Return of Private Foundation

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

OMB No 1545-0052 2017

Department of the Treasury Internal Revenue Service

▶ 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

For calendar year 2017 or tax year beginning , 2017, and ending Name of foundation A Employer identification number 75-1582503) 72-1582502 KEITH B. OHNMEIS FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) P O Box 1250 307 739 8686 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ Wilson, WY 83014 G Check all that apply Initial return Initial return of a former public charity D 1 Foreign organizations, check here ☐ Final return Amended return 2. Foreign organizations meeting the 85% test, X Address change Name change check here and attach computation Section 501(c)(3) exempt private foundation Check type of organization E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ 🗍 Fair market value of all assets at J Accounting method. X Cash Accrual If the foundation is in a 60-month termination end of year (from Part II, col (c), Other (specify) under section 507(b)(1)(B), check here ▶ 🗍 line 16) ► \$ (Part I, column (d) must be on cash basis) 222,688.09 Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment income (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per books purposes (cash basis only) income the amounts in column (a) (see instructions)) Contributions, gifts, grants, etc., received (attach schedule) 79,415.00 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 10,701.53 10,701.53 5a Gross rents FIVED Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 6a 8,111.18 Revenue **W R 2018** Gross sales price for all assets on line 6a 59,084.88 7 Capital gain net income (from Part IV, line 2) 8,111.18 Я Net short-term capital gain OGDEN 9 Income modifications Gross sales less returns and allowances 10a Less Cost of goods sold 0.00 Gross profit or (loss) (attach schedule) 1,380.00 1,380.00 11 Other income (attach schedule) Total. Add lines 1 through 11 99,607.71 20,192.71 0.00 12 Compensation of officers, directors, trustees, etc 13 SCANNED JUL 1 6 2018
Operating and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits Legal fees (attach schedule) Accounting fees (attach schedule) 992.90 992.90 Other professional fees (attach schedule) 57.55 57.55 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion . 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses (attach schedule) 24 Total operating and administrative expenses. Add lines 13 through 23 0.00 1,050.45 1,050.45 25 Contributions, gifts, grants paid 5,200.00 5,200.00 0.00 5,200.00 26 Total expenses and disbursements. Add lines 24 and 25 6,250.45 1,050.45 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements 93,357.26 Net investment income (if negative, enter -0-) 19,142.26 0.00 Adjusted net income (if negative, enter -0-)

For Paperwork Reduction Act Notice, see instructions.

1 Cash—non-interest-bearing 3,143.79 5,698.34 5,898.34 2,839 331,463.75 3	Pa	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year		End of	d of year		
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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 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) 4 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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) Part Year Cash Dividend 5 84.00	es					1			
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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 28 Paid-in or capital surplus, or land, bldg, and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances (see instructions) 31 Total liabilities and net assets/fund balances (see instructions) 4 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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) Part Year Cash Dividend 5 84.00	aga	i .							
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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) 2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► Adjustment 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► Prior Year Cash Dividend 5 84.00	ts	28	·						
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2 Enter amount from Part I, line 27a 3 Other increases not included in line 2 (itemize) ► Adjustment 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► Prior Year Cash Dividend 5 84.00			• • • • • • • • • • • • • • • • • • • •	•		1	120,230.72		
3 Other increases not included in line 2 (itemize) ► Adjustment 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ► Prior Year Cash Dividend 5 84.00	2	. Ente	er amount from Part I, line 27a	,	.]	2			
4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶ Prior Year Cash Dividend 5 84.00	_				ļ				
5 Decreases not included in line 2 (itemize) ▶ Prior Year Cash Dividend 5 84.00	4					+	213,588.82		
	5		· ·	ividend	Ì		84.00		
	6	Tota	al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), lını	e 30		213,504.82		

