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

		dar year 2017 or tax year beginning	, 2017, and	
Na	me of for	undation		A Employer identification number
LLC	MINIS	TRIES INC		82-0702118
Nu	mber and	d street (or P.O. box number if mail is not delivered to street address)	Room/suite	B Telephone number (see instructions)
151	94 STA	TE HIGHWAY 20		
Cit	y or towr	n, state or province, country, and ZIP or foreign postal code		C If exemption application is pending, check here ▶
SKI	ATOOK	C OK 74070		
			of a former public chari	ty D 1. Foreign organizations, check here . >
		☐ Final return ☐ Amended r	•	
		Address change Name char	nge '	2. Foreign organizations meeting the 85% test, check here and attach computation
H	Check	type of organization: Section 501(c)(3) exempt p	rivate foundation	E If private foundation status was terminated under
		n 4947(a)(1) nonexempt charitable trust Other tax		section 507(b)(1)(A), check here
		arket value of all assets at J Accounting method		
		year (from Part II, col. (c), Other (specify)		under section 507(b)(1)(B), check here
	line 16		on cash basis.)	
	art l	Analysis of Revenue and Expenses (The total of	(a) Payonyo and	(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per ' '	Net investment (c) Adjusted net for charitable income purposes
		the amounts in column (a) (see instructions).)	books	(cash basis only)
_	1	Contributions, gifts, grants, etc., received (attach schedule)	26539	The state of the state of
_	2	Check ► ☐ if the foundation is not required to attach Sch. B		(1) 10 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)
1	3	Interest on savings and temporary cash investments		
•	4	Dividends and interest from securities	 	THE STATE OF THE S
>	5a	Gross rents	 	1.70
	b	Net rental income or (loss)	- 2,11	一
d)	6a	Net gain or (loss) from sale of assets not on line 10	RE	CEIXED
Ž	b	Gross sales price for all assets on line 6a	344	
Revenue	7	Capital gain net income (from Part IV, line 2)	18 XM/	
æ	8	Net short-term capital gain	1 - Kar B	₩ X X X X X X X X X X X X X X X X X X X
-	9	Income modifications	10 - 31 - 10 - 10 - 10 - 10 - 10 - 10 -	
	10a	Gross sales less returns and allowances		· 京都市的市场。1995年1995年1995年1995年1995年1995年1995年1995
	b	Less: Cost of goods sold	2.	
	c	Gross profit or (loss) (attach schedule)		True my year
	11	Other income (attach schedule)		5. 含 数数数 数数
	12	Total. Add lines 1 through 11	26539	- The things to
	13	Compensation of officers, directors, trustees, etc.		
es	14	Other employee salaries and wages		DECEIVED
SUS	15	Pension plans, employee benefits		REGEREN
Expenses	16a	Legal fees (attach schedule)	700	1 200 101
	b	Accounting fees (attach schedule)		B JUL 20 2018
ĕ.	C	Other professional fees (attach schedule)		
ati	17	Interest		OGDEN, UT
str	18	Taxes (attach schedule) (see instructions)		
Operating and Administrativ	19	Depreciation (attach schedule) and depletion		1 12 12 1
ᄩ	20	Occupancy	4152	
ĕ	21	Travel, conferences, and meetings	3683	
5	22	Printing and publications		
e G	23	Other expenses (attach schedule)	1268	
Ĕ	24	Total operating and administrative expenses.		
ē	1	Add lines 13 through 23	9803	
be	25	Contributions, gifts, grants paid	4558	MINING THE THE PROPERTY
0	26	Total expenses and disbursements. Add lines 24 and 25	14361	
	27	Subtract line 26 from line 12:	THE PARTY AND	· · · · · · · · · · · · · · · · · · ·
	a		12178	
	b	Net investment income (if negative, enter -0-) .	* 1 . C. C	The state of the s
	1	Adjusted net Income (if negative, enter -0-)	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	1 7 1 1 1 1 1
For		work Reduction Act Notice, see instructions.	Cat. No. 112	202 DE

