Form **990**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

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

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

Open to Public Inspection

Α	For t	he 2017 calen	dar year, or tax	year begir	nning 7/0)1	, 2017	, and endir	ig 6/	′30	,	2018
В	Check	if applicable:	С							D Employ		fication number
	А	ddress change	Mule Deer	Founda	tion					68-	01632	253
	\square	lame change	1939 Sout			e H					one numb	
	-	nitial return	Salt Lake	City,	UT 84104					888	-375-	-3337
	-	inal return/terminated								- 000	373	3337
	-	mended return								G Gross r	eceints 5	15,938,799.
		application pending	F Name and add	ress of principa	al officer:				H(a) Is this	s a group retur		
	Ш″	pprication periang	Same As C							II subordinates		
$\overline{}$	Tay	-exempt status	X 501(c)(3)	501(c) () ∢ (ir	isert no.)	4947(a)(1) or	527	If 'No	,' attach a list.	(see inst	ructions)
'			W.MULEDEE) (11	isert no.)	4347(a)(1) 01	327	H(a) Crour	exemption n	umbor 🕨	
			X Corporation	Trust	Association	Other ►	1.	Vacr of format				
K		m of organization:		Trust	Association	Other		Year of format	ion: 198	38 IVI 3	state of le	egal domicile: UT
Pa	rt I	Summar Priofly dosori	bo the organiza	tion's mice	ion or most o	significant a	activities: -					
	'	briefly descri	De trie organiza	1110115 111155	SIOTI OF THOSE S	signincant a	$S\epsilon$	<u>ee Sche</u>	<u>dule_C</u>	<u>) </u>		
9												
ПaП												
Ver	2	Check this bo	ov ► Tif the	organizatio	on discontinue	ed its oner:	ations or disr	nosed of m	ore than	25% of its	net ass	
Ö	3		oting members								3	11
જ	4		dependent voti								4	11
<u>ie</u>	5		of individuals								5	29
Activities & Governance	6		of volunteers								6	1,500
Ą			ed business rev								7a	0.
	b	Net unrelated	d business taxa	ble income	from Form 9	90-T, line 3	34				7b	0.
										Prior Year		Current Year
Ð	8		and grants (Pa							1,313,2		1,288,102.
Revenue	9	3,								8,578,7		11,985,991.
eĸe	10		•		•					15,1		30,302.
Œ	11		e (Part VIII, col							1,530,9		1,501,268.
	12		e – add lines 8							1,438,1	20.	14,805,663.
	13		imilar amounts									
	14											
ģ	15									1,720,6	1,935,128.	
Expenses	16 a	6a Professional fundraising fees (Part IX, column (A), line 11e)										
6	b	Total fundrais	sing expenses	(Part IX, co	lumn (D), line	e 25) 🟲	-	11,878.				
ш	17	Other expens	ses (Part IX, co	lumn (A), li	ines 11a-11d,	, 11f-24e)				8,759,8	331.	13,644,845.
	18	Total expens	es. Add lines 1	3-17 (must	equal Part IX	(, column (A), line 25)			0,480,4		15,579,973.
	19	Revenue less	expenses. Sul	otract line 1	18 from line 1	2				957,6		-774,310.
₽ 8 8			·							ing of Currer		End of Year
Net Assets Fund Balanc	20	Total assets	(Part X, line 16)						5,167,5		4,387,506.
Ass I Ba	21	Total liabilitie	es (Part X, line	26)						629,0		623,319.
₹Ř	22	Net assets or	fund balances	. Subtract I	ine 21 from li	ine 20				4,538,4		3,764,187.
	rt II	Signatur								1,000,	137.	3,701,107.
				amined this ret	urn including acc	omnanving scl	nedules and state	ments and to	the hest of	mv knowledae	and helie	of it is true correct and
comp	olete. [Declaration of prepa	arer (other than office	er) is based on	all information of	f which prepare	er has any knowle	edge.	the best of	my knowicage	and bene	ef, it is true, correct, and
Sig	ın	Signatu	ire of officer						C	ate		
He	re	Mil	es Moretti						CEO			
			print name and title						0110			
		Print/Type p	oreparer's name		Preparer's sign	nature		Date		Check	X if F	PTIN
Pai	d	Camero	on Pribble		Cameron	Pribbl	6			self-employ		P01249334
	iu epar				ountancy		PLLC					. J.L 17001
	ioq; 10 ə				ay 89 St		т ппС			Firm's FIN	▶ 27_	-1698621
- -		, imins addit			UT 84025	C 170				Phone no.		447-9572
May	/ the	IRS discuss th	nis return with t			e? (see ins	structions)			i none no.	OOT	X Yes No