Part	90-PF (2017) Capital Gains and	Losses for Tax on Investm	ent Income				Page 3
,	(a) List and describe the kind	d(s) of property sold (for example, real es e, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date a		(d) Date sold (mo , day, yr)
1a	40,000 RESOLUTE ENE	ERGY C 8.5% DUE 5/1/20)	D	Vari	0115	12/21/17
		TNERS 8% DUE 04/15/19		D	12/21		11/28/17
С	10,000 GASTAR EXPLO	ORATION 8.625% Called	3/24/17	P	10/21		3/24/17
	300 Chegg Inc			P	2/05		3/20/17
е	200 NMI Holdings			P	11/24		9/12/17
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		(h) Gain	or (loss) minus (g))
а	40,600.00			35,332.50			5,267.50
b	3,566.30			(1,368.70			
С	10,215.60			3,361.50			
d	2,485.99			6,854.10 2,040.15			445.84
e	2,216.99			1,811.95			405.04
		ving gain in column (h) and owned b	v the foundation		<i>a</i>	0 (0-1	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	ss of col (i) (j), if any		(k), but not	(h) gain minus less than -0-) or om col (h))
a							
b					·		·
С							
d			· 				
е							
2	Capital gain net income or		also enter in Pa enter -0- in Pa		2		8,111.18
3	If gain, also enter in Part I	or (loss) as defined in sections , line 8, column (c) See instruc					
	Part I, line 8		•	J	3		
Part	V Qualification Under	er Section 4940(e) for Redu	ced Tax on N	let Investment	Income		
Vas t	s," the foundation doesn't qu	section 4942 tax on the distribut ualify under section 4940(e) Do	not complete t	his part.			☐ Yes ☒ No
1		unt in each column for each yea	r, see the instri		aking any	entries.	(d)
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) f noncharitable-use a	ssets	Distr (col (b) d	(d) ibution ratio ivided by col (c))
	2016	5,692	.45	81,414			0.0699
	2015	2,500	.00	73,021	.44		0.0342
	2014	3,500	.00	76,405	.05		0.0458
	2013	3,600	.00	51,306	.88		0.0702
	2012	1,700	.00	26,932	.32		0.0631
2	Total of line 1, column (d)				2		0.2832
3		for the 5-year base period—divi	de the total or	n line 2 by 5 0, oi	r by		
	the number of years the fo	undation has been in existence	ıf less than 5 ye	ears	3		.05664
4	Enter the net value of nonc	charitable-use assets for 2017 fr	om Part X, line	5 .	4	ļ	177,196.67
5	Multiply line 4 by line 3				5		10,036.42
6	Enter 1% of net investmen	t income (1% of Part I, line 27b)			6		191.43
7	Add lines 5 and 6				7		10,227.85
8	Enter qualifying distribution				8_		5,200.00
	If line 8 is equal to or great Part VI instructions.	ter than line 7, check the box in	raπ vi, line 1t	o, and complete	tnat part u	ısıng a 1	% tax rate See the

Part '	· · · · · · · · · · · · · · · · · · ·	48—see	instru	ictio	ns)				
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	The state of the content to to to the state of the state								
	here ▶ ☐ and enter 1% of Part I, line 27b				,				
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col (b).								
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2							
3	Add lines 1 and 2								
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4							
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5		382	85				
6	Credits/Payments								
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a								
b	Exempt foreign organizations—tax withheld at source . 6b			- 1					
C	Tax paid with application for extension of time to file (Form 8868) . 6c		•	1					
d	Backup withholding erroneously withheld Table and the product of	_							
7	Total credits and payments Add lines 6a through 6d .	7		0	00				
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8		000					
9 10	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed Overnayment, If line 7 is more than the total of lines 5 and 8, enter the amount overnaid.	9		382					
11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid Enter the amount of line 10 to be Credited to 2018 estimated tax Refunded	10			00				
	Enter the amount of line 10 to be Credited to 2018 estimated tax ► Refunded ► VII-A Statements Regarding Activities	11		0	00				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation	or did it	T	Yes	No				
	participate or intervene in any political campaign?		1a		X				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes?	See the							
	instructions for the definition .		16		Х				
	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								
С	DIA 6 14 6 W 4400 DOL6 W 0								
d									
	(1) On the foundation ► \$ None (2) On foundation managers ► \$	None							
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax in	nposed							
	on foundation managers ► \$ None								
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		Χ				
	If "Yes," attach a detailed description of the activities		1	}					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument,	articles of	1	!					
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		<u>X</u>				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		X				
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?		5	ļ	X				
	If "Yes," attach the statement required by General Instruction T		1	}					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			}					
	By language in the governing instrument, or	linua Abak	}	}					
	By state legislation that effectively amends the governing instrument so that no mandatory direct and the state law remain in the governing instrument?	ions mai	6	Х					
_	conflict with the state law remain in the governing instrument?								
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), are Enter the states to which the foundation reports or with which it is registered. See instructions	iu Fdil AV	7	X	 				
8a	TEXAS			{					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attornet	/ General		}					
ט	(or designate) of each state as required by General Instruction G? If "No," attach explanation.	,	8b	X					
0	Is the foundation claiming status as a private operating foundation within the meaning of section 49	42(1)(3) or	100	 	}				
9	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV	If "Yes."	1						
	complete Part XIV	50,	9	}	Х				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule lis	sting their	1						
10	names and addresses		10	Х	1				
			orm 99		(2017)				

