








For calendar year 2017, or tax year beginning 07-01-2017, and ending 06-30-2018

Name of foundation SKYSTONE FOUNDATION INC		A Employer identification number 94-2842873	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 1954		Room/suite	B Telephone number (see instructions) (928) 226-0937
City or town, state or province, country, and ZIP or foreign postal code FLAGSTAFF, AZ 86002		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Amended return <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2 Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 26,748,928	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) (Part I, column (d) must be on cash basis)	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	998,809			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	157,628	157,628	157,628	
	4 Dividends and interest from securities	28,833	28,833	28,833	
	5a Gross rents				
	b Net rental income or (loss) -4,319				
	6a Net gain or (loss) from sale of assets not on line 10 	59,719			
	b Gross sales price for all assets on line 6a 12,582,423				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	1,244,989	186,461	186,461	
	13 Compensation of officers, directors, trustees, etc	215,834			215,834
	14 Other employee salaries and wages	87,347			26,291
	15 Pension plans, employee benefits	12,148			12,148
	16a Legal fees (attach schedule) 	28,771			28,771
	b Accounting fees (attach schedule) 	41,746			41,746
	c Other professional fees (attach schedule) 	9,616			9,616
	17 Interest				
	18 Taxes (attach schedule) (see instructions) 	2,216	2,181	2,181	35
	19 Depreciation (attach schedule) and depletion 	400,247			
	20 Occupancy	4,500			4,500
	21 Travel, conferences, and meetings	62,433			62,433
	22 Printing and publications	3,238			3,238
	23 Other expenses (attach schedule) 	97,960	2,138	2,138	95,772
	24 Total operating and administrative expenses. Add lines 13 through 23	966,056	4,319	4,319	500,384
	25 Contributions, gifts, grants paid	0			0
	26 Total expenses and disbursements. Add lines 24 and 25	966,056	4,319	4,319	500,384
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	278,933			
	b Net investment income (if negative, enter -0-)		182,142		
				182,142	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing	176,645	157,290	157,291
	2	Savings and temporary cash investments	3,566,621	7,034,540	7,047,123
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)	2,705,514		
	b	Investments—corporate stock (attach schedule)			
	c	Investments—corporate bonds (attach schedule)	4,218,791		
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____	377,172		
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶ _____ 13,947,142 Less accumulated depreciation (attach schedule) ▶ 2,831,301	11,471,968	11,115,841	13,947,142
15	Other assets (describe ▶ _____)	1,106,732	5,597,372	5,597,372	
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	23,623,443	23,905,043	26,748,928	
Liabilities	17	Accounts payable and accrued expenses		2,667	
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22)		2,667	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted	13,640,631	18,246,539	
	25	Temporarily restricted	9,982,812	5,655,837	
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds			
	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
	29	Retained earnings, accumulated income, endowment, or other funds			
	30	Total net assets or fund balances (see instructions)	23,623,443	23,902,376	
31	Total liabilities and net assets/fund balances (see instructions) .	23,623,443	23,905,043		

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	23,623,443
2	Enter amount from Part I, line 27a	2	278,933
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3	4	23,902,376
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	23,902,376

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick 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)
1a See Additional Data Table			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	<div> <div>If gain, also enter in Part I, line 7</div> <div>If (loss), enter -0- in Part I, line 7</div> </div>	2	-51,247
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8		3	-51,005

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?



