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.

▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

	101	alen	idar year 2017 of tax year begini	าเกg		, and ending			
	Nan	ne of	foundation				A Employer identification	number	
	M	<u>i1</u>	ton S Olson Sma	ıll Anima	l Benefit				
		F	oundation				47-1656729		
	Nurr	ber a	nd street (or P O box number if mail is	not delivered to street	address)	Room/suite	B Telephone number		
	Ρ	0	Box 1827				701-577-96	18	
			own, state or province, country, a	nd ZIP or foreign p	ostal code		C If exemption application is p		
				802-1827				•	
			all that apply: Initial		Initial return of a fo	ormer public charity	D 1. Foreign organizations	s, check here	
	•		Final r	eturn	Amended return	, , , , , , , , , , , , , , , , , , ,	j	,	
			Addre	ss change	Name change		2 Foreign organizations me check here and attach co	eeting the 85% test,	
	H C	heck			empt private foundation	011	E If private foundation sta		
		_	ction 4947(a)(1) nonexempt char	` ` 	Other taxable private founda	ation & W	under section 507(b)(1)		
	I Fa		arket value of all assets at end of y			Accrual	F If the foundation is in a		
			Part II, col. (c), line 16)	·	her (specify)		under section 507(b)(1)		
	>		1.494.60	9 . (Part I, colum	nn (d) must be on cash basi	s.)		,(=,, =,,==============================	
	_	rt I	Analysis of Revenue and Expe	nses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements	
1			(The total of amounts in columns (b), necessarily equal the amounts in coli	(c), and (d) may not umn (a))	expenses per books	income	income	for charitable purposes (cash basis only)	
1/		1	Contributions, gifts, grants, etc.,	received	195,210.		N/A		
\mathcal{I}_{V}		2	Check If the foundation is not re						
	7	3	Interest on savings and temporary cash investments		3,848.	3,848.		Statement 1	
		4	Dividends and interest from secu	ırıtıes	23,382.	14,459.		Statement 2	
		5a	Gross rents					5-4-0-11-0-11-0-1	
2018			Net rental income or (loss)						
		_	Net gain or (loss) from sale of assets n	ot on line 10	7,080.		RECE	IVED	
	Revenue	ь	Gross sales price for all	7,080.	, , , , , ,			IVEU	
7	Ver	7	<u></u>			7,080.	N 455 6	S S S S S S S S S S S S S S S S S S S	
=	æ	8	Net short-term capital gain	,		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	APR 0	3 2018	
,== 4		9	Income modifications					<u> </u>	
≩		10a	Gross sales less returns and allowances				OGDE		
\equiv			Less Cost of goods sold						
\Box			Gross profit or (loss)						
		11	Other income						
Z		12	Total Add lines 1 through 11		229,520.	25,387.			
SCANNED MAY		13	Compensation of officers, directors, tr	ustees, etc	5,370.	268.		5,102.	
Ø		14	Other employee salaries and was	ges					
		15	Pension plans, employee benefit	s					
	ses	16a	Legal fees						
	Expens	Ь	Accounting fees	Stmt 3	2,950.	0.		2,950.	
	쯦	E	Other professional fees						
	ve	17	Interest						
	Administrative	18	Taxes	Stmt 4	181.	0.		0.	
	ııstı	19	Depreciation and depletion						
	Ē	20	Occupancy			_ 			
	Αď	21	Travel, conferences, and meeting	gs		-			
	and	22	Printing and publications						
	ē.	23	Other expenses	Stmt 5	20.	0.		20.	
	Operating	24	Total operating and administra			-			
	Serie		expenses. Add lines 13 through		8,521.	268.		8,072.	
	Ö	25	Contributions, gifts, grants paid		65,000.			65,000.	
		l	Total expenses and disbursem	ents.					
		-	Add lines 24 and 25		73,521.	268.	1	73,072.	
	_	27	Subtract line 26 from line 12:						
		-	Excess of revenue over expenses and	disbursements	155,999.				
		l	Net investment income (if negation			25,119.			
		l	Adjusted net income (if negative,				N/A		