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year did the foundation duration and and		Yes	No
	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		Х
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ▶			
14	The books are in care of ► KEITH B. OHNMEIS Located at ► P O Box 1250, 1225 Green Lane, Wilson, WY ZIP+4 ► 83014	39 86	686	
15	Located at ►P O Box 1250, 1225 Green Lane, Wilson, WY ZIP+4 ► 83014 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here			▶ 🗀
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	16	<u> </u>	_X
	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			
	(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?			
	(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)?			
	(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 .			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2017?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and	}		
	6e, Part XIII) for tax year(s) beginning before 2017?			<u> </u>
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	<u> </u>		
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			<u> </u>
	all years listed, answer "No" and attach statement—see instructions)	2b		Х
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?	}: .		}
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			1
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	1		}
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			}
	foundation had excess business holdings in 2017)	3b	ļ	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	4a		X
þ	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		x
		orm 99	0-PF	(2017)

Pari	VII-B Statements Regarding Activitie	s for V	Vhich Form	4720	May Be R	Require	d (conti	nued)			
5a	During the year, did the foundation pay or incur								T	Yes	No
	(1) Carry on propaganda, or otherwise attempt	to influe	ence legislatio	on (sect	tion 4945(e))?	Yes	🗓 No			
	(2) Influence the outcome of any specific publi	c electi	on (see sect	ion 495	i5), or to ca	arry on,					
	directly or indirectly, any voter registration d						Yes	🗓 No			
	(3) Provide a grant to an individual for travel, stu	ady, or e	other similar :	purpos	es?		Yes	🗓 No	`		
	(4) Provide a grant to an organization other tha	n a cha	ırıtable, etc ,	organız	ation desc	ribed in					
	section 4945(d)(4)(A)? See instructions	٠			•	•	Yes Yes	🗓 No			
	(5) Provide for any purpose other than religious	s, charit	able, scientif	ic, litera	ary, or educ						
b	purposes, or for the prevention of cruelty to						∐Yes	⊠ No			
D	If any answer is "Yes" to 5a(1)-(5), did any of the Regulations section 53 4945 or in a current notice	sensii e recerti	actions fail to	quality	under the	excepti	ons desci	ribed in			
	Organizations relying on a current notice regards		_			ructions	S .		5b		
С	If the answer is "Yes" to question 5a(4), does					tha tay					
J	because it maintained expenditure responsibility			EXEM	וווטוו ווטווו	me tax		Пы			
	If "Yes," attach the statement required by Regul		•	45-5(d)			Yes	∐ No			
6a	Did the foundation, during the year, receive any					muums					
	on a personal benefit contract?		uncony or m		, to pay pre		Yes	X No			
b	Did the foundation, during the year, pay premiur	ns. dire	ctly or indire	ctly on	a nersonal	henefit			6b		Х
	If "Yes" to 6b, file Form 8870	,	out in an o	o,, o	a porcona	00,,0,,,	. 001111401				
7a	At any time during the tax year, was the foundation	a party	to a prohibited	tax sh	elter transac	tion?	Yes	X No		1	
b	If "Yes," did the foundation receive any proceed								7b		
Part	VIII Information About Officers, Direct	tors, 1	rustees, F	ounda	tion Mana	agers,	Highly I	Paid Er	nploy	ees,	
	and Contractors										
11	List all officers, directors, trustees, and found										
	(a) Name and address		e, and average rs per week		mpensation ot paid,		Contribution iyee benefit		(e) Expe		