BAA

Par			
1	Check if Schedule O contains a response or note to any line in this Part III		X
'	riefly describe the organization's mission: ee Schedule 0		
	ee Johedate O		. – – – –
			. – – – –
2	id the organization undertake any significant program services during the year which were not listed on the prior		1
	orm 990 or 990-EZ?	Yes X	No
3	id the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X	No
	'Yes,' describe these changes on Schedule O.]
4	escribe the organization's program service accomplishments for each of its three largest program services, as ection 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other necessary for each program service reported.	measured by expe ers, the total expe	enses. nses,
4 a	Ode:) (Expenses \$13,270,370. including grants of \$) (Revenue dembership support services provided by the organization represent the provided to all Mule Deer Foundation members. The organization offers memberships with different benefits at each level. Members receive educaterials and are invited to support our local and national projects because and National events held throughout the year. At the close of approximately 41,738 members.	benefits multiple cational y attending 2016, MDF h	
		- – – – – – –	. – – – –
	Code:) (Expenses \$	to facilitat The ervation, on are invo installatic age for dee	olved on er Ltat.
	PRODUCTION AND DISTRIBUTION OF ORGANIZATION PUBLICATION OF MULE DEER COUNDATION MAGAZINE TO MEMBERSHIP AND GENERAL PUBLIC. THIS MAGAZINE CONTAINS NUMEROUS ARTICLES ON WILDLIFE HABITAT CONSERVATION AND WAYS TREVITALIZE AND ENHANCE NATURAL HABITAT. THIS MAGAZINE IS GIVEN AWAY.		600.)
	ther program services (Describe in Schedule O.) Expenses \$ including grants of \$) (Revenue \$ otal program service expenses \(\) 15.430.663)	

Form 990 (2017) Mule Deer Foundation Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	110
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I.	3		Х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II</i>	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If 'Yes,' complete Schedule D, Part II</i>	7	Х	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III.	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
	b Did the organization report an amount for investments – other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If 'Yes,' complete Schedule D, Part VII.</i>	11 b		Х
	c Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.	11 c		Х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX.	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Х
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a		Х
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If 'Yes,' complete Schedule F, Parts I and IV</i>	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV.	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III.	19	Х	
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Form 990 (2017) Mule Deer Foundation Part IV Checklist of Required Schedules (continued)

			Yes	No
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Χ
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J.</i>	23	Х	
	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
k	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II.	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III.	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
t	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If 'Yes,' complete Schedule R, Part I</i>	33		X
	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Part II, III, or IV, and Part V, line 1	34		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
t	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2.	36		Х
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Х	

Form 990 (2017) Mule Deer Foundation Part V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V....

	Check if Schedule O contains a response or note to any line in this Part V				. 🔲		
				Yes	No		
1 a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 23					
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1 b (
С	Did the organization comply with backup withholding rules for reportable payments to vendors and r (gambling) winnings to prize winners?	eportable gaming	1 c	X			
2 a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2 a 29					
h	If at least one is reported on line 2a, did the organization file all required federal employmen		2 b		Х		
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see in						
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year	•	3 a		Х		
	If 'Yes,' has it filed a Form 990-T for this year? <i>If 'No' to line 3b, provide an explanation in Schedule O.</i>		3 b				
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other financial account in a foreign country (such as a bank account, securities account, or other f	er authority over, a inancial account)?	4 a		Х		
	If 'Yes,' enter the name of the foreign country: ►	·					
See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).							
5 a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?							
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelf	er transaction?	5 b		X		
С	If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c				
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible as charitable contributions?	nd did the organization	6 a		Х		
	If 'Yes,' did the organization include with every solicitation an express statement that such contribut not tax deductible?		6 b				
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and p services provided to the payor?	partly for goods and	7 a		Х		
b	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b				
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v Form 8282?	vas required to file	7с		Х		
d	If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d					
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal	benefit contract?	7 e		X		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal ber		7 f		Х		
•	If the organization received a contribution of qualified intellectual property, did the organization file as required?		7 g				
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?		7 h				
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained organization have excess business holdings at any time during the year?	by the sponsoring	8				
9	Sponsoring organizations maintaining donor advised funds.						
	Did the sponsoring organization make any taxable distributions under section 4966?		9 a				
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related per		9 b				
	Section 501(c)(7) organizations. Enter:						
	Initiation fees and capital contributions included on Part VIII, line 12	10 a					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 b					
11	Section 501(c)(12) organizations. Enter:	1					
а	Gross income from members or shareholders.	11 a					
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.).	11 b					
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of	f Form 1041?	12a				
b	If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b					
	Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	Is the organization licensed to issue qualified health plans in more than one state?		13 a				
	Note. See the instructions for additional information the organization must report on Schedu	e O.					
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b					
	Enter the amount of reserves on hand	13c			17		
	Did the organization receive any payments for indoor tanning services during the tax year?.		14a		X		
ΔΔ	of Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in	Schedule O	14b	000	(2017)		