Milton S Olson Small Animal Benefit Foundation

For	m 99	00-PF (2017) Foundation		47-1	L656729 Page 2
Б	art	Balance Sheets Atlached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
<u></u>		·	(a) Book Value	(b) Book Value	(c) Fair Market Value
	•	Cash - non-interest-bearing			
	1	Savings and temporary cash investments	1,117,196.	556,538.	556,538.
	3	Accounts receivable ▶	1		
	١.	Less: allowance for doubtful accounts			
	4	Pledges receivable			
		Less: allowance for doubtful accounts			
	1 -	Grants receivable Receivables due from officers, directors, trustees, and other			
	6	disqualified persons			
	7	Other notes and loans receivable			
	'	Less: allowance for doubtful accounts			
v	8	Inventories for sale or use			
Assets	9	- · · · · · · · · · · · · · · · · · · ·			
As		Investments - U.S. and state government obligations Stmt 6	0.	101,893.	102,140.
	ļ.	Investments - corporate stock Stmt 7	32,768.	139,143.	136,827.
		Investments - corporate bonds			
	11	Investments land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other Stmt 8	167,289.	675,678.	699,104.
	14	Land, buildings, and equipment: basis ▶			
	ļ	Less accumulated depreciation			
	15	Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the			
_	<u> </u>	instructions. Also, see page 1, item I)	1,317,253.	1,473,252.	1,494,609.
	1	Accounts payable and accrued expenses			
	18	Grants payable			
ties	19	Deferred revenue			
Liabilities	20	Loans from officers directors, trustees, and other disqualified persons			
L:a	21	Mortgages and other notes payable Other liabilities (describe ▶)			
	**	other natimites (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31			
Balances	24	Unrestricted			
ā	25	Temporarily restricted			
Ba	26	Permanently restricted			
ů		Foundations that do not follow SFAS 117, check here			
ř		and complete lines 27 through 31	_ 1	_	
Assets or Fund	27	Capital stock, trust principal, or current funds	0.	0.	
SSe	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.	
¥	29	Retained earnings, accumulated income, endowment, or other funds	1,317,253.	1,473,252.	
Net	30	Total net assets or fund balances	1,317,253.	1,473,252.	
	١,,	Total liabilities and not assets/fund belongs	1,317,253.	1,473,252.	
	31	Total liabilities and net assets/fund balances		1,413,232.	
LF	art	Analysis of Changes in Net Assets or Fund Ba	aiances 		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30		
		st agree with end-of-year figure reported on prior year's return)		1	1,317,253.
		r amount from Part I, line 27a		2	<u> 155,999.</u>
3		r increases not included in line 2 (itemize)		3	0.
4		lines 1, 2, and 3		4	1,473,252.
		reases not included in line 2 (itemize)		5	0.
<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	1,473,252.
					Form 990-PF (2017)

