SEForm 990-PF

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

29**491**348**0**34019

2018

y() Opp	artment	t of the Treasury venue Service Go to www.irs.gov/For					Open to Public Inspection
		3	and ending			<u> </u>	
	me of for		and onding		A Emplo	yer identification number	
		A Å	TEN		·		
Ŋ	lott	Family Foundation, Inc. \mathbb{N}	P.F U		82-	-0517818	
-Ni	imber an	d street (or P O box number if mail is not delivered to street address)	Ro	oom/suite		one number (see instructions	5)
		ox 1702			208	<u>3-375-1771 </u>	<u> </u>
	-	n, state or province, country, and ZIP or foreign postal code			C If exem	nption application is pending,	check here
<u></u>	etc	hum ID 83340					. —
G	Check		irn of a former public cl	harity	D 1 For	reign organizations, check he	re 🕨 📘
		Final return Amended	return	0.5		reign organizations meeting t	· · ·
		Address change X Name cha			859	% test, check here and attach	computation
H (Check	type of organization X Section 501(c)(3) exempt private	e foundation		E If priva	te foundation status was term	ninated under
	Section	n 4947(a)(1) nonexempt charitable trust Other taxab	le private foundation		section	1 507(b)(1)(A), check here	▶ [_
I F	aır mai	rket value of all assets at J Accounting method	X Cash Acc	hual 1	F If the fo	oundation is in a 60-month te	rmination
е	nd of y	ear (from Part II, col (c), Other (specify)			under	section 507(b)(1)(B), check h	ere 🕨 📘
<u> </u>	ne 16)	▶ \$ 5,919,665 (Part I, column (d) must	be on cash basis)				
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net inve	etment	(c) Adjusted net	(d) Disbursements for charitable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions).)	expenses per books	incom		income	purposes
	Τ.				·····		(cash basis only)
2	1	Contributions, gifts, grants, etc., received (attach schedule)	2,040,345				
()	2	Check ▶ if the foundation is not required to attach Sch B	8,946		8,946	DECI	EIVED
	3	Interest on savings and temporary cash investments	85,628	t	5,628	- REU	170
1/L	4	Dividends and interest from securities	65,626	C	3,626	- lel	
٦	5a	Gross rents				14 NOA 3	 2 2019 3 -
	b	Net rental income or (loss)	322,749			101	
7 2020 Revenue	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales pince for all assets on line 6a 7,042,943				OGD	EN, UT
	b			2 35	3,410		
, F.	7	Capital gain net income (from Part IV, line 2)		2,30	,3,410	0	
	8	Net short-term capital gain Income modifications					
11	10a	1				· · · · · · · · · · · · · · · · · · ·	
i.	1 .	Gross sales less returns and allowances Less Cost of goods sold					
a	b	Gross profit or (loss) (attach schedule)					
SCANNED	11	Other income (attach schedule) Stmt 1	-35		42		<u> </u>
Ź	12	Total. Add lines 1 through 11	2,457,633	2.44	8,026	0	
₹	13	Compensation of officers, directors, trustees, etc	0		,,,,,,,		<u></u>
9 Ses	14	Other employee salaries and wages					
	15	Pension plans, employee benefits		<u> </u>			
. 7 201 Expen	16a	Legal fees (attach schedule)		·			-
E X	b	Accounting fees (attach schedule) Stmt 2	4,500		2,250		2,250
	c	Other professional fees (attach schedule)					
DEC strativ	17	Interest	· 587		587		
St.	18	Taxes (attach schedule) (see instructions) Stmt 3	11,844		1,844		
37 ninii	19	Depreciation (attach schedule) and depletion					
d d	20	Occupancy					
	21	Travel, conferences, and meetings	-				
and	22	Printing and publications					
	23	Other expenses (att sch) Stmt 4	58,496	5	8,271		225
ો ધ ટે ધૃ (Operating	24	Total operating and administrative expenses.					
4 ≥ erat		Add lines 13 through 23	75,427	6	2,952	0	2,475
) c	25	Contributions, gifts, grants paid See Statement 5	135,000				135,000
″ 0	26	Total expenses and disbursements. Add lines 24 and 25	210,427	6	2,952	0	137,475
	27	Subtract line 26 from line 12	. ,				······································
2	a	Excess of revenue over expenses and disbursements	2,247,206		1		
111/	K 1/2	Net investment income (if negative enter -0-)	, ,		5.074	***************************************	