Yes



No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	804,013		
2015	660,927		
2014	417,793		
2013	442,926		
2012	428,806		

2 Total of line 1, column (d)	2	
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	
4 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5	4	0
5 Multiply line 4 by line 3	5	
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	1,821
7 Add lines 5 and 6	7	1,821
8 Enter qualifying distributions from Part XII, line 4	8	500,384

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

Part VI 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 <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input checked="" type="checkbox"/> and enter 1% of Part I, line 27b	1	1,821
c	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2	
3	Add lines 1 and 2.	3	1,821
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	1,821
6	Credits/Payments		
a	2017 estimated tax payments and 2016 overpayment credited to 2017	6a	
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments. Add lines 6a through 6d.	7	
8	Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶	9	1,821
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	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? <i>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</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
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 ▶ \$ _____		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ _____		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
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? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	No
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
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 conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ AZ _____		
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 General Instruction G? <i>If "No," attach explanation</i> .	8b	Yes
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 2017 or the taxable year beginning in 2017 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	Yes
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	No

Part VII-A Statements Regarding Activities (continued)

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		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW.RODENCRAFTER.COM	13	Yes	
14	The books are in care of SKYSTONE FOUNDATION Telephone no (928) 226-0937			

Located at **PO BOX 1954 FLAGSTAFF AZ** ZIP+4 **86002**

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country ▶	16	Yes	No

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.

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> 1b			
c	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 2017? <input type="checkbox"/> 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))			
a	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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) (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). <input type="checkbox"/> 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	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 foundation had excess business holdings in 2017). <input type="checkbox"/> 3b			
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? <input type="checkbox"/> 4a			No
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 2017? <input type="checkbox"/> 4b			No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a	During the year did the foundation pay or incur any amount to				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?		5b		
	Organizations relying on a current notice regarding disaster assistance check here.	<input type="checkbox"/>			
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes <input type="checkbox"/> No			
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		6b	No	
	<i>If "Yes" to 6b, file Form 8870</i>				
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b		

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
JAMES BOWLES 1200 W LOWER COCONINO FLAGSTAFF, AZ 86001	SECURITY 000 00	61,056		

Total number of other employees paid over \$50,000. ▶

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
VASTCO 425 INDUSTRIAL DR CHINO VALLEY, AZ 86323	CONSTRUCTION	3,275,734
DCG DESIGN PO BOX 1954 FLAGSTAFF, AZ 86002	DESIGN	991,624
THE WLB GROUP 500 N BEAVER STREET FLAGSTAFF, AZ 86001	ENGINEERING	110,358
PAUL D BUSTAMANTE 16 E ROUTE 66 STE 202 FLAGSTAFF, AZ 86001	ARCHITECTURE	108,956

Total number of others receiving over \$50,000 for professional services. ▶

Part IX-A

Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 NATURE OF PERCEPTION IN CONJUNCTION WITH THE SCIENCE OF ASTRONOMY IN THE FORM OF EDUCATIONAL ACTIVITIES CARRIED OUT BY PRACTICAL DEMONSTRATION AND PUBLISHED ARTICLES TO THE GENERAL PUBLIC CONSTRUCTION OF BUILDINGS FOR SCIENTIFIC STUDY IS TAKING PLACE AT THE PRESENT TIME	966,056
2	
3	
4	

Part IX-B

Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments See instructions	
3	

Total. Add lines 1 through 3 ▶

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	0
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	0
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	
2	Acquisition indebtedness applicable to line 1 assets.	2	
3	Subtract line 2 from line 1d.	3	0
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	0
6	Minimum investment return. Enter 5% of line 5.	6	0

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	
2a	Tax on investment income for 2017 from Part VI, line 5.	2a	
b	Income tax for 2017 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	500,384
b	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	500,384
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	1,821
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	498,563

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2017				
a Enter amount for 2016 only.				
b Total for prior years 20____, 20____, 20____				
3 Excess distributions carryover, if any, to 2017				
a From 2012.				
b From 2013.				
c 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 ▶ \$ <u>500,384</u>				
a Applied to 2016, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2017 distributable amount.				
e Remaining amount distributed out of corpus	500,384			
5 Excess distributions carryover applied to 2017 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	500,384			
b Prior years' undistributed income Subtract line 4b from line 2b				
c 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				
e Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018				
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 2012 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2013.				
b Excess from 2014.				
c Excess from 2015.				
d Excess from 2016.				
e Excess from 2017.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☒ 4942(j)(3) or ☐ 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