Part IV Capital Gain	s and Lo	sses for Tax on In	vestmen	t Income						
) of property sold (for exam or common stock, 200 shs		ite,	(b)	How acq - Purcha - Donati	uired ise on	(c) Date a (mo., da		(d) Date sold (mo., day, yr.)
12 Capital Gains	Divid	lends								
<u>b</u>					ļ					
<u>c</u>										
<u>d</u>					 					
<u>e</u>	(6) [Pepreciation allowed	(a) Cos	st or other basis				(b) Ga	ın or (loss)	<u> </u>
(e) Gross sales price	""	(or allowable)		expense of sale					(f) minus (
a 7,080										7,080.
b										
C										
<u>d</u>										
Complete only for assets sho		column (h) and owned by	he foundation	2 00 12/21/60				. 0 (0-	-	
Complete only for assets sno		i) Adjusted basis		cess of col. (i)					ol. (h) gain ot less thar	
(i) FMV as of 12/31/69		as of 12/31/69		col. (j), if any				Losses (from col. (
<u>a</u>										7,080.
<u>b</u>				·· ····						
<u>c</u>										
d e										
<u></u>		C If goin also anto-	un Dort Llune	7	_				·	
2 Capital gain net income or (net	t capital loss)	{ If gain, also enter If (loss), enter -0-	ın Part I, Illie - ın Part I. line	7	 	2				7,080.
3 Net short-term capital gain or ((loss) as defu								•	
If gain, also enter in Part I, line			(0)		J					
If (loss), enter -0- in Part I, line			Dadwasa	Tour on Nor		3			<u>_N/A</u>	
Part V Qualification							ent inc	onie		
(For optional use by domestic priv	ate foundatio	ons subject to the section 4	1940(a) tax or	i net investment ir	acome	3.)				
If section 4940(d)(2) applies, leav	e this part bla	ınk.								
Was the foundation liable for the s				•	rıod?					X Yes No
If "Yes," the foundation doesn't qu										
1 Enter the appropriate amount (a)	in each colur		istructions de	lore making any e				_		(d)
Base period years Calendar year (or tax year begi	nnina in)	(b) Adjusted qualifying dis	tributions	Net value of no	(c) oncha		se assets			ution ratio ided by col. (c))
2016	ining inj							- 	coi. (b) div	ided by col. (c/)
2015										
2014										
2013										
2012			0.	L				-		.000000
0 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1										
2 Total of line 1, column (d)3 Average distribution ratio for the	ha E waar haa	a pariod duuda tha tatal a	on line 2 by E	O or by the gumb	or of	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		2		
the foundation has been in exi			on mie z by o	o, or by the numb	ici Ui	years		3		
the learned to mae been in ex-	3141100 11 1000	man o yours								
4 Enter the net value of nonchar	itable-use ass	sets for 2017 from Part X,	line 5					4		
5 Multiply line 4 by line 3								5		
C. Fater 19/ of not investment in	nome (10/ ei	Doct I line O7h)								
6 Enter 1% of net investment inc	Lonie (1% 0i	raiti, iiie 270)						6		
7 Add lines 5 and 6								7		
8 Enter qualifying distributions f								8		
If line 8 is equal to or greater t See the Part VI instructions.	han line 7, ch	eck the box in Part VI, line	1b, and comp	plete that part usin	ng a 1	% tax rat	te			

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orm 990-P			<u>-165</u>			Page 4
Part VI	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), of	or 4948	- see	instru	ctio	ns)
1a Exemp	of operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.					
Date o	f ruling or determination letter: (attach copy of letter if necessary-see instructions)		1			
	stic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1_1	l		_ 5	02.
of Part	I, line 27b					
c All oth	er domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).		-			
	ider section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2	1			0.
	nes 1 and 2	3	\top		5	02.
	e A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4				0.
	ised on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	+-		5	02.
	s/Payments:		+			<u></u>
		0.				
		0.				
		0.				
•		0.				
	p withholding erroncods y withhold reduction and payments. Add lines 6a through 6d	7	Ì			0.
	any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	+			2
	ie. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9	 			$\frac{2}{04}$.
	ayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	+			04.
-	the amount of line 10 to be. Credited to 2018 estimated tax	·				
	-A Statements Regarding Activities					
	the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or inter	uono in		\neg	Yes	No
		vene m		—	100	
	olitical campaign?	dafiaitiaa		1a		X
	spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the	uenniion		1b		<u>X</u>
	answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or				i	
	uted by the foundation in connection with the activities.					37
	e foundation file Form 1120-POL for this year?			1c		_X_
	the amount (if any) of tax on political expenditures (section 4955) imposed during the year	^		1 1		
	n the foundation. ► \$ 0 . (2) On foundation managers ► \$	0.			i	
	the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			1	i	
•	gers ▶ \$0.			}		
	e foundation engaged in any activities that have not previously been reported to the IRS?			2		_X_
	," attach a detailed description of the activities.					
	e foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporati	on, or			į.	
-	s, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		<u>X</u>
	e foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	," has it filed a tax return on Form 990-T for this year?	1	N/A	4b		
	nere a liquidation, termination, dissolution, or substantial contraction during the year?			_5		_X_
	," attach the statement required by General Instruction T				i	
	e requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					i
● By la	anguage in the governing instrument, or) 1		
● By s	tate legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the	state law		- 1	i	
remaii	n in the governing instrument?			6	<u>X</u>	
7 Did th	e 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	X	
				1	 	
8a Enter	the states to which the foundation reports or with which it is registered. See instructions					
ND				[: 	
b If the a	answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
of eac	h state as required by General Instruction G? If "No," attach explanation			8b	X	L
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 2	017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV			9		_X_
10 Did an	y persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses			10		X
			F	orm 990)-PF	(2017)