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year..... 11 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent ... 11 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? 2 Χ Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.... Χ 4 X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Did the organization have members or stockholders?..... Χ 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?..... 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?..... Χ 8 a X **b** Each committee with authority to act on behalf of the governing body?..... 8 b 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10 b Χ 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... X b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done ... See .Schedule .0 Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ Χ 14 Did the organization have a written document retention and destruction policy?..... 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Χ a The organization's CEO, Executive Director, or top management official...... 15a **b** Other officers or key employees of the organization... See .Schedule..O...... 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?..... Χ 16 a **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?. 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed See Schedule O Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Own website Another's website Upon request Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records: Miles Moretti 1939 S 4130 W Ste H Salt Lake City UT 84104 888-375-3337

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

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

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
 - List all of the organization's current key employees, if any. See instructions for definition of 'key employee.'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

			(C)							
(A) Name and Title	(B) Average hours	thar	n one Ì s both	box, an o	unles officer truste	eck mo ss perso and a ee)	on	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
(1) Adam Weatherby	1									
Board Member	0	Χ						0.	0.	0.
(2) Ron Ness	1									
Board Member	0	Χ						0.	0.	0.
_(3)_CJ_Buck	_ 1							_		_
Board Member	0	Χ						0.	0.	0.
	1									
Board Member	0	Χ						0.	0.	0.
(5) Ryan Bronson	1	l								_
Board Member	0	Χ						0.	0.	0.
_(6) Chad Schearer	1	l								_
Board Member	0	Χ						0.	0.	0.
_(7) Aaron Oelger	1									
Board ViceChair	0	Χ						0.	0.	0.
_(8) Kirstie Pike	1									•
Board Member	0	Χ						0.	0.	0.
	0							•	•	•
Board Chairman	0	X						0.	0.	0.
(10) Daniel Harrison	1							0	0	0
Board Member	0	Χ						0.	0.	0.
(11) Andrew McKean	1	37						0	0	0
Board Member	0	Χ						0.	0.	0.
<pre></pre>	$-\frac{40}{0}$			Χ				155 000	0	0
(13)	U			Λ				155,000.	0.	0.
		ł								
<u>(14)</u>										
	1	1			1	1 1				