		devot	ed to position	en	ter -0-)	and defe	erred compe	ensation	other allowand		
	H B. OHNMEIS	į.	IDENT/TRE	ASURI	ER/TRUST	EE					•
	Green Lane, Wilson, WY		./MONTH		0			0			0
	OORE C. ANDERSON	TRUS'	TEE		0			0			Λ
	CARLISLE, DALLAS, TX 75204	NONE TRUS'	·····································	 	0						0
	E. EDMISTON N. AKARD ST., DALLAS, TX 75201	NONE	1 E.E.		0			0			0
1 301	N. ARARD 31., DALLAS, IX /3201	NONE			<u> </u>						<u>`</u>
								ĺ			
2	Compensation of five highest-paid employe	es (oth	er than tho	se incl	uded on li	ne 1	see instr	uctions). If n	one,	enter
-	"NONE."	`							•	-	
			(b) Title, and a				(d) Contrib	utions to			
+	(a) Name and address of each employee paid more than \$50,00	00	hours per v	veek	(c) Compe	nsation	employee	deferred	(e) Expe	nse aco allowan	count, ces
			devoted to p	OSITION			compen	sation			
			{					1			
										1	lone
								}			
						-,-,				<u>l</u>	lone
			1		}			1		_	_
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										,	don c
			 							I	lone
					ĺ					,	dono
Total	number of other employees paid over \$50,000		l		L		L	. •			<u>None</u> None
	number of other citipioyees paid over 400,000			-					orm 99		
								•			,

Part VIII Information About Officers, Directors, Trustees, Foundation Mana and Contractors (continued)	gers, Highly Paid Employees,
3 Five highest-paid independent contractors for professional services. See instruction	ns. If none, enter "NONE."
	b) Type of service (c) Compensation
	None
	None
	Nana
	None
	None
	None
Total number of others receiving over \$50,000 for professional services	. None
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical inform organizations and other beneficiaries served, conferences convened, research papers produced, etc.	ation such as the number of Expenses
1	
	None
2	
	N
3	None
	None
4	
	None
Part IX-B Summary of Program-Related Investments (see instructions)	Amount
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	rittouit
	None
2	
	None
All other program-related investments See instructions	
3	
	None
Total. Add lines 1 through 3	. • 0.00
· · · · · · · · · · · · · · · · · · ·	Form 990-PF (2017)

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign	ign for	undations,
•	see instructions)	•	·
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	} }	
а	Average monthly fair market value of securities	1a	173,942.00
b	Average of monthly cash balances	1b	5,953.10
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	179,895.10
е	Reduction claimed for blockage or other factors reported on lines 1a and		·····
	1c (attach detailed explanation) . 1e	1	
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	179,895.10
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	2,698.43
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	177,196.67
6	Minimum investment return. Enter 5% of line 5	6	8,859.83
Part		ounda	ations
	and certain foreign organizations, check here ► □ and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	8,859.83
2a	Tax on investment income for 2017 from Part VI, line 5 . 2a 382.85		
b	Income tax for 2017 (This does not include the tax from Part VI.) 2b]	
С	Add lines 2a and 2b	2c	382.85
3	Distributable amount before adjustments Subtract line 2c from line 1	3	8,476.98
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	8,476.98
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	8,476.98
Dord	VII Qualifying Distributions (assumptions)		
rait	XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	5,200.00
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	1	
	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	5,200.00
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	5,200.00
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years	g whe	ther the foundation