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Form 990-PF (2017) 47-1656729 **Foundation** Page 5 Part VII-A | Statements Regarding Activities (continued) No Yes 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions 11 X 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Website address ► N/A 14 The books are in care of ▶ Heidi Olson, First National Bank & Telephone no. ▶ 701-577-9618 ZIP+4 ▶<u>58802</u> Located at ▶ PO Box 1827, Williston, ND 15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here N/A and enter the amount of tax-exempt interest received or accrued during the year No 16 At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, Yes securities, or other financial account in a foreign country? 16 Х See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required Yes No File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly): Yes X No (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) Yes X No a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? X Yes No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available Yes X No for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception Check "No" if the foundation agreed to make a grant to or to employ the official for a period after Yes X No termination of government service, if terminating within 90 days.) b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations X 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 2017? Х 1c 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)) a At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2017? If "Yes," list the years 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 N/A 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. 3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No b If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017.) N/A 3b X 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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had not been removed from jeopardy before the first day of the tax year beginning in 2017?

Milton S Olson Small Animal Benefit Form 990-PF (2017) Foundation 47-1656729 Page 6 Part VII-B | Statements Regarding Activities for Which Form 4720 May Be Required (continued) Yes No 5a During the year, did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section Yes X No 4945(d)(4)(A)? See instructions (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? 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 N/A 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 Yes No expenditure responsibility for the grant? N/A 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 __ Yes 🗓 No a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 6b Х If "Yes" to 6b, file Form 8870. Yes X No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? 7b Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred compensation (c) Compensation (e) Expense account, other allowances (b) Title, and average hours per week devoted to position (a) Name and address (If not paid, enter -0-) First National Bank & Trust Co Trustee PO Box 1827 Williston, ND 58802-1827 2.50 5,370. 0 0.

				L
2 Compensation of five highest-paid employees (other than those	included on line 1). If none	, enter "NONE."		<u> </u>
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances
NONE				
	_		1	
	- 			
	_			
			<u> </u>	
Total number of other employees paid over \$50,000			▶ L	(

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Form 990-PF (2017) Foundation		1656729 Page 7
Part VIII Information About Officers, Directors, Trustees, F Paid Employees, and Contractors (continued)	oundation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If no	ne, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relev	vant statistical information such as the	Fynanaa
number of organizations and other beneficiaries served, conferences convened, research pa	apers produced, etc.	Expenses
1N/A		
2		
3		
4		
Dort IV B C		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the ta	y year on lines 1 and 2	Amount
1 N/A	A year on times 1 and 2.	Amount
Ι Μ/ Α		
2		
		· · · · · · · · · · · · · · · · · · ·
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3		0.

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P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	T	
a	Average monthly fair market value of securities	1a	742,524.
b	Average of monthly cash balances	1b	742,524. 595,379.
	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,337,903.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,337,903.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	20,069.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,317,834.
6	Minimum Investment return Enter 5% of line 5	6	65,892.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations, check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	65,892.
2a	Tax on investment income for 2017 from Part VI, line 5		
b	Income tax for 2017. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	502.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	65,390.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	65,390.
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	65,390.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	Ì	
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	73,072. 0.
þ	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:		
а	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	73,072.
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	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	73,072.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for	r the section

Form **990-PF** (2017)

4940(e) reduction of tax in those years.