Tax year	Prior 3 years			(e) Total	
(a) 2017	(b) 2016	(c) 2015	(d) 2014		
0				0	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed	500,384	804,038	654,646	417,793	2,376,861
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c	500,384	804,038	654,646	417,793	2,376,861

3 Complete 3a, b, or c for the alternative test relied upon

a "Assets" alternative test—enter

(1) Value of all assets

(2) Value of assets qualifying under section 4942(j)(3)(B)(i)

b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.

c "Support" alternative test—enter

(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)

(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).

(3) Largest amount of support from an exempt organization

(4) Gross investment income

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
Total			▶ 3a	
b <i>Approved for future payment</i>				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated

Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue				
a _____				
b _____				
c _____				
d _____				
e _____				
f _____				
g Fees and contracts from government agencies				
2 Membership dues and assessments.				
3 Interest on savings and temporary cash investments				
				157,628
4 Dividends and interest from securities.				
				28,833
5 Net rental income or (loss) from real estate				
a Debt-financed property.				
b Not debt-financed property.				
6 Net rental income or (loss) from personal property				
				-4,319
7 Other investment income.				
8 Gain or (loss) from sales of assets other than inventory				
				59,719
9 Net income or (loss) from special events				
10 Gross profit or (loss) from sales of inventory				
11 Other revenue a _____				
b _____				
c _____				
d _____				
e _____				
12 Subtotal Add columns (b), (d), and (e).				
				241,861
13 Total. Add line 12, columns (b), (d), and (e). 13				
				241,861

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes[illegible]

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

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No
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 No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.	***** 2018-11-08 Date	***** Title	May the IRS discuss this return with the preparer shown below (see instr)? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer or trustee			

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed <input checked="" type="checkbox"/>	PTIN
	ROGER T BOLLARD		2018-11-12		P00328058
	Firm's name ▶ ROGER T BOLLARD PLLC				Firm's EIN ▶ 54-2085905
	Firm's address ▶ PO BOX 1913 FLAGSTAFF, AZ 860021913				Phone no (928) 774-5001

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick 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)
AMERICAN HONDA FIN CORP	P	2017-03-15	2017-12-11
GENERAL ELEC CO	P	2017-03-15	2017-12-06
WORLD FINL NETWORK CR CARD	P	2017-03-14	2017-10-16
ANHEUSER BUSCH INBEV WORLDWIDE	P	2017-03-01	2017-07-15
HSBC USA INC NEW	P	2017-03-21	2018-01-16
BANK MONTREAL	P	2017-11-28	2018-04-09
INTERNATIONAL BUSINESS MACHS	P	2017-03-15	2017-09-14
BARCLAYS DRYROCK ISSUANCE TR	P	2017-03-20	2017-11-15
JPMORGAN CHASE & CO	P	2017-03-22	2017-08-15
BNP PARIBAS / BNP PARIBAS US	P	2017-03-15	2017-09-14

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
200,000		200,380	-380
150,000		154,128	-4,128
144,000		144,034	-34
150,000		150,110	-110
100,000		100,036	-36
350,000		350,000	
200,000		204,296	-4,296
300,000		300,012	-12
200,000		200,568	-568
150,000		150,612	-612

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-380
			-4,128
			-34
			-110
			-36
			-4,296
			-12
			-568
			-612

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick 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)
ORACLE CORP	P	2017-03-23	2017-10-15
BP CAP MKTS P L C	P	2017-02-28	2018-02-13
PACCAR FINL CORP	P	2017-02-27	2018-03-09
CATERPILLAR FINL SVCS CORP	P	2017-03-30	2017-08-18
PHILIP MORRIS INTL INC	P	2017-11-28	2018-05-16
CISCO SYS INC	P	2017-03-01	2017-02-28
ROYAL BK CDA GLOBAL MEDIUM	P	2017-11-28	2018-06-07
CITIBANK CR CARD ISSUANCE TR	P	2017-03-16	2018-02-07
SHELL INTL FIN B V	P	2017-03-20	2017-11-10
COMCAST CORP	P	2017-02-27	2018-02-15