	Will Undistributed Income (see instruction	ns)			Page 9
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
2 a	Undistributed income, if any, as of the end of 2017 Enter amount for 2016 only	-			8,476.98
b	Total for prior years 20 ,20 ,20				
3	Excess distributions carryover, if any, to 2017				
а	From 2012 . 404.40				
þ	From 2013 1,111.03				
C	From 2014			ł	
ď	From 2015		}		
e f	Total of lines 3a through e .	1 515 42			
4	Qualifying distributions for 2017 from Part XII,	1,515.43			
	line 4 ▶ \$ 5,200.00				
а	Applied to 2016, but not more than line 2a				
b	Applied to undistributed income of prior years (Election required—see instructions)				- ,
С	Treated as distributions out of corpus (Election required—see instructions)				
d	Applied to 2017 distributable amount .				5,200.00
е	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a))	1,515.43			1,515.43
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.00			
b	Prior years' undistributed income Subtract line 4b from line 2b		0.00		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d	Subtract line 6c from line 6b Taxable amount—see instructions		0.00	٠.	
е	Undistributed income for 2016 Subtract line 4a from line 2a. Taxable amount—see				
	instructions			0.00	
f	Undistributed income for 2017 Subtract lines	ļ			
	4d and 5 from line 1. This amount must be distributed in 2018.				1,761.55
7	Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required—see instructions)				
8	Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2018. Subtract lines 7 and 8 from line 6a	0.00			
10	Analysis of line 9	0.00			
а	Excess from 2013 .	1			
b				}	
С	Excess from 2015				
d			'		
е	Excess from 2017				

Form	990-PF	(2017)

Part	XIV Private Operating Founda	tions (see instru-	ctions and Part	VII-A. question 9)))	
1a	If the foundation has received a ruling	or determination	letter that it is a	private operating	<u>′</u>	
	foundation, and the ruling is effective fo	r 2017, enter the da	te of the ruling	, .	Not Applicat	110
b	Check box to indicate whether the four	ndation is a private	operating foundat	ion described in se		(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
	each year listed				(0,20,7)	0.00
b	85% of line 2a	0.00	0.00	0.00	0.00	0.00
С	Qualifying distributions from Part XII,				0.00	
	line 4 for each year listed					0.00
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0.00
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	0.00	0.00	0.00	0.00	0.00
3	Complete 3a, b, or c for the alternative test relied upon			1	0.00	0.00
а	"Assets" alternative test—enter					
	(1) Value of all assets(2) Value of assets qualifying under					0.00
la.	section 4942(j)(3)(B)(i)					0.00
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in	}				
С	Part X, line 6 for each year listed "Support" alternative test—enter					0.00
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)					0.00
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					0.00
	(3) Largest amount of support from an exempt organization					0.00
	(4) Gross investment income					0.00
Part		n (Complete th	is nart only if th	e foundation h	ad \$5 000 or m	
416	any time during the year-			ic roundation i	αα ψο,σσσ στ τιι	0,0 111 000010 01
1	Information Regarding Foundation					
-	List any managers of the foundation v		ted more than 2%	of the total conti	ributions received	by the foundation
	before the close of any tax year (but o					•
(eit	n B. Ohnmeis					
	List any managers of the foundation ownership of a partnership or other er					rge portion of the
2	Information Regarding Contribution	. Grant. Gift Loa	n. Scholarship e	tc. Programs:		
_	Check here ► 🔯 if the foundation unsolicited requests for funds if the ficomplete items 2a, b, c, and d See in	only makes contri oundation makes (butions to presel	ected charitable		
a	The name, address, and telephone nu		ress of the persor	n to whom applica	ations should be ac	ddressed.
b	The form in which applications should	l be submitted and	I information and i	materials they sho	uld include	
С	Any submission deadlines					
d	Any restrictions or limitations on av	vards, such as by	geographical ar	eas, charitable fi	elds, kinds of ins	titutions, or other