Should be for end-on-year amounts only (see instructions) (a) Book Value (b) Book Value (c) Fair Market Value	D.	rt II	Ralance Shoets	Attached schedules and amounts in the description column	Beginning of year	<u> </u>	End d	of year	
3 Accounts receivable ► Less allowance for doubtful accounts ► 4 Pledges receivable ► Less allowance for doubtful accounts ► 5 Grants receivable ► Less: allowance for doubtful accounts ► 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) 7 Other notes and loans receivable (attach schedule) ► Less: allowance for doubtful accounts ► 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a investments—origonate stock (attach schedule) ► b Investments—corporate stock (attach schedule) c Investments—corporate bonds (attach schedule) b Investments—corporate bonds (attach schedule) c Investments—origonate stock (attach schedule) 11 Investments—origonate stock (attach schedule) 12 Investments—origonate stock (attach schedule) 13 Investments—origonate stock (attach schedule) 14 Land, buildings, and equipment: basis ► Less: accumulated depreciation (attach schedule) 15 Other assets (describe ► 15 Other assets (describe ► 16 Other assets (describe ► 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable (attach schedule) 22 Other habilities (describe ► 23 Total labilities (describe ► 24 Investricted 25 Temporanty restricted 26 Permanently restricted 27 Temporanty restricted 27 Foundations that dollow SFAS 117, check here ► 27 and complete lines 27 through 31.	-		Palarice Sirects	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Val	16	(c) Fair Market	Value
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	필	31	Total liabilities a	nd net assets/fund balances (see					1
instructions)	<u>.</u> [instructions) .						;
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	1								
end-of-year figure reported on prior year's return)							1	Ì	
2 Enter amount from Part I, line 27a	2	Ente	r amount from Part I, I	ine 27a			2		
3 Other increases not included in line 2 (itemize) ▶	_						_		
4 Add lines 1, 2, and 3	. 4	Add	lines 1, 2, and 3						
							-		
5 Decreases not included in line 2 (itemize) ► 5 6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 6	[′] 6	Total	net assets or fund ba	lances at end of year (line 4 minus line 5)-F	art II, column (b), lii	ne 30	_		

Part	Capital Gains and	d Losses for Tax on Investn	nent Income			
,		nd(s) of property sold (for example, real e se, or common stock, 200 shs. MLC Co.		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo., day, yr)	(d) Date sold (mo , day, yr)
1a	٠,		·		<u> </u>	
b						
C						
d						
е	1					
-,-	(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale		n or (loss) f) minus (g))
<u>. a</u>						
b					 	
_						
е						
	Complete only for assets sho	wing gain in column (h) and owned	by the foundation	on 12/31/69	(0 Cayos (Col	(h) agin minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	ss of col (i) i (j), if any	col (k), but not	i. (h) gain minus t less than -0-) or rom col. (h))
a	a					
b						
C						
d						
е						
2 7	Capital gain net income or	rinar canital ineel ("	also enter in Pa enter -0- in Pa		2	
3	Net short-term capital gair	n or (loss) as defined in sections	1222(5) and (6)):		
	If gain, also enter in Part	I, line 8, column (c). See instru	ctions. If (loss)), enter -0- in }	3	
Part		er Section 4940(e) for Redu		let investment	- 1	
(For o		vate foundations subject to the				
Ú.					,	
If sect	ion 4940(d)(2) applies, leave	this part blank.				
Was th	ne foundation liable for the	section 4942 tax on the distribut	table amount of	f anv vear in the b	ase period?	☐ Yes ☐ No
If "Yes	s," the foundation doesn't q	ualify under section 4940(e). Do	not complete t	his part.	poi//ou	
. 1.	Enter the appropriate amo	unt in each column for each yea	r, see the instri	uctions before ma	aking any entries.	
,	(a)	(b)		(c)		(d)
Cale	Base period years ndar year (or tax year beginning in)	Adjusted qualifying distributions	Net value o	f noncharitable-use as		ribution ratio divided by col (c))
	2016					
	2015					
	2014					
	2013					
	2012					
2 `	Total of line 1, column (d)				. 2	
3-		for the 5-year base period—div			by	
ı	the number of years the fo	undation has been in existence	if less than 5 ye	ears	. 3	
ς.						
4	Enter the net value of nonc	charitable-use assets for 2017 fr	om Part X, line	5	. 4	
5	Multiply line 4 by line 3 .				. 5	
- 6	Enter 1% of net investmen	t income (1% of Part I, line 27b)			. 6	
7	Add lines 5 and 6				. 7	·
· 8	Enter qualifying distribution	ns from Part XII, line 4			. 8	
• '- (₁		ter than line 7, check the box in				% tax rate. See the