Adjusted net income (if negative, enter -0-)

0

3,758,527 end-of-year figure reported on prior year's return) 2 2,247,206 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ▶ 3 4 6,005,733 4 Add lines 1, 2, and 3 5 5 Decreases not included in line 2 (itemize) ▶ 6 6,005,733

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

Form 990-PF (2018)

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

1,458,199

137,475

7

7 Add lines 5 and 6

Part VI instructions

8 Enter qualifying distributions from Part XII, line 4

	1990-PF (2018) Mott Family Foundation, Inc. 82-051/818					F	age 4		
la	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see instruction	ions)		,					
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	- 11	•						
	Date of ruling or determination letter (attach copy of letter if necessary—see instructions)								
b									
	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)								
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)		2	ļ			0		
	Add lines 1 and 2	ļ	3	ļ		47,	<u>701</u>		
				0					
	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5			47,	<u>701</u>		
	Credits/Payments								
	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 19,2	65	:						
)	Exempt foreign organizations – tax withheld at source 6b								
	Tax paid with application for extension of time to file (Form 8868) 6c 59,0	00							
	Backup withholding erroneously withheld 6d								
	Total credits and payments Add lines 6a through 6d		7			78,	<u> 265</u>		
	Enter any penalty for underpayment of estimated tax. Check here X if Form 2220 is attached	[8			1,	154		
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ [9						
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	▶ [10			29,	410		
	Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ 20,500 Refunded	▶ [11			8,	910		
	rt VII-A Statements Regarding Activities								
	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		X		
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the								
	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 materials								
	published or distributed by the foundation in connection with the activities								
c Did the foundation file Form 1120-POL for this year?									
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year						X		
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$								
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed		_						
	on foundation managers > \$								
	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								
	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 changes				3	X			
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X		
	If "Yes," has it filed a tax return on Form 990-T for this year?			N/A	4b				
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			-1/ -1	5		X		
	·				3				
	If "Yes," attach the statement required by General Instruction T								
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either								
	Distance of the consequence instance of the								
	By language in the governing instrument, or				1 4				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that					v			
	• 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?	d D			6	X			
	• 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? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and	d Par	t XV		6 7	X			
	● 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? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ ID	d Par	t XV						
	● 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? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Enter the states to which the foundation reports or with which it is registered. See instructions. ▶	d Par	t XV			X			
	● 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? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ ID	d Par	t XV						
	 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? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Enter the states to which the foundation reports or with which it is registered. See instructions. ID If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General. 	d Par	t XV		7	X			
	 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? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Enter the states to which the foundation reports or with which it is registered. See instructions ► ID 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 General Instruction G? If "No," attach explanation 	d Par	t XV		7	X			
	 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? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Enter the states to which the foundation reports or with which it is registered. See instructions ► ID 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 General Instruction G? If "No," attach explanation is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 	d Par	t XV		7	X	x		
	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? Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Enter the states to which the foundation reports or with which it is registered. See instructions ▶ ID 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 General Instruction G? If "No," attach explanation 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 taxable year beginning in 2018? See instructions for Part XIV If "Yes,"	d Par	t XV		7 8b	X	x		

2	2 –	Λ	5	1	7	Ω	1	Ω
п.	_		- 3	1	•	a		63

Page 5

P	art VII-A Statements Regarding Activities (continued)				
				Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the	!			
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	1	11		X
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		_ X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?		13	X	
	Website address ► N/A				
14	The books are in care of ▶ Grow Rasmussen LLP Telephone no ▶ 2	:08-3	75-	177	1
	12550 W Explorer Dr Ste 200				
	Located at ▶ Bolse ID ZIP+4 ▶	33713	}		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here				▶ [
	and enter the amount of tax-exempt interest received or accrued during the year				
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority			Yes	No
	over a bank, securities, or other financial account in a foreign country?		16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of				
	the foreign country				
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required				
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a					
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	No .		.	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	_			
	disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes Yes	No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	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)?	No			
	(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)	No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations				
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	N/A	1b		
	Organizations relying on a current notice regarding disaster assistance, check here	▶ 🔲			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that				
	were not corrected before the first day of the tax year beginning in 2018?		1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private				
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))				
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and	_			
	6e, Part XIII) for tax year(s) beginning before 2018?	No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20				
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	ļ			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	,_			
	all years listed, answer "No" and attach statement – see instructions)	N/A	2b		
C	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				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	_			
	at any time during the year?	No			
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		1		
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the		Ī		
	foundation had excess business holdings in 2018)	N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	ļ	4a		X
b	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 2018?		4b		<u> </u>
		Fo	orm 99	0-PF	(2018)