Form 990-PF (2017)

Part XIII Undistributed Income (see instructions)

1 Describitable amount for 2017 from Part XI, fine 7 2 Undescribbed account, of any, as of the end of 2017 at Enter amount for 2016 only 5 Dical for prince years. 2 0.15 , 3 Excess dishi dishibitions carryover, if any, to 2017. a From 2012 From 2013 From 2013 From 2014 Grown 2015 From 2016 From 2017 From 2017 From 2017 From 2018 From 2016 From 2017 From 2016 From 2016 From 2016 From 2016 From 2016 From 2016 From 2017 From 2017 From 2017 From 2017 From 2018 From	,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
2 Londershould recover, 4 any, as of the end of 2017	· .				65.390.
Total for port years: 2015 366.		-			
b Total for print years: 20.1.5	1			59.864.	
2015 . 366 . 3 Excess distributions carryover, if any, to 2017: a From 2012 b Hom 2013 c From 2014 d From 2015 e From 2014 d From 2015 e From 2016 l Total of these 3a through e	·			37,002.	· <u></u>
3 Excess distributions carryover, if any, to 2017: a From 2012 b From 2015 c From 2015 c From 2016 f Total of Imes 3a through e 4 Qualifying distributions for 2017 from 24 Qualifying distributions for 2017 from 24 Qualifying distributions for 2017 from 25 Applied to 2016, but not more than line 2a 3 Applied to 2016, but not more than line 2a 3 Applied to 2016, but not more than line 2a 3 Applied to 2017 distributible amount 25 Remaining amount distributed out of corpus (Election required - see instructions) 4 Applied to 2017 distributible amount 20 C Remaining amount distributed out of corpus 5 Remaining amount distributed out of corpus 6 Eiter the net total of each column as indicate below 20 C C C C C C C C C C C C C C C C C C C			366		
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10 Analysis of line 9: a Excess from 2013 b Excess from 2014 c Excess from 2015 d Excess from 2016	Subtract lines 7 and 8 from line 6a	0.			
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d Excess from 2015	 				
d Excess from 2016					
					
					

	lation	II MIIMAI L	eneric	47-1	656729 Page 10
Part XIV Private Operating F		structions and Part Vi	I-A, question 9)	N/A	/
1 a If the foundation has received a ruling of	or determination letter that	it is a private operating			
foundation, and the ruling is effective fo	or 2017, enter the date of t	he ruling	▶ <u> </u>		
b Check box to indicate whether the found	d <u>ation is a private operatii</u>	ng foundation described		4942(J)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	1	
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for	}				
each year listed			ļ <u></u>		
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				4	
e Qualifying distributions made directly	Ì			}	
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon				Į	
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	Ì				
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	1/				
(4) Gross investment income	L				
Part XV Supplementary Info			if the foundation	n had \$5,000 or n	nore in assets
at any time during	the year-see insti	ructions.)			
1 Information Regarding Foundation	on Managers:				
a List any managers of the foundation wh			ributions received by th	e foundation before the c	lose of any tax
year (but only if they have contributed r	nore than \$5,000). (See s	ection 507(d)(2).)			
None					
b List any managers of the foundation wh			(or an equally large port	ion of the ownership of a	partnership or
other entity) of which the foundation ha	is a 10% or greater intere	st.			
None		<u> </u>			
2 Information Regarding Contribut					
Check here 🕨 🗶 if the foundation of	only makes contributions	to preselected charitable	organizations and does	not accept unsolicited re-	quests for funds. If
the foundation makes gifts, grants, etc.	, to individuals or organiza	ations under other condit	ions, complete items 2a	, b, c, and d.	<u> </u>
a The name, address, and telephone num	ber or email address of th	ne person to whom appli	cations should be addre	ssed:	
				- 	
b The form in which applications should it	be submitted and informa	tion and materials they s	hould include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	ls, such as by geographic	al areas, charitable fields,	, kinds of institutions, or	other factors:	