	•						
ım ş	990-PF (2017)						Page 4
ar	Excise Tax Based on Investment Income (Section 4940(a), 49	940(b), 4940(e), o	r 494	18-s	ee inst	ructi	ons)
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and en	ter "N/A" on line 1.	1				T
	Date of ruling or determination letter (attach copy of letter if necessary)	-) []				
b		check	- } }	1			-
_	here ► ☐ and enter 1% of Part I, line 27b		ا ،	}			1
. C	Part I, line 12, col (b).	zations, enter 4% t	" /				-
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations	anhii athara antar	, 1	2			}
2 3	Add lines 1 and 2	s only, others, enter	·0-)	3			+
, 1	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations	e only others enter	۲۰۰۰ ا	4			+
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less			5			+
6	Credits/Payments:	, 011101 0	•	<u> </u>			1
а		1	- 1				
b				- 1			
,c			$\neg \neg$	1			
d	· · · · · · · · · · · · · · · · · · ·	<u> </u>					
7	Total credits and payments. Add lines 6a through 6d			7			
3	Enter any penalty for underpayment of estimated tax. Check here [] if Form	2220 is attached	- [8			\mathbb{I}^{-}
)	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		▶ [9			
)	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount	int overpaid .	▶ [10			
_	Enter the amount of line 10 to be: Credited to 2018 estimated tax	Refunded	>	11			<u> </u>
	VII-A Statements Regarding Activities						
la		_		or did	ļ 	Ye	+
h				٠.،	_ <u> 1</u> a	Ч	1
b	Did it spend more than \$100 during the year (either directly or indirectly) instructions for the definition	for political purpo	ses?	See ti	ſ	}	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activi	tion and comics of			16	' 	+
7	published or distributed by the foundation in connection with the activities	ties and copies of	arry r	nateria	115	}	}
_	Did the foundation file Form 1120-POL for this year?				10	_	-
d		ed during the year:	•	•	···	`	+-
_	(1) On the foundation. ▶ \$ (2) On foundation managers				1	-	}
e			ax ım	posec	-		1.
•	on foundation managers. ▶ \$.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		1	1
2	Has the foundation engaged in any activities that have not previously been re	ported to the IRS?			2	-	V
	If "Yes," attach a detailed description of the activities.					1	1
}	Has the foundation made any changes, not previously reported to the IRS, in its			rticles	of		
,	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conform	, ,	ges		3		~
a	Did the foundation have unrelated business gross income of \$1,000 or more of	during the year? .			4a		V
þ	If "Yes," has it filed a tax return on Form 990-T for this year?				4b		
	Was there a liquidation, termination, dissolution, or substantial contraction du	ring the year? .			5		1
	If "Yes," attach the statement required by General Instruction T				}	-	
}	Are the requirements of section 508(e) (relating to sections 4941 through 4945	5) satisfied either:					1
ı	By language in the governing instrument, or By state labeleties that affectively amond the governor materials to				_		{
	• By state legislation that effectively amends the governing instrument so the conflict with the state law remain in the governing instrument?	at no mandatory d	irection	ons th	1		.
		and the British Co.			6	1	
a	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," c			rart X	V <u>7</u>	1	┼
d	Enter the states to which the foundation reports or with which it is registered. OKLAHOMA	See instructions.	•				1
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form	QQQ_PE to the Atte	rnov	Gazor			{
J	(or designate) of each state as required by General Instruction G? If "No," atta		nney	Gener	1	-}-	-,-
,	Is the foundation claiming status as a private operating foundation within the	· · · · · · · · · · · · · · · · · · ·		26)(2) ·	8b	+	1.
	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the in	nstructions for Part	XIV. I	f "Yes	"	-	- - <u> </u> -

complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses .