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	990-PF (2018) Mott Family			0517818	:		P	age 6
Pa	ırt VII-B Statements Regardi	ng Activities for Which Forn	<u>n 4720 May Be f</u>	Required (con	tınued)			
5a	During the year did the foundation pay or	rincur any amount to					Yes	No
	(1) Carry on propaganda, or otherwise a	_			Yes X No		-	
	(2) Influence the outcome of any specific		or to carry on,		= =			
	directly or indirectly, any voter registi	ration drive?			Yes X No			
	(3) Provide a grant to an individual for tra				Yes X No			
	(4) Provide a grant to an organization of	her than a charitable, etc , organization	on described in					
	section 4945(d)(4)(A)? See instruction	ons			Yes X No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational							
	purposes, or for the prevention of cru	•			Yes X No			
b	If any answer is "Yes" to 5a(1)-(5), did a	ny of the transactions fail to qualify u	nder the exceptions of	described in	4-			
	Regulations section 53 4945 or in a curre	ent notice regarding disaster assistan	ce? See instructions		N/A	5b		
	Organizations relying on a current notice	anizations relying on a current notice regarding disaster assistance, check here						
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax								
	because it maintained expenditure respo	nsibility for the grant?		N/A 🗌	Yes 📙 No	1		
	If "Yes," attach the statement required by	Regulations section 53 4945–5(d)						
6a	Did the foundation, during the year, recei	ve any funds, directly or indirectly, to	pay premiums					
	on a personal benefit contract?			□ .	Yes 🔀 No			
b	Did the foundation, during the year, pay p	premiums, directly or indirectly, on a p	personal benefit cont	ract?		6b		<u> </u>
	If "Yes" to 6b, file Form 8870				C 23			
7a	At any time during the tax year, was the f	oundation a party to a prohibited tax	shelter transaction?		Yes X No			
b	If "Yes," did the foundation receive any p	roceeds or have any net income attrib	outable to the transac	ction?	N/A	7b		
8	Is the foundation subject to the section 4	960 tax on payment(s) of more than \$	\$1,000,000 in	m .	. 🖼			
	remuneration or excess parachute payme			<u></u> _	Yes X No		1	
Pa		ficers, Directors, Trustees, F	oundation Man	agers, Highly	Paid Employe	es,		
	and Contractors							
<u> 1 L</u>	ist all officers, directors, trustees, and	foundation managers and their co	npensation. See in:	structions.	, ————————————————————————————————————			
			(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(a) Ev	oense ac	count
	(a) Name and ac	ddress	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		r allowan	
	<u> </u>				compensation			
	mothy Mott	Ketchum	President					
PO	Box 1702	ID 83340	1.00	0	0	<u> </u>		0
Мı	chael Marks	Woodside	Secretary					
30	Trail Lane	CA 94062	0 50	0				0
Ca	sey Mott	Santa Monica	Director					
13	4 Chautauqua Blvd Apt 17	CA 90402	0.50	0	0			0
				L		<u> </u>		
2	Compensation of five highest-paid em	ployees (other than those included	l on line 1 – see ins	tructions). If non	e, enter			
	"NONE."			 -	T -			
			(b) Title, and average		(d) Contributions to employee benefit	(e) Exc	ense aco	count
	(a) Name and address of each employee p	aid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		allowan	
	_				compensation	<u> </u>		
NO	NE							
								
								
		· · · · · · · · · · · · · · · · · · ·	 					
			 	<u> </u>				
T		2.000	<u> </u>	l	L			
rotal	number of other employees paid over \$50),000					<u> </u>	<u> </u>
					Fo	m 99 (v-PF	(2018)