Form 990 (2017) Mule Deer Foundation									68-01632	53		ge 8
Part VII Section A. Officers, Directors, Tru		Key	Em			es, a	and	d Highest Com	pensated Emp	oloyees	S (conti	nued)
	(B)			(C	•							
(A)	Average hours	box	, unle	ss pe	erson	than is both	n an	(D) Reportable	(E) Reportable	F	(F) stimated	
Name and title	per week					or/trust		compensation from the organization	compensation from related organizations	amo	unt of oth	her
	(list any hours for	Individual to or director	nstitu	Officer	Кеу	Highe	Former	(W-2/1099-MISC)	(W-2/1099-MISC)	f	rom the ganization	n
	related organiza	ecto	noilt	Œ.	employee	ist co byee	ler'				id related anization	
	below	or director	nstitutional trustee		oyee	mpe						
	dotted line)	ee	stee			Highest compensated employee						
						ä						
(15)												
(16)												
(16)												
(17)												
		•										
(18)												
(19)												
(20)		-										
(20)												
(21)												
		•										
(22)												
(23)												
(24)		-										
(25)												
		•										
1 b Sub-total							>	155,000.	0			0.
c Total from continuation sheets to Part VII, Section 17							•	0.	0			0.
d Total (add lines 1b and 1c)							vod.	155,000.	0 of reportable com		n	0.
from the organization 1	to those i	isteu	abuv	ve) v	WHO	recen	veu	more man \$100,00	o of reportable con	iperisatio	11	
											Yes	No
3 Did the organization list any former officer, direc	tor. or tru	stee.	kev	em/	volar	/ee. (or h	nighest compensa	ted employee			
on line 1a? If 'Yes,' complete Schedule J for suc	h individu	ial								3		X
4 For any individual listed on line 1a, is the sum of	reportab	le co	mpe	nsa	tion	and	oţh	er compensation	from			
the organization and related organizations greate such individual										4	Х	
5 Did any person listed on line 1a receive or accru	e comper	satio	n fro	om :	anv	unre	late	ed organization or	individual			
for services rendered to the organization? If 'Yes	s,' comple	te So	ched	lule	J fo	r suc	:h p	erson		5		X
Section B. Independent Contractors 1 Complete this table for your five highest compen	hai hates	anan	dant	COL	ntra	otors	tha	t received more t	nan \$100 000 of			
compensation from the organization. Report compen	sation for	the c	alen	dar <u>y</u>	year	endir	ng v	vith or within the or	ganization's tax yea	ar.		
(A) Name and business addi	racc							(B) Description (Compe	C)	'n
								'				
GTS FORESTRY 1017 EASTERN AVE SACRAMENTO,		4						TIMBER PROJEC			269,1	
BARCO LLC PO BOX 910730 ST GEORGE, UT 8479 CARL POTTER FORESTRY 11092 CHULA ROAD PLAI		AP 7	285	7				TIMBER PROJEC			256,6 255,6	
RUE LOGGING PO BOX 155 SOUTH FORK, CO 8115		111/	203	1				TIMBER PROJEC			211,3	
									-		,	
2 Total number of independent contractors (including b		ited to	o tho	se I	isted	abo	ve)	who received more	than			
\$100,000 of compensation from the organization	▶ 1											

		Check if Schedule O contains a response or note to any	y line in this Part V	'III		
			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a b c d e f	Federated campaigns	1,288,102.			
<u>ه ب</u>		Business Code	1,200,102.			
Program Service Revenue	2 a	Project Revenue 900099	11,936,061.	11,936,061.		
Rev		Magazine Revenue 900099	25,600.	25,600.		
9	С	Program Revenue 900099	24,330.	24,330.		
er.	d	1 10g1am Nevende 500055	21,000.	21,000.		
S	е					
gra	f	All other program service revenue				
P.		Total. Add lines 2a-2f	11,985,991.			
	3	Investment income (including dividends, interest and	11,300,331.			
	ľ	other similar amounts)	30,302.	30,302.		
	4	Income from investment of tax-exempt bond proceeds . >				
	5	Royalties				
		(i) Real (ii) Personal				
		Gross rents				
		Less: rental expenses				
		Rental income or (loss)				
	d	Net rental income or (loss)				
	7 a	Gross amount from sales of (i) Securities (ii) Other				
		assets other than inventory				
	b	Less: cost or other basis and sales expenses				
		Gain or (loss)				
	d	Net gain or (loss)				
Other Revenue	8 a	Gross income from fundraising events (not including. \$ of contributions reported on line 1c).				
يا پا	١.	See Part IV, line 18				
		Less: direct expenses b 739,143.				
O		Net income or (loss) from fundraising events	227,955.			
		Gross income from gaming activities. See Part IV, line 19				
		Less: direct expenses b 364,040.				
		Net income or (loss) from gaming activities ▶	1,301,889.	1,301,889.		
		Gross sales of inventory, less returns and allowances a 1,377.				
		Less: cost of goods sold b 29, 953.	00 == 6	00 == 6		
	<u>c</u>	Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code	-28,576.	-28,576.		
	11 a					
	liia b					
	_					
	, c	All other revenue				
	_	Total. Add lines 11a-11d				
			14 005 660	12 200 606	^	
	12	Total revenue. See instructions	14,805,663.	13,289,606.	0.	0.