10

Par	t VII-A Statement	s Regarding Activities (continued)					
						Yes	No
11		e year, did the foundation, directly or indirectly, own a controlled ent 2(b)(13)? If "Yes," attach schedule. See instructions	ity within	n the	11		~
12		ke a distribution to a donor advised fund over which the foundation or rivileges? If "Yes," attach statement. See instructions	a disqua	alified	12		,
13	Did the foundation comp	bly with the public inspection requirements for its annual returns and exemption	n applica	ition?	13	~	
	Website address ►	***************************************					
14	The books are in care of		o ▶				
	Located at ► 15194 ST	THWY 20 SKIATOOK OK ZIP-	4 🕨		7407	0	
15		exempt charitable trusts filing Form 990-PF in lieu of Form 1041—check of tax-exempt interest received or accrued during the year				•	▶ □
16	At any time during cale	endar year 2017, did the foundation have an interest in or a signature or c	ther auth	nority		Yes	No
	over a bank, securities,	or other financial account in a foreign country?		[16		V
,	See the instructions for the foreign country ▶	r exceptions and filing requirements for FinCEN Form 114. If "Yes," ent	er the na	ame of		-	
Pari	t VII-B Statement	s Regarding Activities for Which Form 4720 May Be Required					L
ı Qı		item is checked in the "Yes" column, unless an exception applies.		- 1		Yes	No
4	•	, , , , , , , , , , , , , , , , , , , ,		}		103	140
1a		e foundation (either directly or indirectly):	7.4				
			_ Yes {	₽ No			
		n, lend money to, or otherwise extend credit to (or accept it from) a	r				
	disqualified person?		_	☑ No			į '
3.1		, , , , , , , , , , , , , , , , , , , ,	_ :	✓ No) ;
. ,			Yes [☑ No │	j		
ı		e or assets to a disqualified person (or make any of either available for f a disqualified person)?	Yes [₽ No			
		y or property to a government official? (Exception. Check "No" if the		_ `	}		
		to make a grant to or to employ the official for a period after		Í	1		. 1
-			Yes	₽ No			i
b	If any answer is "Yes" to	1a(1)-(6), did any of the acts fail to qualify under the exceptions described	n Regula	itions	- (
٠-	section 53.4941(d)-3 or i	in a current notice regarding disaster assistance? See instructions		[1b		
		n a current notice regarding disaster assistance, check here		►□	ł		1
C	Did the foundation eng	age in a prior year in any of the acts described in 1a, other than excep-	ied acts,	, that 📗			' لـ ـ ا
		ore the first day of the tax year beginning in 2017?		.	1c	}	~
2		tribute income (section 4942) (does not apply for years the foundation verticed in section 4942(j)(3) or 4942(j)(5)):	vas a pr	rvate			;
'nа	At the end of tax year 2	2017, did the foundation have any undistributed income (lines 6d and		i	1	İ	,
		and the second of the second o	Yes [No	İ	1	}
	If "Yes," list the years ▶	20 17 , 20 , 20 , 20]	1	
. b	Are there any years list	ed in 2a for which the foundation is not applying the provisions of secti	on 4942	(a)(2)	Į	[
1 1		luation of assets) to the year's undistributed income? (If applying section			t	· (1
		"No" and attach statement—see instructions.)		.	2b	~	A
С	-	ion 4942(a)(2) are being applied to any of the years listed in 2a, list the ye	are here	·			
	► 20 , 20 , 20		ais neie.	<i>'</i>	}		l
За		I more than a 2% direct or indirect interest in any business enterprise		1	ł	ł	i
	at any time during the y	- a	Yes [☑ No	ļ	i	}
b	If "Yes." did it have exc	cess business holdings in 2017 as a result of (1) any purchase by the	oundatio	on or)	ĺ	
~		er May 26, 1969; (2) the lapse of the 5-year period (or longer period app			1	1	•
		ection 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3)			Ì	Ì	}
	the 10-, 15- or 20-ve	ear first phase holding period? (Use Schedule C, Form 4720, to dete	rmine i	f the			1
		business holdings in 2017.)		-	34	-]	1
4~		,			3b	∤	
4a h		t during the year any amount in a manner that would jeopardize its charitab			4a		
b		e any investment in a prior year (but after December 31, 1969) that could ad not been removed from jeopardy before the first day of the tax year begir		'			لـــا
	oriantable purpose trial fi	mo not been removed norn jeopardy before the first day of the tax year begin	anny iti Z	01/1	4b	1	~