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
200,000		200,102	-102
150,000		150,408	-408
200,000		200,306	-306
200,000		200,018	-18
300,000		305,511	-5,511
150,000		150,299	-299
400,000		400,000	
370,000		382,618	-12,618
265,000		265,000	
150,000		156,483	-6,483

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			-102
			-408
			-306
			-18
			-5,511
			-299
			-12,618
			-6,483

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick 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)
TOYOTA MTR CR CORP	P	2017-06-12	2018-01-12
DEER JOHN CAP CORP	P	2017-03-01	2018-03-12
UBS A G STAMFORD BRH MEDIUM TERM	P	2017-03-15	2017-12-20
DISCOVER CARD EXECUTION NT TR	P	2017-03-13	2017-10-16
UNITED STATES TREAS NT	P	2017-03-17	2017-07-15
DUKE ENERGY CAROLINAS	P	2017-06-12	2018-01-15
UNITED STATES TREAS NTS	P	2017-03-23	2017-08-15
FEDERAL HOME LN BK	P	2018-01-10	2018-04-11
UNITEDHEALTH GROUP INC	P	2017-03-06	2017-07-17
FIFTH THIRD BK CINCINNATI OHIO	P	2017-02-27	2018-02-28

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
350,000		350,277	-277
150,000		149,838	162
200,000		206,254	-6,254
250,000		250,078	-78
4,543,000		4,543,643	-643
350,000		357,735	-7,735
388,000		388,076	-76
996,423		996,423	
150,000		150,156	-156
200,000		200,098	-98

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			-277
			162
			-6,254
			-78
			-643
			-7,735
			-76
			-156
			-98

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick 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)
WELLS FARGO & CO	P	2017-03-03	2018-01-16

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
150,000		150,171	-171

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-171

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation				
(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
RICHARD ANDREWS	PRESIDENT 1 00	0	0	0
3100 N FORT VALLEY RD BLDG 8 FLAGSTAFF, AZ 86001				
MICHAEL GOVAN	SECRETARY 1 00	0	0	0
3100 N FORT VALLEY RD BLDG 8 FLAGSTAFF, AZ 86001				
ANN TENENBAUM	SECRETARY 1 00	0	0	0
3100 N FORT VALLEY RD BLDG 8 FLAGSTAFF, AZ 86001				
ALICE TISCH	TREASURER 1 00	0	0	0
3100 N FORT VALLEY RD BLDG 8 FLAGSTAFF, AZ 86001				
SUZANNE DEAL BOOTH	DIRECTOR 1 00	0	0	0
3100 N FORT VALLEY RD BLDG 8 FLAGSTAFF, AZ 86001				
CARMEN GIMENEZ	DIRECTOR 1 00	0	0	0
3100 N FORT VALLEY RD BLDG 8 FLAGSTAFF, AZ 86001				
JAMES TURRELL	DIRECTOR 5 00	0	0	0
3100 N FORT VALLEY RD BLDG 8 FLAGSTAFF, AZ 86001				
YVETTE LEE	CEO EXEC DIR 40 00	215,834	0	0
3100 N FORT VALLEY RD BLDG 8 FLAGSTAFF, AZ 86001				

TY 2017 Accounting Fees Schedule**Name:** SKYSTONE FOUNDATION INC**EIN:** 94-2842873**Accounting Fees Schedule**

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INDIRECT ACCOUNTING FEES	41,746			41,746