Foundation

47-1656729 Page 11

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year PC ARRR Rescue and Retirement Ranch, Inc. None For feral/stray cat 5292 129th Ave NW expenses. Williston, ND 58801 10,000. MonDak Humane Society Inc. None PC For spay and neuter PO Box 1572 expenses. Williston ND 58802-1572 19,000. Companion Animal Rescue of Eastern MT PC For Spay and Neuter expenses for cats and PO Box 146 Sidney MT 59270 dogs 10,000. Wolf Point Pound Puppies Animal None ₽C For purchase of Rescue transport van. PO Box 164 Wolf Point MT 59201 26,000. Total ▶ 3a 65,000. b Approved for future payment None Total **▶** 3b Form 990-PF (2017)

Form 990-PF (2017)

Part XVI-A	Analysis of	Income-Producina	Activities

nter gross amounts unless otherwise indicated.	Officialed	Jusiness income		Section 512, 513, Or 514	(e)
Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a	_				
Ь					
c					
d	·				
e	_		+-+-		
	_				
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash				2 040	
investments			14	3,848.	
4 Dividends and interest from securities			14	23,382.	
5 Net rental income or (loss) from real estate:	<u> </u>				
a Debt-financed property	<u> </u>		 		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			14	7,080.	
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue					
a	_				
b	_				
c					
d	_				
e					
2 Subtotal. Add columns (b), (d), and (e)	<u> </u>		0	34,310.	0
3 Total Add line 12, columns (b), (d), and (e)				13	34,310
See worksheet in line 13 instructions to verify calculation	ş.)				
Part XVI-B Relationship of Activitie	es to the Accon	nplishment of	Exempt Pu	rposes	
Line No Explain below how each activity for which	income is reported in	column (e) of Part XV	/I-∆ contributed	importantly to the accomp	lishment of
the foundation's exempt purposes (other			1-A contributed	importantly to the accomp	nament of
the restriction of exemply per posses (exited)	s) p. s g	- tor dadir parpoods;			
		·			
			<u></u>		
	 -				
	 _				
 					
· · · · · · · · · · · · · · · · · · ·					
					
					

	PF (2017) Fo u	on S Olson indation						1656729		ige 13
Part X			sfers to a	nd Transactio	ns a	nd Relations	hips With Non	charitable	•	
	Exempt Organ								V	N.
	he organization directly or indi					on described in sec	tion 501(c)		Yes	No
•	er than section 501(c)(3) organ	•	•		tions?					1
a (1)	sfers from the reporting found	iation to a noncharita	ote exempt or	ganization of.				10(1)		х
• •	Other assets							1a(1) 1a(2)		X
٠.	r transactions:							18(2)		
	Sales of assets to a noncharita	hle exempt organizat	tion					1b(1)		x
٠,,	Purchases of assets from a no							1b(2)		X
٠,	Rental of facilities, equipment,	•	, garneau ar					1b(3)		X
٠.	Reimbursement arrangements							1b(4)		X
• • •	Loans or loan guarantees							1b(5)		X
٠,	Performance of services or me	embership or fundrai	sing solicitatio	ins				1b(6)		Х
c Shar	ing of facilities, equipment, ma	ailing lists, other asse	ts, or paid em	ployees				1c		Х
d If the	answer to any of the above is	"Yes," complete the	following sche	dule. Column (b) sho	ould alv	ways show the fair	market value of the g	oods, other ass	ets,	
or se	rvices given by the reporting f	foundation. If the four	ndation receiv	ed less than fair marl	et valu	ie in any transactio	n or sharing arrange	ment, show in		
colur	nn (d) the value of the goods,	other assets, or serv	ices received			- ·				
(a) Line no	(b) Amount involved	(c) Name of		e exempt organization	1	(d) Description	n of transfers, transactio	ns, and sharing ar	rangeme	nts
		<u> </u>	N/A							
	ļ									
			 .							
						<u> </u>				
										
