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Form **990-PF**

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

▶ **Do not enter social security numbers on this form as it may be made public.**
▶ **Information about Form 990-PF and its instructions is at *www.irs.gov/form990pf*.**

OMB No 1545-0052

2015

Open to Public Inspection

For calendar year 2015, or tax year beginning 01-01-2015 , and ending 12-31-2015

Name of foundation
Browning Kimball Foundation
c/o Foundation Management Inc

A Employer identification number
94-2766079

Number and street (or P O box number if mail is not delivered to street address)
2932 NW 122nd St No D

Room/suite

B Telephone number (see instructions)
(405) 755-5571

City or town, state or province, country, and ZIP or foreign postal code
Oklahoma City, OK 73120

C If exemption application is pending, check here ▶ ☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

H Check type of organization ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year *(from Part II, col (c), line 16)* ▶$ 20,742,688

J Accounting method ☐ Cash ☑ Accrual ☐ 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 ▶ ☐

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)	1,077,541			
	2	Check ▶ ☐ if the foundation is **not** required to attach Sch B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	475,287	475,287		
	5a	Gross rents				
	b	Net rental income or (loss) _____				
	6a	Net gain or (loss) from sale of assets not on line 10	947,363			
	b	Gross sales price for all assets on line 6a 5,464,890				
	7	Capital gain net income (from Part IV, line 2)		947,363		
	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	c	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	1,503	1,503		
	12	**Total.** Add lines 1 through 11	2,501,694	1,424,153		
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc	0	0		0
	14	Other employee salaries and wages				
	15	Pension plans, employee benefits				
	16a	Legal fees (attach schedule)				
	b	Accounting fees (attach schedule)				
	c	Other professional fees (attach schedule)	113,859	113,859		0
	17	Interest				
	18	Taxes (attach schedule) (see instructions)	61,338	0		0
	19	Depreciation (attach schedule) and depletion				
	20	Occupancy				
	21	Travel, conferences, and meetings	3,952	0		3,952
	22	Printing and publications				
	23	Other expenses (attach schedule)	137,694	87,694		50,000
	24	**Total operating and administrative expenses.** Add lines 13 through 23	316,843	201,553		53,952
	25	Contributions, gifts, grants paid	849,401			849,401
	26	**Total expenses and disbursements.** Add lines 24 and 25	1,166,244	201,553		903,353
	27	Subtract line 26 from line 12				
	a	**Excess of revenue over expenses and disbursements**	1,335,450			
	b	**Net investment income** (if negative, enter -0-)		1,222,600		
	c	**Adjusted net income** (if negative, enter -0-)				

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	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	547,012	463,732	463,732
	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)			
	b	Investments—corporate stock (attach schedule)	10,525,650	10,925,479	14,258,795
	c	Investments—corporate bonds (attach schedule)	4,993,732	6,029,867	6,020,161
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶)	9,920	0	0
	16	**Total assets**(to be completed by all filers—see the instructions Also, see page 1, item I)	16,076,314	17,419,078	20,742,688
Liabilities	17	Accounts payable and accrued expenses			
	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)	0	0	
Net Assets or Fund Balances		**Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.**			
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
		Foundations that do not follow SFAS 117, check here ▶ ☑ and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	16,076,314	17,419,078	
	30	**Total net assets or fund balances**(see instructions)	16,076,314	17,419,078	
	31	**Total liabilities and net assets/fund balances**(see instructions)	16,076,314	17,419,078	

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	16,076,314
2	Enter amount from Part I, line 27a	2	1,335,450
3	Other increases not included in line 2 (itemize) ▶	3	7,314
4	Add lines 1, 2, and 3	4	17,419,078
5	Decreases not included in line 2 (itemize) ▶	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	17,419,078

Part IV Capital Gains and Losses for Tax on Investment Income

	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)	How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr)	Date sold (d) (mo , day, yr)
1a	See Additional Data Table			
b				
c				
d				
e				

	(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)
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			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) 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	
a	See Additional Data Table			
b				
c				
d				
e				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 }	2	947,363
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	

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))
2014	876,277	20,476,391	0 042795
2013	890,334	18,355,292	0 048506
2012	733,187	16,478,058	0 044495
2011	927,135	16,514,417	0 056141
2010	508,000	15,416,136	0 032952