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Depreciation Schedule

Name: SKYSTONE FOUNDATION INC

EIN: 94-2842873

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
LAND IMPROVEMENTS	1995-06-30	53,866	53,866	S/L	15 0000				
FENCING	1994-02-22	13,741	13,296	S/L	15 0000				
LAND	1985-06-30	192,000							
LAND	1996-06-30	58,000							
LAND IMPROV - WELL	1996-07-01	5,500	5,500	S/L	15 0000				
LAND	1998-06-30	147,790							
LAND IMPROVEMENTS	1997-12-31	8,760	8,760	150DB	15 0000				
METES & BOUNDS HOUSE	1999-10-29	82,618	37,510	S/L	39 0000	2,118			
LAND	1999-12-31	564,845							
JOHN DEERE TRACTOR	2002-02-12	7,038	7,038	S/L	5 0000				
LAND	2002-06-30	25,323							
LAND	2003-02-28	25,093							
LAND	2003-09-08	25,476							
LAND	2003-02-28	25,092							
LAND	2003-12-29	48,131							
LODGE FURNITURE	2003-09-30	26,765	26,765	S/L	7 0000				
EQUIPMENT	2005-01-01	2,287	2,287	S/L	5 0000				
LODGE FURNITURE	2005-12-31	835	835	S/L	7 0000				
CONSTRUCTION IN PROGRESS	2006-12-31	21,726							
STORAGE UNIT	2006-10-30	7,228	7,228	S/L	7 0000				

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
CONSTRUCTION IN PROGRESS	2007-12-31	20,423							
CONSTRUCTION IN PROGRESS	2008-12-31	178,607							
CONSTRUCTION IN PROGRESS	2009-12-31	304,328							
PHASE 1 - BLDG CONSTRUCTION	2009-12-31	11,446,872	2,213,724	S/L	39 0000	293,509			
FUMAROLE PRE-CONSTRUCTION	2010-12-31	9,785							
SOUTH SPACE FY10/11 AMTS	2010-12-31	46,514							
TAYLOR LAND	2011-06-08	95,266							
SOUTH SPACE FY11/12 AMTS	2011-12-31	33,735							
WEST TUNNEL FY11/12 AMTS	2011-12-31	11,060							
PHASE II FY12/13 AMTS	2012-12-31	2,167							
SOUTH SPACE FY12/13 AMTS	2012-12-31	345							
WEST TUNNEL FY12/13 AMTS	2012-12-31	18,367							
AIR CONDITIONER - LODGE	2012-07-13	579	546	200DB	5 0000	33			
AIR CONDITIONER - LODGE	2012-07-13	579	546	200DB	5 0000	33			
ALPHA TUNNEL FY13/14 CIP	2013-12-31	75							
PHASE II FY13/14 CIP	2013-12-31	8,222							
SOUTH SPACE FY13/14 CIP	2013-12-31	3,506							
LAND - HOME DEMOLITION	2014-09-10	21,873							
PHASE II FY14/15 CIP	2014-12-31	20,195							
ALPHA TUNNEL FY15/16 CIP	2015-12-31	900							

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
PHASE II FY15/16 CIP	2015-12-31	1,410							
SOUTH SPACE FY15/16 CIP	2015-12-31	103,272							
SOFA - MNA OFFICE	2016-06-15	4,799	1,494	200DB	7 0000	944			
BAQUETTE TABLE - MNA OFFICE	2016-06-17	2,748	855	200DB	7 0000	541			
GENERATOR	2016-06-30	22,156	592	S/L	39 0000	568			
EGG ROAD GRADING/IMPROVEMENTS	2017-03-09	978,887	48,944	150DB	15 0000	92,995			
GRUNDFOS 25S100 DS PUMP	2016-11-08	8,875	1,268	200DB	7 0000	2,173			
SOUTH SPACE FY 16/17 CIP	2017-06-30	240,549							
PHASE II FY 16/17 CIP	2017-06-30	81,546							
AMPITHEATER / ORREY FY17/18 CIP	2018-06-30	30,637							
SOUTH SPACE FY 17 / 18 CIP	2018-06-30	4,387,634							
SOUTH SPACE CONSTRUCTION OFFICE GENERATOR	2017-09-05	26,088		200DB	7 0000	3,727			
SOUTH SPACE SOLAR SYSTEM	2018-03-08	18,032		200DB	5 0000	3,606			
PHASE II FY 17 / 18 CIP	2018-06-30	47,432							
AMPITHEATER / ARCTURUS ACCESS RD FY17/18	2018-06-30	24,937							