Form 990 (2017) Mule Deer Foundation 68
Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Do i	Check if Schedule O contains a re not include amounts reported on lines	esponse or note to any (A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising
6b, 1	7b, 8b, 9b, and 10b of Part VIII. Grants and other assistance to domestic		expenses	general expenses	expenses
•	organizations and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic individuals. See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	261,384.	230,018.	28,752.	2,614.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.
7	Other salaries and wages	1,391,645.	1,391,645.		•
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,331,043.	1,331,043.		
9	Other employee benefits	140,264.	123,432.	15,429.	1,403.
10	Payroll taxes	141,835.	124,815.	15,602.	1,418.
11	Fees for services (non-employees):	212/0001	121,0101	20,0021	
a	Management	199,402.	175,474.	21,934.	1,994.
	Legal	15,603.	13,731.	1,716.	156.
	: Accounting	13,250.	11,660.	1,458.	132.
	Lobbying	10/1001	11,000.	1,100.	101.
	Professional fundraising services. See Part IV, line 17				
	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25, column	121 007	100 767	0 005	205
12	(A) amount, list line 11g expenses on Schedule 0.)	131,997. 145,111.	122,767. 145,111.	9,025.	205.
13	Office expenses	145,111.	145,111.		
14	Information technology				
15	Royalties.				
16	Occupancy	75,196.	66,172.	8,272.	752.
17	Travel.	75,196.	00,172.	0,212.	132.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19	Conferences, conventions, and meetings	3,717,627.	3,717,627.		
20	Interest	21,209.	18,664.	2,333.	212.
21	Payments to affiliates	·	·	·	
22	Depreciation, depletion, and amortization	9,331.	9,331.		
23	Insurance	·	·		
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a	Project Expenses	4,535,039.	4,535,039.		
	PROGRAM EXPENSES	3,416,125.	3,416,125.		
	Tags	962,103.	962,103.		
	OTHER_EXPENSE	299,190.	263,287.	32,911.	2,992.
	All other expenses	103,662.	103,662.		
25	Total functional expenses. Add lines 1 through 24e	15,579,973.	15,430,663.	137,432.	11,878.
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash — non-interest-bearing.	560,957.	1	558,185.
	2	Savings and temporary cash investments	4,015,616.	2	2,798,726.
	3	Pledges and grants receivable, net	·	3	
	4	Accounts receivable, net	46,459.	4	7,082.
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete			·
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use.	436,482.	8	445,128.
Ä	9	Prepaid expenses and deferred charges	46,575.	9	5,000.
	10 a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D			
	b	Less: accumulated depreciation		10 c	571,235.
	11	Investments – publicly traded securities.	·	11	·
	12	Investments – other securities. See Part IV, line 11		12	
	13	Investments – program-related. See Part IV, line 11		13	
	14	Intangible assets.		14	
	15	Other assets. See Part IV, line 11	900.	15	2,150.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	5,167,504.	16	4,387,506.
	17	Accounts payable and accrued expenses	404,208.	17	227,951.
	18	Grants payable		18	
	19	Deferred revenue	===,,,,,,,,	19	395,368.
	20	Tax-exempt bond liabilities		20	
ies	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
Liabilities	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D.		25	
	26	Total liabilities. Add lines 17 through 25.	629,007.	26	623,319.
ses		Organizations that follow SFAS 117 (ASC 958), check here ► X and complete lines 27 through 29, and lines 33 and 34.			
ä	27	Unrestricted net assets.	1,317,316.	27	-1,814,766.
Bal	28	Temporarily restricted net assets.	2,605,222.	28	4,816,906.
힏	29	Permanently restricted net assets	615,959.	29	762,047.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check here ► and complete lines 30 through 34.			
3	30	Capital stock or trust principal, or current funds		30	
8	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
As	32	Retained earnings, endowment, accumulated income, or other funds		32	
fet	33	Total net assets or fund balances	4,538,497.	33	3,764,187.
_	34	Total liabilities and net assets/fund balances	5,167,504.	34	4,387,506.

BAA Form **990** (2017)

Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI.						
1	Total revenue (must equal Part VIII, column (A), line 12)	1	14,8	05,6	663.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	15,5	79,9	973.		
3	Revenue less expenses. Subtract line 2 from line 1	3	-7	74,3	310.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	4,5	38,4	<u> 197.</u>		
5	Net unrealized gains (losses) on investments.	5					
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O).	9			0.		
10	column (B))						
Pa	rt XII Financial Statements and Reporting	•					
	Check if Schedule O contains a response or note to any line in this Part XII				. П		
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other						
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.						
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviews separate basis, consolidated basis, or both: Separate basis Both consolidated and separate basis	ed on a					
- 1	b Were the organization's financial statements audited by an independent accountant?		2b	Χ			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separabasis, consolidated basis, or both:	ite					
	Separate basis X Consolidated basis Both consolidated and separate basis						
•	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.						
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		За		Х		
١	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b				
BAA			Form	990	(2017)		

