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed						
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
1	MELVIN HUTER ESTATE 217 W. GEORGIA AVE., STE. 100 NAMPA ID 83686	\$ 1,418,782	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 Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	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 Payroll Noncash (Complete Part II for noncash contributions)				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		\$	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 Payroll Noncash (Complete Part II for noncash contributions)				

PAGE 1 OF 1 Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Employer identification number Name of organization 81-0964874 MÉLVIN HUTER CHARITABLE TRUST Partil Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (a) No. (c) (b) (d) FMV (or estimate) from Description of noncash property given Date received Part I (See instructions.)

,		AS	Amended			
Form 990-PF		pital Gains and Loss	es for Tax on I	nvestment Inc	come	2017
Name	,			, and origing	Employer Iden	tification Number
MELVIN HUTE	R CHARIT	ABLE TRUST			81-0964	874
(a)	List and describe the ki 2-story brick warehouse	ind(s) of property sold, e.g., real estate, e, or common stock, 200 shs MLC Co		(b) How acquired P-Purchase D-Donation	(C) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
(1) UBS [4498	]	· · · · · · · · · · · · · · · · · · ·		P	01/01/17	12/31/1
2) UBS [4504				P	01/01/17	12/31/1
3) UBS [4505				P	01/01/17	12/31/1
4) UBS [4510		·		P	01/01/17	12/31/1
5) WELLS FAR				P	01/01/17	12/31/1
6) WELLS FAR			·	P	01/01/17	12/31/1
7) WELLS FAR				P	01/01/17	12/31/1
8) WELLS FAR				P	01/01/17	12/31/1
9) WELLS FAR				P	01/01/17	12/31/1
10) WELLS FAR	<del> </del>			P	01/01/17	12/31/1
11) WELLS FAR		]		P	01/01/17	12/31/1
12) UBS [4498						
13) UBS [4504						
14) WELLS FAR						
15) WELLS FAR	GO [9092]	]				
(e) Gross sales price	,	(f) Depreciation allowed (or allowable)	(g) Cost or o	other basis se of sale	(h) Gain (e) plus (f)	or (loss) minus (g)
1) 42,0	083			43,975		-1,892
28,				29,372	1	-590
3) 171,8				172,131		-307
338,2				333,429		4,781
	903		-	10,674	· · · · · · · · · · · · · · · · · · ·	-771
332,2				321,876		10,420
221,3				208,799		12,580
3) 1,3				1,335		
9) 14,4				13,331		1,163
	145			4,579		-1,134
7,4	120			9,172		-1,752
(2)	86		· · · · · · · · · · · · · · · · · · ·			86
13)	56		·			56
4)	75					75
5)	28					28
		in column (h) and owned by the f	(auguston on 12/21/60			
Complete only for ass		(j) Adjusted basis as of 12/31/69	(k) Excess	s of cot (i)	(I) Gains (Col col (k), but not less Losses (from c	(h) gain minus than -0-) <b>Or</b>
(i) FMV as of 12/31/6	" I			(I). IT anv	1	
····			over cor	(), if any		_1 000
)			over cor	(), if any	-	-1,892 -590
)			over con	(J), π any	-	-590
) )			Over Co.	(J), if any	-	-590 -307
) ) )			Over Co.	()), if any		-590 -307 4,781
) ) ) )			Over Co.	(j), if any		-590 -307 4,781 -771
) ) ) )				(j), if any	1	-590 -307 4,781 -771 10,420
) ) ) )				(j), if any	1	-590 -307 4,781 -771
) ) ) ) )				(j), if any	1	-590 -307 4,781 -771 10,420 12,580
) ) ) ) )				(J), if any	1	-590 -307 4,781 -771 10,420 12,580
) ) ) ) ) ) ) ) ) ) ) ) ) ) ) )				(J), if any	]	-590 -307 4,781 -771 10,420 12,580 1,163 -1,134
) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) 1)				(J), if any	]	-590 -307 4,781 -771 -0,420 -2,580 1,163 -1,134 -1,752
) ) ) ) ) ) ) ) ) ) ) ) ) ) ) ) 1) 2)				(J), if any	]	-590 -307 4,781 -771 10,420 12,580 1,163 -1,134 -1,752 86
(i) FMV as of 12/31/69				(J), if any	]	-590 -307 4,781 -771 10,420 12,580 1,163 -1,134 -1,752

## Form 990-PF - Reason for Amending Return

### Description

THIS RETURN IS BEING AMENDED TO CORRECT THE AVERAGE MONTHLY FAIR VALUE REPORTED ON LINES 1A AND 1B IN PART X, AND USED IN CALCULATING THE MININIMUM INVESTMENT RETURN. AS A RESULT OF THE THESE CHANGES, THE DISTRIBUTABLE AMOUNT CALCUATED IN PART XI, LINE 7 HAS DECREASED TO \$49,380.

ADDITIONALLY, CAPITAL GAINS ON PUBLICLY TRADED SECURITIES, THAT WERE PREVIOULSY MISCLASSIFIED AS NON-INVESTMENT PROPERTY GAINS, HAVE BEEN CORRECTED TO BE INCLUDED IN THE CALCULATION OF NET INVESTMENT INCOME ON PART I, LINE 7B, INCREASING THE NET INVESTMENT INCOME AND CALCULATION OF EXCISE TAX DUE IN PART VI.

#### Taxable Interest on Investments

Description	 Amount	Unrelated Business Code	Exclusion Code	Postal Code	US _Obs (\$ or %)
INTEREST	\$ 5,667		14	-	
TOTAL	\$ 5,667				

## **Taxable Dividends from Securities**

Description	Amount	Unrelated Business Code	Exclusion Code	
DIVIDENDS	\$ 23,358		14	 
TOTAL	\$ 23,358			

#### Other Investment Income

Description	Amount		Unrelated Business Code	Exclusion Code	Postal Code
UBS - OTHER INVESTMENT INCOME	\$	351		14	
TOTAL	\$	351			