2	**Total** of line 1, column (d)	2	0 224889
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	0 044978
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5	4	20,593,658
5	Multiply line 4 by line 3	5	926,262
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	12,226
7	Add lines 5 and 6	7	938,488
8	Enter qualifying distributions from Part XII, line 4	8	903,353

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 page 18 of the instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter _____ (attach copy of letter if necessary–see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b		1	24,452
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	0
3	Add lines 1 and 2		3	24,452
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-		5	24,452
6	Credits/Payments			
a	2015 estimated tax payments and 2014 overpayment credited to 2015 — 6a: 24,000			
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	24,000
8	Enter any **penalty** for underpayment of estimated tax Check here ☑ if Form 2220 is attached		8	250
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶		9	702
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 2015 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)?	1b		No
	If the answer is "Yes" to ***1a*** *or* ***1b,*** *attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year **(1)** On the foundation ▶ $ 0 **(2)** On foundation managers ▶ $ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities*	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? *If "Yes," attach a conformed copy of the changes*	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? *If "Yes," attach the statement required by General Instruction T*	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? *If "Yes," complete Part II, col (c), and Part XV*	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ UT			
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? *If "No," attach explanation*	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 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? *If "Yes," complete Part XIV*	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*	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?	13	Yes	

Website address ▶ www.browningkimballfoundation.com

14 The books are in care of ▶ Foundation Management Inc Telephone no ▶ (405) 755-5571

Located at ▶ 2932 NW 122nd St Suite D Oklahoma City OK ZIP+4 ▶ 73120

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** —Check here ▶ ☐

and enter the amount of tax-exempt interest received or accrued during the year ▶ 15

16	At any time during calendar year 2015, 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?		Yes	No
		16		No
	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 ▶			

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

	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☑ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☑ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☑ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☑ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☑ 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). ☐ Yes ☑ 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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
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 2015?	1c		No
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 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? ☐ Yes ☑ 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).	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? ☐ Yes ☑ No			
b	If "Yes," did it have excess business holdings in 2015 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 2015).*	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	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 2015?	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))?	☐ Yes	☑ No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes	☑ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes	☑ No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions)	☐ Yes	☑ 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?	☐ Yes	☑ 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 ▶ ☐				
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?	☐ Yes	☐ No		
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes	☑ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			6b	No
	If "Yes" to 6b, file Form 8870				
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes	☑ 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 **(d)** compensation	Expense account, **(e)** other allowances
NONE				

Total number of other employees paid over $50,000 ▶ 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)*

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
DA DAVIDSON AND COMPANY 8 THIRD STREET NORTH PO BOX 5015 GREAT FALLS,MT 594035015	PORTFOLIO MANAGEMENT	97,959
FOUNDATION MANAGEMENT INC 2932 NW 122ND SUITE D OKLAHOMA CITY,OK 73120	MANAGEMENT SERVICES	91,857
Total number of others receiving over $50,000 for professional services. ▶		0

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	
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	
2	
All other program-related investments See instructions 3	
Total. Add lines 1 through 3 ▶	0

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	20,288,081
b	Average of monthly cash balances		1b	619,186
c	Fair market value of all other assets (see instructions)		1c	0
d	**Total** (add lines 1a, b, and c)		1d	20,907,267
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e 0		
2	Acquisition indebtedness applicable to line 1 assets		2	0
3	Subtract line 2 from line 1d		3	20,907,267
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)		4	313,609
5	**Net value of noncharitable-use assets.**Subtract line 4 from line 3 Enter here and on Part V, line 4		5	20,593,658
6	**Minimum investment return.**Enter 5% of line 5		6	1,029,683

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	1,029,683
2a	Tax on investment income for 2015 from Part VI, line 5	2a	24,452		
b	Income tax for 2015 (This does not include the tax from Part VI)	2b			
c	Add lines 2a and 2b			2c	24,452
3	Distributable amount before adjustments Subtract line 2c from line 1			3	1,005,231
4	Recoveries of amounts treated as qualifying distributions			4	0
5	Add lines 3 and 4			5	1,005,231
6	Deduction from distributable amount (see instructions)			6	0
7	**Distributable amount**as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1			7	1,005,231