TEEA0112L 08/08/17

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2017

Open to Public Inspection

Name of the organization					Employer identific	ation number				
Mule Deer Foundation					68-016325					
Part I Reason for Public Cha					<u> </u>	tions.				
The organization is not a private found				•	•					
1 A church, convention of church	,		,	~ ~ ~	i).					
2 A school described in section		•		,						
3 A hospital or a cooperative I										
4 A medical research organiza	ation operated in conj	unction with a hospital of	describe	d in sec	tion 170(b)(1)(A)(iii). E	Inter the hospital's				
name, city, and state:										
An organization operated for section 170(b)(1)(A)(iv). (Co	r the benefit of a colle omplete Part II.)	ege or university owned	or oper	ated by	a governmental unit de	escribed in				
A federal, state, or local gov	ernment or governme	ental unit described in s	ection 1	70(b)(1)	(A)(v).					
7 An organization that normally in section 170(b)(1)(A)(vi).	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.)									
8 A community trust described	d in section 170(b)(1)	(A)(vi). (Complete Part I	l.)							
9 An agricultural research organ				oniunctio	on with a land-grant colle	eae				
or university or a non-land-gra										
from activities related to its investment income and unre	An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)									
11 An organization organized a	nd operated exclusive	ely to test for public safe	ety. See	section	1 509(a)(4).					
or more publicly supported of	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) . See section 509(a)(3) . Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.									
a Type I. A supporting organizate organization(s) the power to recomplete Part IV, Sections 2	ion operated, supervise	ed, or controlled by its sup	ported o	rganizati	ion(s), typically by givino	g the supported on. You must				
b Type II. A supporting organize management of the supporting must complete Part IV, Section 1981	ı organization vested in	controlled in connection the same persons that c	with its ontrol or	support manage	ed organization(s), by the supported organizat	having control or ion(s). You				
c Type III functionally integrated organization(s) (see instruct	I. A supporting organiza	tion operated in connection	n with, aı Δ D an	nd functio	onally integrated with, its	supported				
d Type III non-functionally integrated. The	rated. A supporting orderally	ganization operated in cor v must satisfy a distribu	nnection	with its s	supported organization(s t and an attentiveness) that is not requirement (see				
instructions). You must come Check this box if the organize integrated, or Type III non-fu	zation received a writt	ten determination from	the IRS	that it is	a Type I, Type II, Typ	e III functionally				
f Enter the number of supported										
q Provide the following information	-									
(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) I organizat in your g docur	s the ion listed overning nent?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)				
			Yes	No						
(A)										
(B)										
(-)										
(C)										
<u>(D)</u>										
(E)	E)									
Total										