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Par	VII-B Statements Regarding Activities	s for V	Which Form	4720	May Be F	lequir	ed (contil	nued)			
5a	During the year, did the foundation pay or incur	any am	nount to:						\	Yes	No
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? . Yes No										
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on,										
	directly or indirectly, any voter registration drive?										
	(3) Provide a grant to an individual for travel, study, or other similar purposes?									1 1	
	(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions										
	(5) Provide for any purpose other than religious purposes, or for the prevention of cruelty to		•		•	cationa		☑ No			
b	If any answer is "Yes" to 5a(1)–(5), did any of the Regulations section 53.4945 or in a current notice							ibed in	5b	-	
	Organizations relying on a current notice regards	ing disa	aster assistar	ice, che	eck here						
С	If the answer is "Yes" to question 5a(4), does to because it maintained expenditure responsibility				ption from			☐ No			!
;	If "Yes," attach the statement required by Regula	ations :	section 53.49	45-5(d	l).					[]	
6a	Did the foundation, during the year, receive any	funds,	directly or in	directly	, to pay pr	emiums	3			} }	,
	on a personal benefit contract?	•					Yes Yes	✓ No			}
b	Did the foundation, during the year, pay premiur	ns, dire	ectly or indire	ctly, on	a persona	l benefi	t contract	γ.	6b		~
	If "Yes" to 6b, file Form 8870										
	At any time during the tax year, was the foundation						Yes	✓ No		l	
	If "Yes," did the foundation receive any proceed								7b		
Part	VIII Information About Officers, Direct	tors,	Trustees, F	ounda	tion Man	agers,	Highly F	aid E	mploy	ees,	
	and Contractors										
1	List all officers, directors, trustees, and found	lation	managers ar	nd their	r compens	ation.	See instru	ctions			
,	(a) Name and address	hou	e, and average irs per week ted to position	(If	mpensation not paid, nter -0-)	empl	Contributions byee benefit erred compe	plans	(e) Expe	nse acc allowan	
JOHN	BLAKNEY	10				l					
15194	SHWY 20 SKIATOOK OK 74070	1.]	0	}		0			0
MAND	Y BLAKNEY	10]							
15194	SHWY 20 SKIATOOK OK 74070	<u> </u>			0			0			0
SAMA	NTHA COMBS	10									
15194	SHWY 20 SKIATOOK OK 74070	}			0			٥			0
		}									
		<u> </u>						1			
2	Compensation of five highest-paid employee "NONE."	es (oth	er than thos	se incl	uded on li	ne 1-	see instru	uctions	s). If n	one, e	enter
	a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to pe	veek	(c) Comper	sation	(d) Contribution of the complex of the compens of t	eferred		nse aco allowan	
NONE					[
			<u> </u>		1			{			
,			1								
			<u> </u>		<u> </u>	_	L	}			
					,						
2					!	_					
]								
			!		}						
			1		1			{			
Total r	number of other employees paid over \$50,000	•		•	·		· · · ·	. ▶			