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	903,353
b	Program-related investments—total from Part IX-B	1b	0
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	903,353
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	0
6	**Adjusted qualifying distributions.**Subtract line 5 from line 4	6	903,353

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 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				1,005,231
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.			167,599	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010.				
b From 2011.				
c From 2012.				
d From 2013.				
e From 2014.				
f **Total** of lines 3a through e.	0			
4 Qualifying distributions for 2015 from Part XII, line 4 ▶ $ 903,353				
a Applied to 2014, but not more than line 2a			167,599	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2015 distributable amount.				735,754
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2015	0			0
(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	0			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
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.		0		
d Subtract line 6c from line 6b Taxable amount —see instructions		0		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				269,477
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)	0			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	0			
9 **Excess distributions carryover to 2016.** Subtract lines 7 and 8 from line 6a	0			
10 Analysis of line 9				
a Excess from 2011.				
b Excess from 2012.				
c Excess from 2013.				
d Excess from 2014.				
e Excess from 2015.				

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 2015, 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)

	Tax year	Prior 3 years			(e) Total
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	**(a)** 2015	**(b)** 2014	**(c)** 2013	**(d)** 2012	
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
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					
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))

BARBARA COWAN

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 e-mail address of the person to whom applications should be addressed

KARI KOSTER Representative
2932 NW 122nd Street Suite D
Oklahoma City, OK 73120
(405) 755-5571

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

APPLICATION PACKAGE CONTAINS ALL REQUIREMENTS

c Any submission deadlines

N/A

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

N/A

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				849,401
b *Approved for future payment*				
Total . . . . . ▶ **3b**				0

Part XVI-A Analysis of Income-Producing Activities

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					
4 Dividends and interest from securities. . .			14	475,287	
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					
7 Other investment income.			14	1,503	
8 Gain or (loss) from sales of assets other than inventory			18	947,363	
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). .		0		1,424,153	0
13 **Total.** Add line 12, columns (b), (d), and (e).				**13**	1,424,153

(See worksheet in line 13 instructions to verify calculations)

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

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)

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

		Yes	No
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?			
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

****** | 2016-11-04 | ******

Signature of officer or trustee | Date | Title

May the IRS discuss this return with the preparer shown below (see instr)? ☑ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
Mary Kay Griffin				P00185675

Firm's name ▶ CBIZ MHM LLC

Firm's EIN ▶ 34-1878512

Firm's address ▶ 175 S WEST TEMPLE STE 650 SALT LAKE CITY, UT 84101

Phone no (801) 364-9300

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)
Davidson #1159 - Detail Avail on Request		2015-01-01	2015-12-31
Davidson #1159 - Detail Avail on Request		2014-01-01	2015-12-31
Davidson #8550 - Detail Avail on Request		2015-01-01	2015-12-31
Davidson #8550 - Detail Avail on Request		2014-01-01	2015-12-31
Davidson #9105 - Detail Avail on Request		2015-01-01	2015-12-31
Davidson #9105 - Detail Avail on Request		2014-01-01	2015-12-31
Davidson #9110 - Detail Avail on Request		2014-01-01	2015-12-31
Davidson #9110 - Detail Avail on Request		2014-01-01	2015-12-31
DAvidson #9092 - Detail Avail on Request		2015-01-01	2015-12-31
DAvidson #9092 - Detail Avail on Request		2014-01-01	2015-12-31

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)
401,468		406,498	-5,030
602,753		570,824	31,929
428,895		457,824	-28,929
2,335,705		1,467,563	868,142
21,567		22,847	-1,280
206,024		230,642	-24,618
782,731		746,130	36,601
3,229		3,229	0
103,038		137,385	-34,347
562,162		474,585	87,577

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			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** 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	
			-5,030
			31,929
			-28,929
			868,142
			-1,280
			-24,618
			36,601
			0
			-34,347
			87,577

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)
Capital Gains Dividends		2014-01-01	2015-12-31

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)
17,318			17,318

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			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** 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	
			17,318

