Form **990-PF** 

## **Return of Private Foundation**

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

OMB No. 1545-0052

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made publick \$04 ► Go to www.irs.gov/Form990PF for instructions and the latest information. 2017
Open to Public Inspection

For	calen	dar year 2017 or tax year beginning 02/23	, 201	7, and e	ending	04/30	<b>, 20</b> 18	
Nar	ne of fou	undation	••		A Employe	r identification number	er	
BRO	OWN-F	ORMAN FOUNDATION				82-4595018		
Nu	mber and	street (or P.O. box number if mail is not delivered to street address)	Room	/suite	B Telephon	e number (see instructi	ons)	
850	DIXIE	HIGHWAY				(502) 774-5918	3	
City	y or town	, state or province, country, and ZIP or foreign postal code			C If exempt	tion application is pend	ing, check here▶	
LO	LOUISVILLE, KY 40210							
G	Check	all that apply:  Initial return  Initial return	of a former public	charity	D 1. Foreign	n organizations, check	here ▶	
	-	☐ Final return ☐ Amended i	•	-	•	•	_	
		Address change  Name char	nge			n organizations meeting here and attach compu		
H	Check	type of organization:  Section 501(c)(3) exempt p	rivate foundation	ΛU	E If private	foundation status was	terminated under 🗀	
		n 4947(a)(1) nonexempt charitable trust		section 5	07(b)(1)(A), check here	▶∟		
		arket value of all assets at J Accounting method			F If the four	adation in in a CO mark	h 4ala4la	
	end of	year (from Part II, col. (c),				ndation is in a 60-mont ction 507(b)(1)(B), chect		
	line 16		on cash basis.)				_	
Pa	art I	Analysis of Revenue and Expenses (The total of					(d) Disbursements	
		amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		Investment come	(c) Adjusted net Income	for charitable purposes	
		the amounts in column (a) (see instructions).)	books	"	COMO	III.Comb	(cash basis only)	
	1	Contributions, gifts, grants, etc., received (attach schedule)	70,000,000					
	2	Check ► ☐ if the foundation is not required to attach Sch. B		1				
	3	Interest on savings and temporary cash investments	11,882		11,882		I	
	4	Dividends and interest from securities			•			
	5a	Gross rents						
	b	Net rental income or (loss)			T I	RECEI	=D	
0	6a	Net gain or (loss) from sale of assets not on line 10	0	<u> </u>			<u> </u>	
Revenue	b	Gross sales price for all assets on line 6a	-			0	78	
Ş	7	Capital gain net income (from Part IV, line 2)		<del></del>	d	MAR 1 9	2019   <del>                                   </del>	
æ	8	Net short-term capital gain			- 1		8	
_	9	Income modifications	<u>.                                    </u>	<del> </del>		OCDEN		
	10a	Gross sales less returns and allowances 0	<u> </u>		L	OGDEN		
	ь	Less: Cost of goods sold 0		<del></del>				
	c	Gross profit or (loss) (attach schedule)	0	<u> </u>				
	11	Other income (attach schedule)	0	<u> </u>	0	0		
	12	Total. Add lines 1 through 11	70,011,882		11,882	0		
_	13	Compensation of officers, directors, trustees, etc.	.,.		• • • • • • • • • • • • • • • • • • • •			
Expenses	14	Other employee salaries and wages						
SE.	15	Pension plans, employee benefits				-		
8	16a	Legal fees (attach schedule)	0		0	0	0	
	Ь	Accounting fees (attach schedule)	0		0	0	0	
Š	c	Other professional fees (attach schedule)	0		0	0	0	
Operating and Administrative	17	Interest		<del> </del>				
탏	18	Taxes (attach schedule) (see instructions)	0		0	0	0	
Ē	19	Depreciation (attach schedule) and depletion	0		0			
臣	20	Occupancy			<u>-</u>			
Ž	21	Travel, conferences, and meetings						
2	22	Printing and publications		<del> </del>	<del> </del>			
₽ G	23	Other expenses (attach schedule)	0		0	0	0	
<u>ج</u>	24	Total operating and administrative expenses.						
ā		Add lines 13 through 23	0		0	0	0	
8	25	Contributions, gifts, grants paid			-			
0	26	Total expenses and disbursements. Add lines 24 and 25	0		0	0	0	
	27	Subtract line 26 from line 12:		-				
	а	Excess of revenue over expenses and disbursements	70,011,882	İ				
	ь	Net investment income (if negative, enter -0-) .	1 1,311,032	<del> </del>	11,882			
		Adjusted net income (if negative, enter -0-)		<u> </u>		0		
				L				