Par	VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid En and Contractors (continued)	nployees,
3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NON	E."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON		
		
		{
		
		
Tota	number of others receiving over \$50,000 for professional services	<u> </u>
Par	t IX-A Summary of Direct Charitable Activities	
 ,		
	t the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of janizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	MINISTRY	
		3683
		1
2		
	***************************************	}
. , .		
3		
4		
	/	
	IX-B Summary of Program-Related Investments (see instructions)	
	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
. 1		}
		}
2		
	······································	
•	,	
·All	other program-related investments. See instructions	
3		
Total	. Add lines 1 through 3	
, otal		Form 990-PF (2017)

			٠.	
-orm	990-	PF'	`(201	7

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Part	Minimum Investment Return (All domestic foundations must complete this part. Foreit see instructions.)	gn foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	
	Average monthly fair market value of securities	10
	Average of monthly cash balances	1a 1b
C	Fair market value of all other assets (see instructions)	1c
d	Total (add lines 1a, b, and c)	1d
e	Reduction claimed for blockage or other factors reported on lines 1a and	
_	1c (attach detailed explanation)	
2	Acquisition indebtedness applicable to line 1 assets	2
3	Subtract line 2 from line 1d	3
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	
	instructions)	4
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5
6	Minimum investment return. Enter 5% of line 5	6
Part .	and certain foreign organizations, check here ► and do not complete this part.)	oundations
1	Minimum investment return from Part X, line 6	1 0
2a	Tax on investment income for 2017 from Part VI, line 5	
ь	· · · · · · · · · · · · · · · · · · ·	
C	Add lines 2a and 2b	2c 0
3	Distributable amount before adjustments. Subtract line 2c from line 1	3 0
4	Recoveries of amounts treated as qualifying distributions	4 0
5	Add lines 3 and 4	5 0
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 0
Part	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
b	Program-related investments—total from Part IX-B	1b
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	
_	purposes	2
3	Amounts set aside for specific charitable projects that satisfy the:	
a	Suitability test (prior IRS approval required)	3a
b	Cash distribution test (attach the required schedule)	3b
4 5	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	4
J	Enter 1% of Part I, line 27b. See instructions	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	5
U		
	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 whether the foundation

Part	XIII Undistributed Income (see instructi	ons)			
1	Distributable amount for 2017 from Part XI, line 7	(a) Corpus	(b) ,Years prior to 2016	(c) 2016	(d) 2017
•	Undistributed income, if any, as of the end of 2017				
2	·				
a	Enter amount for 2016 only		.,		
þ	Total for prior years. 20,20,20				
3	Excess distributions carryover, if any, to 2017:				
a	From 2012				
ь	From 2013		•		
С	From 2014				•
d	From 2015				
е	From 2016				
f	Total of lines 3a through e				41
4	Qualifying distributions for 2017 from Part XII, line 4: ► \$		i		
а	Applied to 2016, but not more than line 2a.				
	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 .			· · · · · · · · · · · · · · · · · · ·	- · · · · · · · · · · · · · · · · · · ·
e	Remaining amount distributed out of corpus				
5	<u> </u>				
•	(If an amount appears in column (d), the same				
*	amount must be shown in column (a))		, i		٠, ا
6	Enter the net total of each column as		-	-	
	indicated below:	A TORRE TO 1 A TORRE TO 1 A TORRE TO 1 A TORRE TO 1			· •
a	Corpus Add lines 3f, 4c, and 4e. Subtract line 5				i
b	Prior years' undistributed income. Subtract line 4b from line 2b			,	
C	Enter the amount of prior years' undistributed			'	i i
	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				. I
е	Undistributed income for 2016. Subtract line				,
	4a from line 2a Taxable amount-see		*		,
	instructions	,			,
f	Undistributed income for 2017. Subtract lines		ı	,	
	4d and 5 from line 1 This amount must be				
	distributed in 2018			•	
7	Amounts treated as distributions out of corpus				1
	to satisfy requirements imposed by section				
٠,	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)				Ì
9	Excess distributions carryover to 2018.	·····		··· , ,	
•	Subtract lines 7 and 8 from line 6a				1
10	Analysis of line 9:				
а	Excess from 2013				}
a b	Excess from 2014				
C	Excess from 2015				
d	Excess from 2016 Excess from 2017				
е	LAUG35 HUHI ZUTT				i