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
BARBARA COWAN PO BOX 2607 HAVRE,MT 59501	DIRECTOR 0 00	0	0	0
LISA COWAN PO BOX 2607 HAVRE,MT 59501	DIRECTOR 0 00	0	0	0
WILLIAM COWAN PO BOX 2607 HAVRE,MT 59501	DIRECTOR 0 00	0	0	0
WILLIAM B COWAN PO BOX 2607 HAVRE,MT 59501	PRESIDENT 0 00	0	0	0
Brett Huestis pO BOX 2607 HAVRE,MT 59501	DiRECTOR 0 00	0	0	0
Michelle Cowan PO BOX 2607 HAVRE,MT 59501	DiRECTOR 0 00	0	0	0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year*				
ANGEL FLIGHT WEST 3161 DONALD DOUGLAS LOOP SOUTH SANTA MONICA,CA 90405	NONE/CHARITABLE ORGANIZATION		TO SUPPORT CHARITABLE PURPOSE	5,000
Big Brother Big Sister - Helena 30 West 6th Ave Helena,MT 59601	nONE/CHARITABLE ORANIZATION		To Support Charitable Purpose	5,000
Big Brother Big Sister of Greater Falls I8 6th Street North Ste 26 Great FALLS,MT 59401	nOnE/CHARITABLE ORAnIZATIOn		TO SUPPORT CHARITABLE PURPOSE	5,000
Big Brother Big Sister Park & Sweet 105 1/2 South 2nd Livingston,MT 59047	nOnE/CHARITABLE ORAnIZATIOn		TO SUPPORT CHARITABLE PURPOSE	2,500
BLAINE COUNTY MUSEUM 501 INDIANA AVENUE CHINOOK,MT 59523	NONE/CHARITABLE ORANIZATION		TO SUPPORT CHARITABLE PURPOSE	8,000
BLAINE COUNTY WILDLIFE MUSEUM 417 INDIANA AVENUE CHINOOK,MT 59523	NONE/CHARITABLE ORANIZATION		TO SUPPORT CHARITABLE PURPOSE	11,500
BOYS & GIRLS HI-LINE PO BOX 68 HAVRE,MT 59501	NONE/CHARITABLE ORANIZATION		TO SUPPORT CHARITABLE PURPOSE	50,000
CASA-CAN 325 2 AVE N GREAT FALLS,MT 59401	NONE/CHARITABLE ORGANIZATION		TO SUPPORT CHARITABLE PURPOSE	10,000
CENTER FOR MENTAL HEALTH FDN PO BOX 1653 GREAT FALLS,MT 59403	NONE/CHARITABLE ORGANIZATION		TO SUPPORT CHARITABLE PURPOSE	20,000
CENTER FOR MUSIC 3254 19TH STREET SAN FRANCISCO,CA 94110	NONE/CHARITABLE ORGANIZATION		TO SUPPORT CHARITABLE PURPOSE	7,500
Chouteau County Library Foundation PO BOX 639 Fort Benton,MT 59420	nONE/CHARITABLE ORANIZATION		To Support Charitable Purpose	20,000
EAGLE MOUNT PO BOX 2983 GREAT FALLS,MT 59403	NONE/CHARITABLE ORGANIZATION		TO SUPPORT CHARITABLE PURPOSE	30,000
Erik's Ranch 1627 West Main St 340 Bozeman,MT 59715	NONE/CHARITABLE ORANIZATION		TO SUPPORT CHARITABLE PURPOSE	20,000
FLORENCE CRITTENTON HOME 715 WEST MARIPOSA STREET PHOENIX,AZ 85013	NONE/CHARITABLE ORGANIZATION		TO SUPPORT CHARITABLE PURPOSE	7,500
Great Falls Children's Receiving Home PO BOX 1061 Great FaLLS,MT 59403	nONE/CHARITABLE ORANIZATION		To Support Charitable Purpose	10,000
Total . . . . . ▶ **3a**				849,401