Total

Supplementary Information (continued) Part XV 3. Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to any foundation manager Purpose of grant or status of Amount contribution Name and address (home or business) recipient or substantial contributor a Paid during the year Life Restoration Outreach Ministry 400 Graham Ave. Dallas, TX 75223 Public Not Applicable General Operating 500.00 Teton Raptor Center 5450 Wyoming 22 Wilson, WY 83014 Not Applicable Public General Operating 2,500.00 Wilson Volunteer Fire Department P O Box 31 Wilson, WY 83001 Not Applicable Public 200.00 General Operating Friends of Fish Creek P O Box 1014 Wilson, WY 83012 Not Applicable Public General Operating 2,000.00 3a Total 5,200.00 b Approved for future payment

3b

0.00

Par	t XVI	-A Analysis of Income-Producing Ad	ctivities				Page 12
Entèr gross amounts unless otherwise indicated				siness income	Excluded by section	14	
	_	ram service revenue.	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemple function income (See instructions)
	a . –						
	b						
	C _			··			
	d _						
	e f						
	•				1		
		ees and contracts from government agencies					
		bership dues and assessments est on savings and temporary cash investments			 		
		ends and interest from securities					
		ental income or (loss) from real estate					10,701.53
		ebt-financed property			+		
		ot debt-financed property					
6		ental income or (loss) from personal property			1		
		r investment income					
8	Gain	or (loss) from sales of assets other than inventory					8,111.18
		ncome or (loss) from special events					
		s profit or (loss) from sales of inventory					
11	Othe	rrevenue a Fortress Transportation					990.00
		lains All American Pipeline					390.00
	c _						
	d _						
	e Subt	otal Add columns (b), (d), and (e)	h		1		00 100 7
		I. Add line 12, columns (b), (d), and (e)		0.00	<u> </u>	13	20,192.73
		sheet in line 13 instructions to verify calculation	 ns)		•		20,132.7
Pari				ent of Exemp	pt Purposes		
Line	No.	Explain below how each activity for which accomplishment of the foundation's exempt pure	income is reporposes (other than	rted in column by providing fu	(e) of Part XVI- nds for such purpo	A contributed ises) (See instr	importantly to the uctions)
4,8,1	11	THE FOUNDATION CONTRIBUTES TO PRESELEC	TED OPERATING	SECTION 501	(C)(3) CHARITI	ES	
		USING ITS ENDOWMENT FOR INCOME AND APP	RECIATION TO	FURTHER THES	E CONTRIBUTION	IS.	
							
	-						
			<u></u>				
				·····			
		 					

Part	XVII	Informatio	n Regard	ding Tran	sfers to	and Trans	saction	ns and F	Pelationsh	ine With N	Jonchar	itable	Evo	ige 13
		Organizati	ons	•				io una r	(Old (IOII))	ips with i	Tonchar	itabit	- LAC	mpt
1	Did th	e organization o	directly or	ındirectly	engage in	any of the f	ollowin	a with an	v other oras	enization de	ecribed		Yes	No
	in se	ction 501(c) (o	ther than	section	501(c)(3)	organizatio	ns) or	ın secti	on 527, re	elating to	political			
	organ	ızatıons?					·		•					ı
а	Transi	fers from the rep	porting for	indation to	a noncha	arıtable exer	npt ora	anızatıon	of·				l	
	(1) Ca						, ,					1a(1)	-	Х
	(2) Ot	her assets										1a(2)		X
b		transactions												
		les of assets to								,		1b(1)		X
		irchases of asse				pt organizat	ion .				į	1b(2)		X
		ental of facilities,			er assets						j	1b(3)		X
		eimbursement ai		nts .				•			(1b(4)		X
		ans or loan gua				•		•		•	[1b(5)		Χ
	(6) Pe	erformance of se	ervices or i	membersh	np or fund	raising solic	atations	3			.	1b(6)		_X
C	Sharin	ng of facilities, e	quipment,	mailing lis	sts, other a	assets, or pa	aid emp	oloyees			. {	1c		X
d	If the	answer to any	of the abo	ve is "Yes	s," comple	ete the follo	wing so	chedule.	Column (b)	should alw	ays show	the 1	air m	arket
	value	of the goods, of	ther asset	s, or servi	ces given	by the repo	rting fo	undation	. If the foun	dation rece	ived less	than	fair m	arket
		in any transaction												
(a) Line	no (t) Amount involved	(c) Na	ame of nonch	naritable exer	npt organizatio	n	(d) Descr	iption of transf	ers, transactio	ns, and shar	ing arra	ngeme	nts
														