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Part)	
1a	If the foundation has received a ruling			private operating		
	foundation, and the ruling is effective for			▶ {		
b	Check box to indicate whether the four		operating founda		ction	or 4942(j)(5
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	/	(e) Total
	investment return from Part X for each year listed	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
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 .					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon:				1	
а	"Assets" alternative test – enter:	•	`	K i		
	(1) Value of all assets					
ь	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
	of minimum investment return shown in Part X, line 6 for each year listed.					
- с	"Support" alternative test—enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
•	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
1	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					
Part	XV Supplementary Informatio	n (Complete th	is part only if the	he foundation ha	ad \$5,000 or mor	e in assets at
	any time during the year-	see instruction	ıs.)			
1	Information Regarding Foundation I	Managers:				
а	List any managers of the foundation v					y the foundation
	before the close of any tax year (but o	nly if they have co	ontributed more th	an \$5,000). (See se	ection 507(d)(2).)	
NONE						
b	List any managers of the foundation ownership of a partnership or other en			•		e portion of the
NONE						
2	Information Regarding Contribution Check here ▶ ☐ If the foundation of unsolicited requests for funds. If the focomplete items 2a, b, c, and d. See insolicited requests for funds.	only makes controundation makes	ibutions to prese	lected charitable o		
а	The name, address, and telephone nur	mber or email add	dress of the person	n to whom applicat	ions should be add	ressed [.]
b	The form in which applications should	be submitted and	d information and	materials they shou	ıld include:	
С	Any submission deadlines.					
d	Any restrictions or limitations on aw factors.	ards, such as by	geographical ar	eas, charitable fie	lds, kinds of institu	utions, or other
	<u>-</u>					

Pari	Supplementary Information (cont	tinuea)	and Kam Fred	han Darmant	
3	Grants and Contributions Paid During	If recipient is an individual	ea tor Ful	ture Payment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or	Amount
	Name and address (home or business)	or substantial contributor	recipient	contribution	
	Paid during the year				_
NONE			į		
					ľ
					1
	•				İ
	•				1
				1	
-				1]
					1
					{
	•				
	•				
					}
					ļ
•					
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b	Approved for future payment	T			1
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	Total			> 2	

Fute	r gross amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by secti	on 512, 513, or 514	(0)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	Program service revenue:	<u> </u>		 		
	b			 		
	c	 				
	d	 		 		
	e			+		
	f	<u> </u>		 		
	g Fees and contracts from government agencies			 		 -
2	Membership dues and assessments	<u> </u>		 		
3	Interest on savings and temporary cash investments			 		
4	Dividends and interest from securities					
5	Net rental income or (loss) from real estate:			 		1
·	a Debt-financed property	<u> </u>		1		
	b Not debt-financed property			 		
6	Net rental income or (loss) from personal property			 		<u> </u>
7	Other investment income			 		
8	Gain or (loss) from sales of assets other than inventory			 		
9	Net income or (loss) from special events			 		
10	Gross profit or (loss) from sales of inventory					
	Other revenue: a	r		 		
	b			 		
,	c			t		· · · · · · · · · · · · · · · · · · ·
	d			1		T
	e			†		
12	Subtotal. Add columns (b), (d), and (e)			 		
				· · · · · ·	13	
(See	worksheet in line 13 instructions to verify calculation	s.)				
	worksheet in line 13 instructions to verify calculation † XVI-B Relationship of Activities to the A	s.)				
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Part	AVII	Organizati	n Regarding Tra ons	nsters to and 1r	ansaction	ns and F	relationsni	ps w	/ITN N	ionen	aritabi	e Exe	∍mpt
1		he organization (directly or indirectly									Yes	No
	in s	ection 501(c) (c	other than section										
		nizations?											
а			porting foundation	to a noncharitable e	exempt org	anızatıon	of:				4-(4)	 	
		other assets								•	1a(1) 1a(2)		V
ь		r transactions						• •	• •		10(2)		<u> </u>
_			a noncharitable ex	empt organization							1b(1)		1
			ets from a nonchari								1b(2)		~
			, equipment, or oth								1b(3)		~
,	(4) F	leimbursement a	rrangements .								1b(4)		1
		oans or loan gua									1b(5)		~
			ervices or members								1b(6)		~
C		-	quipment, mailing I								16		<u> </u>
d			of the above is "Ye ther assets, or serv										
			on or sharing arrang										
(a) Line		(b) Amount involved		charitable exempt organi			ription of transfe						
*		-											
	}												
			 										