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year*				
GREAT FALLS RESCUE MISSION 317 2ND AVE S GREAT FALLS,MT 59401	NONE/CHARITABLE ORGANIZATION		TO SUPPORT CHARITABLE PURPOSE	10,000
Havre Beneath the Streets 120 Third Ave Havre,MT 59501	nONE/CHARITABLE ORANIZATION		To Support Charitable Purpose	10,100
HE & M Turner Clack Memorial Museum Fnd PO BOX 1496 HavRE,MT 59501	nONE/CHARITABLE ORANIZATION		To Support Charitable Purpose	5,000
HOPE THROUGH HEALTH PO BOX 605 MEDWAY,MA 02053	NONE/CHARITABLE ORGANIZATION		TO SUPPORT CHARITABLE PURPOSE	20,000
Hudson DAvid McNeel Memorial Fund 4580 Klahanie Dr SE 230 Issaquah,WA 98029	nONE/CHARITABLE ORANIZATION		To Support Charitable Purpose	10,000
LEWIS & CLARK FOUNDATION PO BOX 1864 HELENA,MT 59403	NONE/CHARITABLE ORGANIZATION		TO SUPPORT CHARITABLE PURPOSE	5,000
MENTAL HEALTH AMERICA OF MONTANA 205 HAGGERTY LN 190 BOZEMAN,MT 59715	NONE/CHARITABLE ORANIZATION		TO SUPPORT CHARITABLE PURPOSE	20,000
MT METH PROJECT PO BOX 8944 MISSOULA,MT 59807	NONE/CHARITABLE ORANIZATION		TO SUPPORT CHARITABLE PURPOSE	35,000
Neighborworks Great Falls 509 1st Ave South Great Falls,MT 59401	nONE/CHARITABLE ORANIZATION		To Support Charitable Purpose	10,000
OAK HALL EPISCOPAL SCHOOL 2815 MOUNT WASHINGTON ROAD ARDMORE,OK 73401	NONE/CHARITABLE ORANIZATION		TO SUPPORT CHARITABLE PURPOSE	80,000
Ogden Nature Center 966 West 12th Street Ogden,UT 84404	nONE/CHARITABLE ORANIZATION		To Support Charitable Purpose	10,000
One Montana 2066 Stadium Drive BozEMAN,MT 59715	nONE/CHARITABLE ORANIZATION		To Support Charitable Purpose	10,000
SCOTTISH RITE CHILDHOOD 4202 HERMITAGE ROAD RICHMOND,VA 23227	NONE/CHARITABLE ORGANIZATION		TO SUPPORT CHARITABLE PURPOSE	165,000
Special K Ranch PO Box 479 Columbus,MT 59019	nOnE/CHARITABLE ORAnIZATIOn		TO SUPPORT CHARITABLE PURPOSE	14,501
St Phillips Church 516 McLish Avenue SW ArDMORE,OK 73401	nONE/CHARITABLE ORANIZATION		To Support Charitable Purpose	15,000
Total . . . . . ▶ **3a**				849,401

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	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
a *Paid during the year*				
YOUR COMMUNITY CONNECTION 2261 ADAMS AV OGDEN,UT 84409	NONE/CHARITABLE ORGANIZATION		TO SUPPORT CHARITABLE PURPOSE	40,000
YOUTH IMPACT 2305 GRANT AV OGDEN,UT 84401	NONE/CHARITABLE ORGANIZATION		TO SUPPORT CHARITABLE PURPOSE	60,000
Great Falls Symphony Association Inc PO BOX 1078 Great FALLS,MT 59403	NONE/CHARITABLE ORANIZATION		To Support Charitable Purpose	5,000
Hill County 4-H Foundation 315 4th Street HavRE,MT 59501	nONE/CHARITABLE ORANIZATION		To Support Charitable Purpose	10,000
Intermountain Deaconess Children's Services 500 South Lamorn Street Helena,MT 59601	nONE/CHARITABLE ORANIZATION		To Support Charitable Purpose	15,000
Irwin & Florence Rosten Foundation PO BOX 750 Darby,MT 59829	nONE/CHARITABLE ORANIZATION		TO SUPPORT CHARITABLE PURPOSE	10,000
Make-a-Wish Montana 175 North 27th Street Billings,MT 59101	nONE/CHARITABLE ORANIZATION		TO SUPPORT CHARITABLE PURPOSE	7,800
Providence Montana Health Foundation 500 West Broadway Missoula,MT 59802	nONE/CHARITABLE ORANIZATION		To Support Charitable Purpose	10,000
St Vincent Healthcare Foundation 1105 North 30th Street Billings,MT 59101	nONE/CHARITABLE ORANIZATION		To Support Charitable Purpose	20,000
Valier Public Library PO BOX 247 Valier,MT 59486	nONE/CHARITABLE ORANIZATION		To Support Charitable Purpose	5,000
YWCA of Helena PO BOX 518 Helena,MT 59624	nONE/CHARITABLE ORANIZATION		TO SUPPORT CHARITABLE PURPOSE	25,000
University of Oklahoma Foundation 100 Timberdell Road Norman,OK 73019	nONE/CHARITABLE ORANIZATION		To Support Charitable Purpose	10,000
Total . . . . . ▶ **3a**				849,401