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support				•			
Cale	ndar year (or fiscal year nning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total	
	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.')							
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge							
4	Total. Add lines 1 through 3							
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							
6	Public support. Subtract line 5 from line 4							
Sec	tion B. Total Support		•	•	•			
Cale	ndar year (or fiscal year nning in) ►	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total	
7	Amounts from line 4							
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources							
9	Net income from unrelated business activities, whether or not the business is regularly carried on							
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)							
11	Total support. Add lines 7 through 10							
12	Gross receipts from related activ		structions)			12	-	
13	First five years. If the Form 990 is organization, check this box and	for the organization	n's first, second, th	hird, fourth, or fifth	tax year as a section	on 501(c)(3)	▶∏	
Sec	tion C. Computation of Pu	blic Support P	ercentage				<u></u> _	
14	Public support percentage for 20	17 (line 6, colum	n (f) divided by li	ne 11, column (f)))	14	%	
15	Public support percentage from	2016 Schedule A,	Part II, line 14.			15	%	
16a	6a 33-1/3% support test—2017. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.							
b	b 33-1/3% support test—2016. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization							
17a	7a 10%-facts-and-circumstances test—2017. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization							
b	b 10%-facts-and-circumstances test—2016. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the 'facts-and-circumstances' test, check this box and stop here. Explain in Part VI how the organization meets the 'facts-and-circumstances' test. The organization qualifies as a publicly supported organization							
18	Private foundation. If the organi						—	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support								
Calend	lar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total	
1	Gifts, grants, contributions, and membership fees received. (Do not include any unusual grants.)	1 743 693	2 118 312	1 301 211	1,313,260.	1 288 102	7,764,578.	
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.			9,621,211.			43,112,485.	
3	Gross receipts from activities that are not an unrelated trade or business under section 513.	2,300,403.	1,303,023.	J, 021,211.	10103701.	13407233.	0.	
-	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0.	
	The value of services or facilities furnished by a governmental unit to the organization without charge						0.	
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons	4,252,178.	9,504,141.	10922422.	11422961.	14775361.	50,877,063.	
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.	0.	0.	0.	0.	0.	0.	
_	Add lines 7a and 7b	0.	0.	0.	0.	0.	0.	
	Public support. (Subtract line 7c from line 6.)	0.	0.	0.	0.	0.	50,877,063.	
Sec	tion B. Total Support						,	
Calen	dar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total	
9	Amounts from line 6	4,252,178.	9,504,141.	10922422.	11422961.	14775361.	50,877,063.	
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	496.	2,947.	15,356.	15,159.	30,302.	64,260.	
	income (less section 511 taxes) from businesses acquired after June 30, 1975						0.	
-	Add lines 10a and 10b	496.	2,947.	15,356.	15,159.	30,302.	64,260.	
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.	
	Total support. (Add lines 9, 10c, 11, and 12.)	4,252,674.					50,941,323.	
	14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.							
	tion C. Computation of Pul			10		T 1	0000	
	Public support percentage for 20	•					99.87 %	
	Public support percentage from					16	99.91 %	
	tion D. Computation of Inv				(6)	1 4= 1	0 10 0	
	Investment income percentage f						0.13 %	
		stment income percentage from 2016 Schedule A, Part III, line 17						
	is not more than 33-1/3%, check	this box and sto l	p here. The orgar	nization qualifies a	as a publicly supp	orted organizatior	1 ► <u>X</u>	
	33-1/3% support tests—2016. If the line 18 is not more than 33-1/3%	6, check this box a	and stop here. Th	e organization qu	alifies as a public	ly supported orga	nization ►	
20	Private foundation. If the organi	zauon uiu not che	ick a box on line	14, 19a, 01 19D, C	neck this box and	see instructions.	· · · · · · · · · · · · · · · · · · ·	

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If 'Yes,' provide detail in Part VI</i> .	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI .	9с		
l0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Pa	int iv Supporting Organizations (continued)			
-11	Line the averagination accepted a gift or contribution from any of the fallowing payment?		Yes	No
	Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
		11a		
	b A family member of a person described in (a) above?	11b		
	c A 35% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Se	ction B. Type I Supporting Organizations			
1	Did the divertors trustees or membership of one or more supported examinations have the newer to regularly experien		Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	2		
Se	ction C. Type II Supporting Organizations			
	Б		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Se	ction D. All Type III Supporting Organizations		ı	
	г		Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played in this regard.	3		
Se	ction E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
	a The organization satisfied the Activities Test. Complete line 2 below.			
	b The organization is the parent of each of its supported organizations. <i>Complete line 3 below.</i>			
	c The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in:	struci	tions)	
	The digamization supported a governmental ontity. Besonbe wit at 17 how you supported a government ontity (see with	_		'
2	Activities Test. <i>Answer (a) and (b) below.</i>		Yes	No
	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted	2a		
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of	_u		
	the organization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
	a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI.</i>	3a		
	b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If 'Yes,' describe in Part VI the role played by the organization in this regard.</i>	3b		

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Sche	edule A (Form 990 or 990-EZ) 2017 Mule Deer Foundation		68-01	63253 Page
Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	anizat	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying trus instructions. All other Type III non-functionally integrated supporting organizatio	t on No	ov. 20, 1970 (explain in st complete Sections A	Part VI). See through E.
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4).	8		
Sec	tion B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
á	Average monthly value of securities	1a		
ŀ	Average monthly cash balances	1b		
(Fair market value of other non-exempt-use assets	1c		
	d Total (add lines 1a, 1b, and 1c)	1d		
•	Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions). Schedule A (Form 990 or 990-EZ) 2017 10 Line 8 amount divided by line 9 amount

Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)	
Sec	tion D – Distributions	Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions.	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9	Distributable amount for 2017 from Section C, line 6	

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1 Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			
e From 2016			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2017 distributable amount			
i Carryover from 2012 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2017 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2017 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2018. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2013			
b Excess from 2014			
c Excess from 2015			
d Excess from 2016			
e Excess from 2017			
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Schedule A (Form 990 or 990-EZ) 2017

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)