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2017 Gain/Loss from Sale of Other Assets Schedule

Name: SKYSTONE FOUNDATION INC

EIN: 94-2842873

Name	Date Acquired	How Acquired	Date Sold	Purchaser Name	Gross Sales Price	Basis	Basis Method	Sales Expenses	Total (net)	Accumulated Depreciation
SALE OF 4225 E COBURN DR	2011-07	PURCHASE	2017-09		526,000	440,000		40,059	110,966	65,025

TY 2017 Investments Corporate Bonds Schedule**Name:** SKYSTONE FOUNDATION INC**EIN:** 94-2842873**Investments Corporate Bonds Schedule**

Name of Bond	End of Year Book Value	End of Year Fair Market Value
AMERICAN HONDA FIN CORP		
BARCLAYS DRYOCK ISSUANCE TR		
BNP PARIBAS		
BP CAP MKTS PLC		
CISCO SYS INC		
CITIBANK CR CARD ISSUANCE		
COMCAST CORP		
DEER JOHN CAP CORP		
DISCOVER CARD EXECUTION NT TR		
DUKE ENERGY CAROLINAS		
FIFTH THIRD BK CINCINNATI OHIO		
GENERAL ELEC CO		
HSBC USA INC NEW		
ORACLE CORP		
PACCAR FINL CORP		
SHELL INTL FIN BV		
TOYOTA MTR CR CORP		
UBS AG STAMFORD BRH MEDIUM TERM		
WELLS FARGO & CO		
WORLD FINL NETWORK CR CARD		

**TY 2017 Land, Etc.
Schedule****Name:** SKYSTONE FOUNDATION INC**EIN:** 94-2842873

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
BUILDINGS	12,718,253	2,831,301	9,886,952	13,947,142
FURNITURE & FIXTURES				
IMPROVEMENTS				
MACHINERY AND EQUIPMENT				
LAND	1,228,889		1,228,889	

TY 2017 Legal Fees Schedule**Name:** SKYSTONE FOUNDATION INC**EIN:** 94-2842873

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INDIRECT LEGAL FEES	28,771			28,771

TY 2017 Other Assets Schedule

Name: SKYSTONE FOUNDATION INC

EIN: 94-2842873

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
CONSTRUCTION IN PROGRESS	1,106,732	5,597,372	5,597,372

TY 2017 Other Expenses Schedule**Name:** SKYSTONE FOUNDATION INC**EIN:** 94-2842873**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SINGLE FAMILY HOME, FLAG AZ				
INSURANCE	-44	-44	-44	
UTILITIES	-15	-15	-15	
INVESTMENT DEPRECIATION	2,197	2,197	2,197	
EXPENSES				
BANK CHARGES	12,456			12,456
CRATER REPAIRS & MAINTENANCE	12,517			12,517
FUNDRAISING	8,980			8,980
INSURANCE	15,824			15,824
LAND LEASE	14,025			14,025

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OFFICE EXPENSE	10,090			10,090
POSTAGE	915			915
RENT - EQUIPMENT/PERSONAL PRO	11,148			11,148
SUPPLIES	7,273			7,223
TELEPHONE & INTERNET	1,873			1,873
WEBSITE	721			721

TY 2017 Other Professional Fees Schedule**Name:** SKYSTONE FOUNDATION INC**EIN:** 94-2842873