	<u> </u>			-				·		
						_				
	<u> </u>	<u> </u>				+				
	 									
	-									
										
										
					_					
ın se	e foundation directly or indirection 501(c) (other than sections, complete the following sch	on 501(c)(3)) or in se		or more tax-exempt	organi	zations described		Yes	X	No
	(a) Name of or			(b) Type of organiz	ation		(c) Description of re	lationship		
	N/A									
	<u> </u>									
					_					
						<u> </u>				
	Under penalties of perjury, I declare and belief, it is true, correct, and co	mplete Declaration of pr		n taxpayer) is based on a	III inform	nation of which prepare	,	May the IRS or return with the shown below	e prepar ? See in	er str
	Signature of officer or truster		1110		4	Title	OTTICEL	_ LX Yes		J No
_, L	Print/Type preparer's n		Preparer's s			Date	Check if self- employed	PTIN	-	
Paid	MELISSA WH	HITE, CPA	MELISS	A WHITE,	CP	02/27/18		P00851	284	

Form **990-PF** (2017)

Firm's EIN ► 45-0250958

Phone no. 701-239-8500

Preparer

Use Only

Firm's name ► EIDE BAILLY LLP

Firm's address ► 4310 17TH AVE S PO BOX 2545 FARGO, ND 58108-2545

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Organization type (check one):

Schedule of Contributors

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

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

OMB No 1545-0047

2017

Name of the organization

Milton S Olson Small Animal Benefit

Foundation

Employer identification number

47-1656729

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 X 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 property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributors 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 Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule 8 (Form 990, 990-EZ, or 990-PF) (2017)

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990 PF, Part I, line 2, to

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Foundation

Name of organization Milton S Olson Small Animal Benefit Employer identification number

47-1656729

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	Milton S. Olson Estate PO Box 1827 Williston, ND 58802-1827	\$ 195,200.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

Milton S Olson Small Animal Benefit Foundation

47-1656729

art II	Noncash Property (see instructions) Use duplicate copies of Pa	art ii ii additional space is ficeded	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

M

ne of organiz	ration S Olson Small Animal	Benefit	Employer identification number
	Exclusively religious, charitable, etc., continued the year from any one contributor. Complete of completing Part III, enter the total of exclusively religious. Use duplicate copies of Part III if additional	columns (a) through (e) and the following I s, charitable, etc., contributions of \$1,000 or less to	tion 501(c)(7), (8), or (10) that total more than \$1,000 for or the year (Enterthis info once) 47-1656729 total more than \$1,000 for the year (Enterthis info once) \$\sim \frac{1}{2} \square \frac{1}{2} \
) No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, ar	nd ZIP + 4	Relationship of transferor to transferee
n) 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, ar	nd ZIP + 4	Relationship of transferor to transferee
No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
) No. rom	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_ -			
	Transferee's name, address, a	(e) Transfer of gift	Relationship of transferor to transferee
-			

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Form 990-PF Interes	st on Savin	gs and Tem	porary	Cash In	vestments	Statement 1
Source	Reve	(a) Revenue Per Books 3,848.		(b) vestment come	(c) Adjusted Net Income	
Interest Earned From				3,848.		
Total to Part I, lir				3,848.		
Form 990-PF	Dividends	and Inter	est fr	om Secur	ities	Statement 2
Source	Gross Amount	Capital Gains Dividend		(a) evenue r Books	(b) Net Inves ment Inco	
Interest Ordinary Dividends Income Tax Free Dividends	1,175. 21,539. 7,748.	7,08	 0. 0.	1,175. 14,459. 7,748.	14,45	0. 59.
To Part I, line 4	30,462.			23,382.		
Form 990-PF		Accounti	ng Fee	s		Statement 3
Description		(a) Expenses Per Books	Net I	b) nvest- Income	(c) Adjusted Net Incom	
Accounting Fees		2,950.		0.		2,950.
To Form 990-PF, Pg	 1, ln 16b	2,950.		0.		2,950.