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Part VIII	Information About Officers, Directors, Trustees, Foundand Contractors (continued)	lation Managers, Highly Paid E	mployees,
3 Five high	est-paid independent contractors for professional services. See instr	uctions. 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 receiving over \$50,000 for professional services		•
Part IX-A	Summary of Direct Charitable Activities		
	s four largest direct charitable activities during the tax year. Include relevant statistical information other beneficianes served, conferences convened, research papers produced, etc.	such as the number of	Expenses
1 N/A			
2			
3			
4			
7			
Part IX-B	Summary of Program-Related Investments (see instru	ictions)	
1 N/A	rgest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
All other program-re	elated investments. See instructions		
3			
Total. Add lines	1 through 3		
i otai. Add iines	r unough 5		

excess distributions carryover to 2	013.		1	į.
Subtract lines 7 and 8 from line 6a	Ĺ	1,681,938		
Analysis of line 9				
Excess from 2014	187,003			
Excess from 2015	478,255			
Excess from 2016	316,139			
Excess from 2017	700,541			
Excess from 2018				
		·		990 DE

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840902 10/28/2019 8 15 AM

82-0517818 Form 990-PF (2018) Mott Family Foundation, Inc. Page 11 Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, . Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid dunng the year Wood River Community YMCA None PC PO Box 6801 Youth Services 20,000 Ketchum ID 83340 Swiftsure Ranch Therapeutic EC None 114 Calypso Ln Support General Fund 25,000 Bellevue ID 83313 Cowboy Ball, SF Museum of Modern Art PC 151 3rd St None Support General Fund 20,000 San Francisco CA 94103 California College of the Arts None PC 5212 Broadway Support General Fund Oakland CA 94618 10,000 Wood River Community YMCA PC PO Box 6801 Ketchum ID 83340 Youth Services 25,000 The Spot PC PO Box 4227 None Ketchum ID 83340 Support General Fund 15,000 Community School PO Box 2118 Building | Campaign 10,000 Sun Valley ID 83353 Center Sun Valley Performing Arts 120 Main Street South Ketchum ID 83340 Argyros Performing Arts Ctr Campaign 10,000 135,000 ▶ 3a Total Approved for future payment N/A

▶ 3b

Total

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o	Z	_	.,		L	•	O	_	О	

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Part XVI-A	Analysis of Income-Producing A	ctivities				
Enter gross amounts unless otherwise indicated		T .	ed business income	Excluded by	y section 512, 513, or 514	(e)
	•	(a) Business code	(b) Amount	(c) Exclusion	(d) Amount	Related or exempt function income
1 Program se	ervice revenue			code	_	(See instructions)
·						
-						
				ļ <u> </u>		
f						
g Fees a	nd contracts from government agencies					
2 Membersh	p dues and assessments					
3 Interest on	savings and temporary cash investments			14	8,946	
4 Dividends	and interest from securities			14	85,628	
5 Net rental i	ncome or (loss) from real estate	; E	* * * * * * * * * * * * * * * * * * *	7 11111 1.1	Etantentherfuneth -	PROBLEM CONTROL
a Debt-fi	nanced property					<u></u> .
b Not de	ot-financed property					
6 Net rental i	ncome or (loss) from personal property					
7 Other inves	stment income		-77	14	42	
8 Gain or (los	ss) from sales of assets other than inventory			18	2,353,410	
9 Net income	e or (loss) from special events					
	t or (loss) from sales of inventory					
11 Other rever	nue a	_				
b		_				
d		_				
е					0.440.006	
	dd columns (b), (d), and (e)	<u> </u>			2,448,026	2,447,949
	line 12, columns (b), (d), and (e)				13	2,441,949
	t in line 13 instructions to verify calculations)		ant of Evampt D			
Part XVI-E	Relationship of Activities to the A Explain below how each activity for which incom					
Line No.	accomplishment of the foundation's exempt pur					ns)
N/A	accomplishment of the foundation's exempt put	poses (other than	by providing rando re	. Систритр	(000	,
21/22						
		.				•
						-
					· · · · · · · · · · · · · · · · · · ·	
						
			· · · · · ·			
						•
			· · · · · ·			
						
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Form 9	990-PF (20 ⁻	18) Mott Fam	ily Fo	undation,	Inc.	82-0517818		Pa	ge 13
_						ons and Relationships V	Vith Noncharitable E		
1 0	Old the orga		directly engag	ge in any of the foll	lowing with any	other organization described		Yes	No
(I	n section 5	01(c)' (other than sec	tion 501(c)(3) organizations) or i	ın section 527, ı	relating to political			
c	organization	s?						ł	1
a T	Transfers fro	om the reporting found	dation to a n	nonchantable exemp	ot organization o	of			
(1	1) Cash						<u>1a(1)</u>	<u> </u>	X
(2) Other a	ssets					<u>1a(2)</u>	┝┷	X
	Other trans								
-		f assets to a nonchan		_			1b(1)	 	X
-		ses of assets from a r			on		1b(2)	├	X
-	•	of facilities, equipment		ssets			1b(3)		X
•		rsement arrangement	is.				1b(4) 1b(5)		X
•		or loan guarantees ance of services or m	nemberehin (or fundraleina eolicit	tations		1b(6)	 	X
•	•	actities, equipment, n		-			1c		X
	•		-	•		ımn (b) should always show the		•	
						f the foundation received less th			
						f the goods, other assets, or ser			
	Line no	(b) Amount involved		ne of nonchantable exemp			transactions, and sharing arrangement	ents	
N/A									
			 						