			 											
			 											
														
														
														
														
														
	-+-													
														
2a	ls the	foundation dire	ectly or in	directly aff	filiated wit	h, or relate	d to, or	ne or mo	re tax-exem	npt organiza	ations			
		ibed in section 5	•							. •	. [Yes	X	No
b	If "Yes	s," complete the	e following	schedule										
		(a) Name of organ	ization			b) Type of orga	anization			(c) Description	n of relation	ship		
		penalties of perjury, I	declare that I	have examine	ed this return,	including accom	panying s	chedules and	statements, an	d to the best of	my knowledg	ge and I	oelief, it	ıs true,
Sign	correc	and complete Deck	aration of prep	parer (other thi	an (axpayer) is		k .	or writch breb	arer has any kho	owieage	May the IR			
Here		N410>	<u>- W</u>			4/26/18	PRI	SIDENT	1		with the pre			
	Signa	ature of officer or trus		79		Date	Title						دي . 55	
Paid		Print/Type preparer	's name		Preparer	signature	10	-/	Date		k X III	TIN		
Prepa	arer	MARY E EDMJ			/ /pec		flu	slow	4/20/1		employed F	014	7032	8
Use (MARY E			ORNEY				Firm's EIN I				
		Firm's address ▶	<u>1901 N.</u>	AKARD	ST. / D	ALLAS, T	X 75	201-23	05	Phone no 2				
					,						Fo	rm 99	v-PF	(2017)

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

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

OMB No 1545-0047

2017

Employer identification number

KEITH B OHNMEIS FOUNDATION 75-1582503 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 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 contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13. 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its

Form 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)

Name of organization

KEITH B OHNMEIS FOUNDATION

Employer identification number 75–1582503

Part I	Contributors (see instructions) Use duplicate co	pies of Part I if additional space is	needed
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	KEITH B OHNMEIS P O BOX 1250 WILSON, WY 83014	\$ 79,415.00	Person Payroll Moncash (Complete Part If for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(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

KEITH B OHNMEIS FOUNDATION

Employer identification number 75–1582503

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

Noncash Property (see instructions). Use duplicate copi	les of Part II if additional spac	e is needed
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
20,000 Resolute Energy C 8.5% due 5/1/20 CUSIP 76116AABA		
	\$ 20,340.00	12/20/17
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
20,000 Resolute Energy C 8.5% due 5/1/20 CUSIP 76116AABA		
	\$ 20,340.00	12/20/17
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
10,000 Resolute Energy C 8.5% due 5/1/20		
	\$ 10,170.00	12/20/17
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1,000 Resolute Energy Corp Symbol: REN		
	\$ 28,565.00	12/21/17
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	\$ \$	
(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	(b) Description of noncash property given 10,000 Resolute Energy C 8.5% due 5/1/20 (b) Description of noncash property given 1,000 Resolute Energy Corp Symbol: REN (b) Description of noncash property given	(b) Description of noncash property given (c) FMV (or estimate) (see instructions.) (b) Description of noncash property given (c) FMV (or estimate) (see instructions.) (c) FMV (or estimate) (see instructions) (d) FMV (or estimate) (see instructions) (e) FMV (or estimate) (see instructions) (c) FMV (or estimate) (see instructions) (d) Description of noncash property given (e) FMV (or estimate) (see instructions.) (c) FMV (or estimate) (see instructions.) (d) Description of noncash property given (e) FMV (or estimate) (see instructions.) (c) FMV (or estimate) (see instructions.) (d) Description of noncash property given (e) FMV (or estimate) (see instructions.) (e) FMV (or estimate) (see instructions.) (f) FMV (or estimate) (see instructions.)