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491315001206

TY 2015 Investments Corporate Bonds Schedule

Name: Browning Kimball Foundation
c/o Foundation Management Inc

EIN: 94-2766079

Name of Bond	End of Year Book Value	End of Year Fair Market Value
CORP BONDS	4,394,526	4,495,881
Corp Bonds	1,635,341	1,524,280

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491315001206

TY 2015 Investments Corporate Stock Schedule

Name: Browning Kimball Foundation
c/o Foundation Management Inc
EIN: 94-2766079

Name of Stock	End of Year Book Value	End of Year Fair Market Value
SM/MID CAP VAL FUND	1,008,595	1,158,232
EQUITY INCOME FUND	8,391,951	11,698,377
FOREIGN STOCK FUND	1,524,933	1,402,186

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491315001206

TY 2015 Other Assets Schedule

Name: Browning Kimball Foundation
c/o Foundation Management Inc

EIN: 94-2766079

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
PREPAID EXCISE TAX	9,920	0	0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491315001206

TY 2015 Other Expenses Schedule

Name: Browning Kimball Foundation
c/o Foundation Management Inc

EIN: 94-2766079

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES PAID	2,837	2,837		0
Management Fee	91,857	41,857		50,000
Telephone	551	551		0
Accrued Interest	10,575	10,575		0
Bond Premium	31,874	31,874		0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491315001206

TY 2015 Other Income Schedule

Name: Browning Kimball Foundation
c/o Foundation Management Inc

EIN: 94-2766079

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
Other Income	1,503	1,503	1,503

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491315001206

TY 2015 Other Increases Schedule

Name: Browning Kimball Foundation
c/o Foundation Management Inc

EIN: 94-2766079

Description	Amount
Prior Period Basis Adjustment	7,314

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491315001206

TY 2015 Other Professional Fees Schedule

Name: Browning Kimball Foundation
c/o Foundation Management Inc

EIN: 94-2766079

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Professional Fees	113,859	113,859		0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491315001206

TY 2015 Taxes Schedule

Name: Browning Kimball Foundation
c/o Foundation Management Inc

EIN: 94-2766079

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXCISE TAXES	61,338	0		0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491315001206

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

2015

Name of the organization	**Employer identification number**
Browning Kimball Foundation c/o Foundation Management Inc	94-2766079

Organization type (check one)

Filers of:	**Section:**
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization
	☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	☐ 527 political organization
Form 990-PF	☑ 501(c)(3) exempt private foundation
	☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
	☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

☑ 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 33 1/3% 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 Do not 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 is not covered by the General Rule and/or the Special Rules does not 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 does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization
Browning Kimball Foundation
c/o Foundation Management Inc

Employer identification number
94-2766079

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
1	William Barbara Cowan PO BOX 2607 Havre, MT 59501	$ 990,757	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
2	Lisa Huestis PO BOX 2607 Havre, MT 59501	$ 86,784	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization	Employer identification number
Browning Kimball Foundation c/o Foundation Management Inc	94-2766079

Part II Noncash Property

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

(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	9,765 SPDR Gold Trust Shares	$ 990 757	2015-12-28
2	2,786 General Electric Shares	$ 86 784	2015-12-23
		$	
		$	
		$	
		$	

Name of organization	Employer identification number
Browning Kimball Foundation c/o Foundation Management Inc	94-2766079

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

(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

(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

(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