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 11289X



-	880-77	Attenhad enhadulae and amounts in the decodintion column	Beginning of year	Fnc	l of year		
Pa	rt II	Balance Sheets should be for end-of-year amounts only. (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
$\neg$	1	Cash—non-interest-bearing	0	70,000,00	70,000,000		
	2	Savings and temporary cash investments					
ĺ	3	Accounte receivable					
	•	Less: allowance for doubtful accounts		· · · · · · · · · · · · · · · · · · ·	0 0		
	4	Dladges resciveble					
	-	Less: allowance for doubtful accounts			0 0		
	5	Grants receivable					
ĺ	6	Receivables due from officers, directors, trustees, and other					
1	•	disqualified persons (attach schedule) (see instructions)	o		0		
	7	Other notes and loans receivable (attach schedule) ▶0			7		
	•	Less: allowance for doubtful accounts ▶ 0	0		0 0		
တ္က	8	Inventories for sale or use	-				
Assets	9	Prepaid expenses and deferred charges		·			
8	10a	Investments—U.S. and state government obligations (attach schedule)	0		0 0		
		Investments—corporate stock (attach schedule)	0		0 0		
	þ	Investments—corporate bonds (attach schedule)	0		0 0		
	C		•		<del>-</del>		
	11	Investments—land, buildings, and equipment: basis ▶ 0  Less: accumulated depreciation (attach schedule) ▶ 0	0		0 0		
	12	investments—mortgage loans		·	<del>"</del>		
	13	Investments—other (attach schedule)	0		0 0		
	14				1		
	14	Land, buildings, and equipment: basis ►	<u>-</u>		0 0		
	45	Other assets (describe ► (SEE STATEMENT)	0	11.8	<u> </u>		
	15 16	Total assets (to be completed by all filers—see the		11,01	11,002		
		instructions. Also, see page 1, item l)	اه	70,011,88	70,011,882		
-	17	Accounts payable and accrued expenses	, i	70,011,01	70,011,002		
	18	Grants payable					
Liabilities	19	Deferred revenue					
Œ	20	Loans from officers, directors, trustees, and other disqualified persons	Ö		<u></u>		
	21	Mortgages and other notes payable (attach schedule)	0		<u>                                     </u>		
	22	Other liabilities (describe ► )	0	=			
	23	Total liabilities (add lines 17 through 22)	0		i l		
		Foundations that follow SFAS 117, check here ▶		<del></del>	Ť		
Balances		and complete lines 24 through 26, and lines 30 and 31.					
5	24	Unrestricted		70,011,8	32		
盲	25	Temporarily restricted					
_	26	Permanently restricted					
ğ	_~	Foundations that do not follow SFAS 117, check here ▶ □			┥ !		
Net Assets or Fund		and complete lines 27 through 31.					
ō	27	Capital stock, trust principal, or current funds					
ţ	28	Paid-in or capital surplus, or land, bldg., and equipment fund	i		7		
Š	29	Retained earnings, accumulated income, endowment, or other funds		•			
\$	30	Total net assets or fund balances (see instructions)	0	70,011,8	32		
<u>e</u>	31	Total liabilities and net assets/fund balances (see		- ·	7 1		
Z		instructions)	o	70,011,8	32		
Part III Analysis of Changes in Net Assets or Fund Balances							
1		t agree with					
		-of-year figure reported on prior year's return)	-				
2		er amount from Part I, line 27a			<del></del>		
3	Othe	er increases not included in line 2 (itemize) ▶		3			
4	Add	l lines 1, 2, and 3		4			
5	Dec	reases not included in line 2 (itemize) ▶		5			
6	Tota	reases not included in line 2 (itemize)  all net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), lii	ne 30 6			
					Form <b>990-PF</b> (2017)		

T CHILL S.						- 1 age (
Part	V Capital Gains and	Losses for Tax on Investm	ent Income	1 0 11 -		
•		f(s) of property sold (for example, real est e; or common stock, 200 shs. MLC Co.)	tate,	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a						
b						
С		-				
d						
е						
	(e) Gross sales price	(f) Depreclation allowed (or allowable)		other basis anse of sale		in or (loss) (f) minus (g))
а						
b						
C						
d						
е						
	Complete only for assets show	ving gain in column (h) and owned b	y the foundation	on 12/31/69.		l. (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		is of col. (i) . (j), if any		ot less than -0-) or from col. (h))
a						
b						
C						
d						
e			· · · · · · · · · · · · · · · · · · ·			
2	Capital gain net income or		also enter in Pa enter -0- in Pa		2	C
3		or (loss) as defined in sections , line 8, column (c). See instruc				
	Part I, line 8			5	3	(
Part	V Qualification Unde	er Section 4940(e) for Redu	ced Tax on N	let Investment	Income	
Was 1		this part blank. section 4942 tax on the distribut ualify under section 4940(e). Do			base period?	☐ Yes 🗸 No
1	Enter the appropriate amou	unt in each column for each yea	r; see the instr	uctions before m	aking any entries.	-
Cal	(e) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) if noncharitable-use a		(d) stribution 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—divi undation has been in existence				
4	Enter the net value of nego	haritable-use assets for 2017 fr	om Part Y line	5	. 4	•
-						
5	5 Multiply line 4 by line 3				. 5	
6	Enter 1% of net investmen	t income (1% of Part I, line 27b)			. 6	<u></u>
7	Add lines 5 and 6				. 7	<del></del>
8		ns from Part XII, line 4				10/ Any make One 11
	Part VI instructions.	ter than line 7, check the box in	ran vi, line 1t	o, and complete	ınat part using a	1 70 tax rate. See th