			 		 		<u>-</u> -		
			 				<u> </u>		
			 						
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-		<u> </u>							
							70. F13 F 7		

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			†						
-			1						
d	lescribed in	ation directly or indire section 501(c) (other inplete the following so	than section	•		x-exempt organizations		es X	No No
		a) Name of organization		(b) Type of o	rganization	(c) Desc	ription of relationship		
N	/A			 		<u> </u>			
				1					
	Under per	nathes of perjury, I declare the	hat I have exami	ined this return, including	accompanying scho	edules and statements, and to the best of	of my knowledge and belief, it is trui	е,	
Sign Here	correct, ar	nd complete. Declaration of	preparer (other to	than taxpayer) is based o	on all information of	which preparer has any knowledge	May the IRS discuss this with the preparer shown to See instructions.		No
	Signa	ature of officer or trustee	. 4	<u> </u>	Date				
	' 1	pe preparer's name	, ,		Preparer's signatu		Date		\Box
Delta!			mun ld	a-	July	4		Check self-em	_
Paid	Stepl	nen J. Larson	, CPA		Stephen J	Larson, CPA	10/28/19		
Prepare	l Firm's n	ame 🛛 Grow					PTIN		
Use Or	Firm's a			plorer Dr	Ste 200		Firm's EIN 🗵		
		Boise	e, ID	83713		· · · · · · · · · · · · · · · · · · ·	Phone no 208-37		
							Form 9	90-PF	(2018)

Page 13

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

2018

Employer identification number

82-0517818 Mott Family Foundation, Inc. Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 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 X 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 (entering) "N/A" in column (b) instead of the contributor name and address), 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)

Page 1 of 1

Name of organization

Employer identification number

82-0517818 Mott Family Foundation, Inc. Contributors (see instructions) Use duplicate copies of Part I if additional space is needed Part i (c) (d) (a) (b) **Total contributions** Type of contribution Name, address, and ZIP + 4 No. 1 Timothy Mott Person PO Box 1702 Payroll 2,040,345 X Noncash ID 83340 Ketchum (Complete Part II for noncash contributions) (a) (d) Type of contribution Name, address, and ZIP + 4 **Total contributions** No. Person **Payroll** Noncash \$ (Complete Part II for noncash contributions) (c) (d) (a) Type of contribution **Total contributions** No. Name, address, and ZIP + 4 Person **Payroll** \$ Noncash (Complete Part II for noncash contributions) (d) (a) (b) (c) Type of contribution Name, address, and ZIP + 4 **Total contributions** No. Person Payroll \$ Noncash (Complete Part II for noncash contributions) (c) (d) (a) (b) Name, address, and ZIP + 4 Type of contribution **Total contributions** No. Person Payroll \$ Noncash (Complete Part II for noncash contributions) (d) (b) (c) (a) Type of contribution Name, address, and ZIP + 4 **Total contributions** No. Person **Payroll** Noncash \$ (Complete Part II for noncash contributions)

Page 1 of 1

age 3

Name of organization

Moth Family Foundation Inc

Employer identification number

Mott Family Foundation, Inc. 82-0517818 Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed Part II (a) No. (c) (d) (b) from FMV (or estimate) Date received Description of noncash property given (See instructions) Part I 29,000 shs Katerra 1 2,005,930 03/15/18 \$ (a) No. (c) (d) (b) FMV (or estimate) from Date received Description of noncash property given (See instructions) Part I 205 shs Electronic Arts (EA) 1 03/01/18 25,243 \$ (c) (a) No. (b) (d) FMV (or estimate) from Date received Description of noncash property given (See instructions) Part I 562 shs Quantenna Communications 1 06/08/18 9,172 (c) (a) No. (b) (d) from FMV (or estimate) Description of noncash property given Date received (See instructions) Part I \$ (c) (a) No. (d) (b) FMV (or estimate) from **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 (See instructions) Part I \$

3.