KEITH B. OHNMEIS FOUNDATION P.O. BOX 1250 WILSON, WY 83014

TAX I.D. 75-1582503 TAX YEAR 2017

CAPITAL GAINS AND LOSSES	DATE	DATE	SALES		GAIN	
PART IV, SUPPLEMENT	ACQUIRED	SOLD	PROCEEDS	COST	(LOSS)	LONG(LT)
10,000 Gastar Explorationn 8 625% Called	10/21/2015	3/24/2017	10,215 60	6,854 10	3,361.50	3,361 50
300 Chegg Inc	2/5/2015	3/20/2017	2,485.99	2,040.15	445.84	445.84
7,000 EV Energy Partners 8% Due 4/5/19	3/2/2016	11/28/2017	3,566 30	4,935 00	(1,36870)	(1,36870)
200 NMI Holdings	11/24/2014	9/12/2017	2,216 99	1,811 95	405 04	405 04
10,000 Resolute Energy C 8.5% due 5/1/20	11/16/2015	12/21/2017	10,150 00	10,170.00	(20.00)	(20.00)
10,000 Resolute Energy C 8 5% due 5/1/20	10/23/2015	12/21/2017	10,150.00	4,822.50	5,327 50	5,327 50
20,000 Resolute Energy C 8 5% due 5/1/20	10/21/2015	12/21/2017	20,300 00	20,340 00	(40 00)	(40 00)
			59,084.88	50,973 70	8,111 18	8,111 18

KEITH B. OHNMEIS FOUNDATION P.O. BOX 1250 WILSON, WY 83014

PART X, LINES 1a and 1b

TAX I.D. 75-1582503 TAX YEAR 2017

CHARLES SCHWAB #4174-9655

AVERAGE FAIR MARKET VALUE OF SECI	- 3	IRITIES		AVERAGE OF MONTHLY CASH BALANCES	CASH BALANCES	
JANUARY	102,329	142,975	122651 91	82	194	138
FEBRUARY	142,975	144,340	143,658	194	467	331
MARCH	144,340	126,257	135,299	467	13,715	7,091
APRIL	126,257	138,669	132,463	13,715	728	7,221
MAY	138,669	134,351	136,510	728	2,091	1,410
JUNE	134,351	123,957	129,154	2,091	3,051	2,571
JULY	123,957	128,106	126,032	3,051	3,132	3,091
AUGUST	128,106	121,235	124,671	3,132	3,658	3,395
SEPTEMBER	121,235	122,905	122,070	3,658	5,902	4,780
OCTOBER	122,905	124,348	123,626	5,902	6,957	6,430
NOVEMBER	124,348	136,329	130,338	6,957	469	3,713
DECEMBER	136,329	1,185,326	660,827	469	31,464	15,966
TOTAL			2,087,300	TOTAL	1 1	56,137
KEITH B. OHNMEIS FOUNDATION P.O. BOX 1250 WILSON, WY 83014	UNDATION	TAX I TAX `	FAX I.D. 75-1582503 FAX YEAR 2017			

BANK OF JACKSON HOLE CHECKING ACCOUNT DDAxx3285

PART X, LINES 1a and 1b

AVERAGE OF MONT	AVERAGE OF MONTHLY CASH BALANCES			
JANUARY	3,148 79	1,648 79	2,398 79	
FEBRUARY	1,648 79	1,648.79	1,648 79	
MARCH	1,648 79	1,648 79	1,648 79	
APRIL	1,648 79	1,648 79	1,648.79	
MAY	1,648 79	1,591 24	1,620.02	
JUNE	1,591 24	598.34	1,094 79	
JULY	598 34	398 34	498 34	
AUGUST	398 34	398 34	398 34	
SEPTEMBER	398 34	398.34	398 34	
OCTOBER	398.34	398 34	398 34	
NOVEMBER	398 34	398 34	398 34	
DECEMBER	398 34	5,898 34	3,148 34	
TOTAL			15,300 01	

TOTAL AVERAGE BALANCE SECURITIES 173,942

TOTAL AVERAGE BALANCE CASH

5,953.10