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CONSULTING / OUTSIDE SERVICES	7,556			7,556
PAYROLL SERVICES	1,760			1,760
OTHER STAFF	300			300

TY 2017 Taxes Schedule**Name:** SKYSTONE FOUNDATION INC**EIN:** 94-2842873

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LICENSE	35			35
SINGLE FAMILY HOME, FLAG AZ	2,181	2,181	2,181	

Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service	Schedule of Contributors ▶ Attach to Form 990, 990-EZ, or 990-PF ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990	OMB No 1545-0047 2017
	Name of the organization SKYSTONE FOUNDATION INC	Employer identification number 94-2842873

Organization type (check one)

Filers of:	Section:
Form 990 or 990-EZ	<input type="checkbox"/> 501(c)() (enter number) organization
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation
	<input type="checkbox"/> 527 political organization
Form 990-PF	<input checked="" type="checkbox"/> 501(c)(3) exempt private foundation
	<input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation
	<input type="checkbox"/> 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 other 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 990PF, 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 SKYSTONE FOUNDATION INC	Employer identification number 94-2842873
--	---

Part I **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
—	See Additional Data Table _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

Name of organization SKYSTONE FOUNDATION INC	Employer identification number 94-2842873
--	---

Part III	Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ► \$ _____ Use duplicate copies of Part III if additional space is needed
-----------------	--

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	_____	_____	_____
	_____	_____	_____
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	

Additional Data

Software ID:
Software Version:
EIN: 94-2842873
Name: SKYSTONE FOUNDATION INC

Form 990 Schedule B, Part I - 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
<u>1</u>	JEWISH COMMUNAL FUND	\$ 100,000	Person <input checked="" type="checkbox"/>
	575 MADISON AVENUE SUITE 703		Payroll <input type="checkbox"/>
	NEW YORK, NY10022		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>7</u>	JOSHUA KUSHNER	\$ 100,000	Person <input checked="" type="checkbox"/>
	295 LAFAYETTE ST		Payroll <input type="checkbox"/>
	NEW YORK, NY10012		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>2</u>	CALIFORNIA COMMUNITY FOUNDATION	\$ 100,000	Person <input checked="" type="checkbox"/>
	221 S FIGUEROA ST SUITE 400		Payroll <input type="checkbox"/>
	LOS ANGELES, CA90012		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>8</u>	LEE CAPITAL	\$ 100,000	Person <input checked="" type="checkbox"/>
	767 FIFTH AVENUE		Payroll <input type="checkbox"/>
	NEW YORK, NY10153		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>3</u>	FIDELITY CHARITABLE GIFT FUND	\$ 250,000	Person <input checked="" type="checkbox"/>
	PO BOX 77001		Payroll <input type="checkbox"/>
	CINCINNATI, OH452770053		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>9</u>	SILICON VALLEY COMMUNITY FOUNDATION	\$ 100,000	Person <input checked="" type="checkbox"/>
	2440 WEST EL CAMINO REAL SUITE 300		Payroll <input type="checkbox"/>
	MOUNTAIN VIEW, CA94040		Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

Form 990 Schedule B, Part I - 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
<u>4</u>	JP HAITIAN RELIEF ORGANIZATION 6464 SUNSET BLVD SUITE 1140 LOS ANGELES, CA90028	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>10</u>	THE DILLER - VON FURSTENBERG FAMILY 555 WEST 18 STREET NEW YORK, NY10011	\$ 40,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>5</u>	JEWISH COMMUNITY FOUNDATION OF LA 6505 WILSHIRE BLVD SUITE 1200 LOS ANGELES, CA90048	\$ 100,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>11</u>	THE HORACE W GOLDSMITH FOUNDATION 375 PARK AVENUE NEW YORK, NY10152	\$ 75,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
<u>6</u>	JON AND MARY SHIRLEY FOUNDATION PO BOX 685 MEDINA, WA98039	\$ 20,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)