4.



ARTICLES OF AMENDMENT

(Non-profit)

Title 30, Chapters 21 and 30, Idaho Code Filing fee: \$30 typed, \$50 not typed Complete and submit the application in <u>duplicate</u>.

FILED EFFECTIVE

;-

1	The name of the corporation is:
	MF Foundation, Inc.

If the corporation has been administratively dissolved and the corporate name is no longer available for use, the amendment(s) below must include a change of corporate name.

2 The text of each article being amended

Article I - Name is hereby amended to read as follows:

ARTICLE I - NAME

The name of the Corporation is the Mott Family Foundation, Inc.

The date of adoption of the amendment(s) was:	
Manner of adoption (check one):	
Each amendment consists exclusively of matters which do tion 30-30-705, Idaho Code, and was, therefore, adopted tors (Please fill spaces below) a. The number of directors entitled to vote was. b The number of directors that voted for each amendment of the number of directors that voted against each amendment.	by the incorporators, or by the board of direc-
The amendment consists of matters other than those describerefore adopted by the members. (Please fill spaces below)	cribed in section 30-30-705, Idaho Code, and was,
The number of members entitled to vote was:	
b. The number of members that voted for each amendment was.	
c The number of members that voted against each amendment was	Secretary of State use only IDAHO SECRETARY OF STATE 02/20/2018 05:00

Printed Name

Timothy Mott, President

Signature

Revised 06/2015

CK:10783 CT:84162 BH:1627557

1@ 30.00 = 30.00 NON PROF A #2

C131582

For	•	Capital Gains and Losse	s for Tax on Inv		come	2018
Ļ		ndar year 2018, or tax year beginning		, and ending	Employer idea	ntification Number
Name	e ,				Employer idea	idiicadon Number
Mo	ott Family Four	dation. Inc.			82-0517	818
		ribe the kind(s) of property sold, e.g., real estate, warehouse, 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)	29,000 shs Kat	erra		D	02/21/15	12/31/18
(2)	Publicly Trade			P		
(3)	Publicly Trade			P		
(4)		ST K-1 IV		P		
(5)	Capital Gains-			P		
(6)	Capital Gains-	·LT K-1 IV		P	_1	
(7)	Capital Gains-	ST K-1 VIII		P		
(8)	Capital Gains-	LT K-1 VIII		P		
(9)	Capital Gains	Distribution				
(10)						
(11)						
(12)					ļ	
(13)						
(14)						
<u>(15)</u>			<u></u>		<u></u>	<u> </u>
				······································	T	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other plus expense of	basis sale	(h) Gain (e) plus (f)	or (loss) minus (g)
/1\	2,005,930			1,450	2.0	04,480
(1) (2)	33,794			8,234		25,560
(3)	4,949,104			9,352		69,752
(4)	295		-/			295
(5)	42,067					42,067
(6)	10,767					10,767
(7)				497		-497
(8)	914					914
(9)	72					72
(10)						
(11)						
(12)						
(13)						
(14)						
<u>(15)</u>						·
	Complete only for assets show	ring gain in column (h) and owned by the	e foundation on 12/31/69			
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of over col (j), i	col (i) fany	(I) Gains (Col col (k), but not les Losses (from	(h) gain minus s than -0-) Of col (h))
(1)						04,480
(2)						25,560
(3)					2	69,752
(4)						295
(5)						42,067
(6)						10,767
(7)						-497
<u>(8)</u>						914
(9)						72
(10)						
(11)						
(12)						
<u>(13)</u>						
(14)						
(15)		1	I		1	

(9) (10)