Form 990-PF	Taxes			Statement 4		
Description	(a) Expenses Per Books	(b) Net Inves		(c) Adjusted Net Incom		
Excise Tax	181.		0.			0.
To Form 990-PF, Pg 1, ln 18	181.		0.			0.
Form 990-PF	Other E	xpenses			Statement	5
Description	(a) Expenses Per Books	(b) Net Inverment Income		(c) Adjusted Net Incom		
Miscellaneous	20.		0.			20.
To Form 990-PF, Pg 1, ln 23	20.		0.			20.
Form 990-PF U.S. and S	State/City G	overnment	Obl	igations	Statement	 6
	State/City G U.S Gov'	. Other		igations ok Value	Statement Fair Marke	
Form 990-PF U.S. and S Description New Pub Sch.	U.S	. Other		<u> </u>	Fair Marke	t .
Description	U.S Gov'	. Other		ok Value	Fair Marke Value	.40.
Description New Pub Sch.	U.S Gov' X	Other t Gov't		ok Value 101,893.	Fair Marke Value 102,1	.40.
Description New Pub Sch. Total U.S. Government Obligation	U.S Gov' X tions vernment Obl	Other t Gov't		ok Value 101,893.	Fair Marke Value 102,1	40.
Description New Pub Sch. Total U.S. Government Obligation Total State and Municipal Government	U.S Gov' X tions vernment Obl	Other t Gov't - igations		ok Value 101,893. 101,893.	Fair Marke Value 102,1	40.
Description New Pub Sch. Total U.S. Government Obligation Total State and Municipal Government to Form 990-PF, Part I	U.S Gov' X tions vernment Obl	Other t Gov't - igations	Во	ok Value 101,893. 101,893.	Fair Marke Value 102,1 102,1	40.
Description New Pub Sch. Total U.S. Government Obligate Total State and Municipal Government of the state	U.S Gov' X tions vernment Obl	Other t Gov't - igations	Во	0k Value 101,893. 101,893.	Fair Marke Value 102,1 102,1 Statement	40. 40. 40.

Form 990-PF O	ther Investments		Statement	8
Description	Valuation Method	Book Value	Fair Marke Value	t
USAA Mut FDS TR Income FD Ser	COST	99,600.	100,0	99.
Vangaurd GNMA Admiral	COST	33,200.	32,7	95.
Vangaurd High-Yeild Corporate Fu	nd COST	33,200.	33,5	55.
Mairs & PWR FDS TR Com	COST	73,806.	75,4	02.
Vangaurd Growth Index Fund	COST	33,611.	39,7	24.
Vangaurd Wellington FD Inc Com	COST	35,683.	37,5	41.
Vangaurd 500 Index Fund Admiral	COST	67,778.	78,4	98.
T Rowe Price Tax-Free Income Fun	d COST			
Inc		66,400.	66,4	00.
USAA Tax Exempt FD Inc Inter Ter	m COST	66,400.	67,0	26.
Vangaurd Longterm Tax-Exemp Fund Investor	COST	99,600.	100,4	25.
Vangaurd Mun BD FD Inc Hi-Yield	T-E COST	·	•	
ADM		66,400.	67,6	39.
Total to Form 990-PF, Part II, 1	ine 13	675,678.	699,1	04.

Form 990-PF Election Under Regulations Section Statement 9
53.4942(a)-3(d)(2) to Apply
Excess Qualifying Distributions
to Prior Year's Undistributed Income

Pursuant to IRC Sec. 4942(h)(2) and Reg. 53.4942(a)-3(d)(2), Milton S. Olson Small Animal Benefit Foundation hereby elects to treat current year qualifying distributions of \$366 from the excess of the immediately preceding tax years undistributed income as being applied to the 2015 underdistributed amount of \$366.