		,											
							 						
			'	 									
<u>·</u>													
22	ls the	foundation dire	ectly or indirectly at	ffiliated with or rel	ated to or	or mo	re tay-evem	nt or	720172	tions			
	desci	ribed in section 5	601(c) (other than se	ection 501(c)(3)) or i	n section 5	627? .					☐ Yes	П	Nο
b			following schedule										
		(a) Name of organi	zation	(b) Type of	organization			(c) Des	cription	of relati	onship		
				 									
	Unde	r penalties of person !	declare that I have examin	ed this return, including on	*****************************	shedules and	statements and	to the	hest of	ny knovit	adna and t	nahef #	is this
Sign	corre		aranon of preparer (other th						De21 01 1				
-lere		Vandan	Yakne.	, H-17-	18 DIRI	ECTOR			l		IRS discu preparer s		
1616		atule of officer of trus	stee	Date	Title	LOTOR			[uctions (
Paid	·	Print/Type preparer		Preparer's signature			Date		Charle		PTIN		
repa	arer									i [if nployed			
Jse (Firm's name ▶						Firm's	EIN ►				
		Firm's address ▶						Phone	no				

Schedule B

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

Department of the Treasury Internal Revenue Service

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

Name of	the organization			Employe	r identification number				
LLC MINISTRIES INC					82-0702118				
Organization type (check one):									
Filers o	f:	Section:							
Form 99	90 or 990-EZ	☐ 501(c)((enter number) organization						
		☐ 4947(a)(1) none	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
		☐ 527 political org	ganization						
Form 99	90-PF		ot private foundation		RECEIVED				
		☐ 4947(a)(1) none	xempt charitable trust treated as a private founda	tion					
		501(c)(3) taxable private foundation		1	S JUL 2 0 2018				
				I	OGDEN, UT				
	nly a section 501(c)(7	•	eral Rule or a Special Rule. ation can check boxes for both the General Rule a	and a Spe	cial Rule. See				
Genera	l Rule								
V		r property) from any	EZ, or 990-PF that received, during the year, control one contributor. Complete Parts I and II. See instr						
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								
990-EZ	, or 990-PF), but it mu	ist answer "No" on F	e General Rule and/or the Special Rules doesn't fi Part IV, line 2, of its Form 990; or check the box or 't meet the filing requirements of Schedule B (For	n line H of	fits Form 990-EZ or on its				

Schedule B	(Fòrm 990.	990-EZ.	or 990-PF	(2017

Page 2

Name of c	organization	E	mployer identification number
LLC MINS	TRIES INC		82-0702118
Part I	Contributors (see instructions). Use duplicate copies	of Part I if additional space is	s needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JOHN AND MANDY BLAKNEY 15194 STATE HIGHWAY 20 SKIATOOK OK 74070	. 0024	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	JOHN AND JACKIE JORDAN 2415 COUNTY ROAD 1405 SKIATOOK OK 74070	0040	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
(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