Totals

840902 10/	28/2019 8 15 AM						
		Oth	ner Notes an	d Loans Recei	vable		2040
Form	990-PF	For onlander year 2019	or toy your boginnin	~	and anding		2018
Name		For calendar year 2018,	or tax year beginnin	<u>g</u>	, and ending	Employer Ide	ntification Number
_Mot	tt Family	Foundation, Inc	z			82-0517	7818
For	m 990-PF,	Part II, Line	7 - Addit	ional Infor	mation		
		Name of borrower			Relationship to disc	usulified nerson	
(1) \$	Sun Valley	Perf Arts-Brid	ige loan		Trelationship to disc	qualified person	
(2)							
(3)							
<u>(4)</u>		 					
<u>(5)</u>	·						
(6)							
(7) (8)				<u> </u>		 -	
(9)							
(10)							
	Original amount	t	Maturity				Interest
	borrowed	Date of loan	date		Repayment terms		rate
(1)							
(2)							,
(4)							<u> </u>
(5)							
(6)	-						
(7)				· · · · · · · · · · · · · · · · · · ·	·		
(8)							
(9)							
(10)			<u> </u>				1 -
					, ,		
	Sec	curity provided by borrower			Purpose o	f loan	Ł.
(1)							
(2)						<u> </u>	
(3)							
(4)							
(5) (6)							
(7)		<u> </u>	_				
(8)							
(9)					<u> </u>		
(10)		······································					
	Considera	ation furnished by lender		Balance due at beginning of year	Balance due a end of year		r market value
(1)					3,000,0	000	3,000,000
(2)							
(3)							
(4)					 		
<u>(5)</u>							
(6) (7)							
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Federal Statements

840902 Mott Family Foundation, Inc. 82-0517818 FYE: 12/31/2018

Description		Total	In	Net Investment	Adjusted Net	Ç.	Charitable Purpose
Accounting Fees	ဟ	4,500	တ	2,250	\$	\$	2,250
Total	%	4,500	ς»	2,250	٥ «	\$	2,250

Statement 3 - Form 990-PF, Part I, Line 18 - Taxes

Statement 2 - Form 990-PF, Part I, Line 16b - Accounting Fees

Charitable Purpose	W-	\$
Adjusted Net	v.	\$
Net vestment	1,096 708 40	1,844
<u>u</u>	ጭ	w
Total	1,096 708 40 10,000	11,844
	ς	ς,
Description	Merrill Lynch 2-Foreign tax K-1 Legacy Venture IV -Foreign t K-1 Legacy Venture VIII-Foreign 2018 Estimate payments	Total

82-0517818 FYE: 12/31/2018	Federal Statements	atements		10/28/2019 8:15 AM
Statem	Statement 4 - Form 990-PF, Pa	90-PF, Part I, Line 23 - Other Expenses	xpenses	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
Expenses Investment Advisory Fees Wire Fees Annual Account Fee K-1 - Legacy Venture IV LLC K-1 - Legacy Venture VIII LLC Total	23,689 300 150 10,606 23,751 \$	23,689 150 75 10,606 23,751 \$	0	150 75
Statement 5 - For	- Form 990-PF, Part I, Line 25	- Noncash Contributions,	utions, Gifts, Grants	
Amount Description 20, 000 25, 000 10, 000 15, 000 10, 000 10, 000	FMV Explanation	Book Value Amount 20, 000 25, 000 20, 000 10, 000 15, 000 10, 000 10, 000	Book Value Explanation	Date 1/04/18 1/02/18 1/02/18 10/01/18 10/01/18 4/27/18
Statement 6 - Form 990-PF	Form 990-PF, Part II, Line 10b		- Corporate Stock Investments	
Description Publicly Traded Securities	Beginning of Year	End of Year \$ 2,120,974	Basis of Valuation	Fair Market Value
7	2,936,	2,120,	· 4·	2,024,

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Federal Statements

840902 Mott Family Foundation, Inc. 82-0517818 FYE: 12/31/2018

Statement	Form	- Form 990-PF, Part II, Line 13 - Other Investments	Line 13	- Otner Inves	ments		ı
Description	ļ	Beginning of Year		End of Year	Basis of Valuation	LL.	air Market Value
Legacy Venture IV LLC EST Legacy Venture VIII LLC Timing Differences	ഗ	464,660 159,807	ω	370,535 436,711 -1.604	Cost	S	370,535 436,711 -1,604
Total	۰ ا	624,467	ν, 	805,642		۰ ها	805,642

10/28/2019 8:15 AM

840902 Mott Family Foundation, Inc.
Federal Statements

FYE: 12/31/2018

Statement 8 - For	m 990-PF	, Part II	, Line 22	- Other Liabilities

Description	eginning of Year		End of Year
Other Investment Liabilities	\$ 1,884	\$.	
Reimbursable Expenses	 		10,000
Total	\$ 1,884	\$	10,000

Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager		Amount
Timothy Mott	\$_	
Total	\$_	0

Form 990-PF, Part XV, Line 1b - Managers Who Own 10% or More Stock

Name of Manager	Amount	
None	\$	_
Total	\$	0