Part	Excise Tax Based on Investment Income (Section 4940(a	(a), 4	194	40(b), 49	40(e),	or 49	48 – s	ee instr	uctio	ns)	-
1a`	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ ar Date of ruling or determination letter: (attach copy of letter if ne	and e	ente	er "N/A" o	on line 1	· 1			<del></del>		]
b	Domestic foundations that meet the section 4940(e) requirements in Par					}	1		238		_
	here ► □ and enter 1% of Part I, line 27b					.					1
С	All other domestic foundations enter 2% of line 27b. Exempt foreign or Part I, line 12, col. (b).	orgar	niza	ations, er	iter 4%	of J			<del></del>		J
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable founds	datio	ns	only; othe	rs, enter	-0-)	2			<u> </u>	_
3	Add lines 1 and 2	•	•				3		238	<u> </u>	_
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable found			•		· -0-)	4			<u> </u>	_
5	Tax based on investment income. Subtract line 4 from line 3. If zero or	or les	SS,	enter -0-	• •		5		238		7
6	Credits/Payments:	6	. 1		0	ı					
a b	2017 estimated tax payments and 2016 overpayment credited to 2017 Exempt foreign organizations—tax withheld at source	61				-	i i				
C	Tax paid with application for extension of time to file (Form 8868)	60	~		4,100						1
ď	Backup withholding erroneously withheld	60	_		-1,.00						i
7	Total credits and payments. Add lines 6a through 6d						7		4,100		_
8	Enter any penalty for underpayment of estimated tax. Check here  if						8		•		_
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount or					. ▶	9		0		_
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the a			nt overpa	aid .	. ▶	10		3,862		_
_11_	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶	3,86	32	Re	funded	<b>&gt;</b>	11		0		_
Part	VII-A Statements Regarding Activities										_
1a	During the tax year, did the foundation attempt to influence any nation				_				Yes	No	_
	participate or intervene in any political campaign?									<b>/</b>	_
b	Did it spend more than \$100 during the year (either directly or indire instructions for the definition							1b		1	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the published or distributed by the foundation in connection with the activities			ies and o	opies o	f any	materia	als			
C						1c		1	_		
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation. ▶ \$  (2) On foundation managers. ▶ \$										
е	Enter the reimbursement (if any) paid by the foundation during the year foundation managers. ▶ \$	r for <sub>l</sub>	pol	litical exp	enditure	tax ir	nposed	t			
2	Has the foundation engaged in any activities that have not previously be	been	rep	ported to	the IRS	?.		2		1	-
3	If "Yes," attach a detailed description of the activities.  Has the foundation made any changes, not previously reported to the IRS.	RS, in	its	governin	a instrur	nent. :	articles	of			]
-	incorporation, or bylaws, or other similar instruments? If "Yes," attach a con								<u> </u>	1	_
4a	Did the foundation have unrelated business gross income of \$1,000 or n	mor	e d	furing the	year?			4a		1	_
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	tion	du	ring the y	ear?			5		1	_
	If "Yes," attach the statement required by General Instruction T.										
6	Are the requirements of section 508(e) (relating to sections 4941 through	gh 49	945	i) satisfie	d either:			1		1	
	By language in the governing instrument, or		44-	-4		د داند	<b>Al</b> .				
	• By state legislation that effectively amends the governing instrument conflict with the state law remain in the governing instrument?			at no ma	-			<u> </u>	<del></del>	ļ	J
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Y								1	<del> </del>	_
8a	Enter the states to which the foundation reports or with which it is regist						u Part A	W   7	+-		7
<b>.</b>	IL.  If the answer is "Yes" to line 7, has the foundation furnished a copy of	f Ea-		000 DE 4	o the At	tome:	Gene				1
b	(or designate) of each state as required by General Instruction G? If "No,								-	ļ	Ţ
^	Is the foundation claiming status as a private operating foundation within			-					+*		<b>7</b> _
9	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See								-		コワ
	complete Part XIV							"   g		1	
10	Did any persons become substantial contributors during the tax year? If					ule lis	ting th		+	Ť	-
-	names and addresses						_	10	1		
	<u> </u>								M.DI		_

Part	VII-A Statements Regarding Activities (continued)			
n en c	VII A Subtilions (regulating Administration)	1	Yes	No
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		<i>,,,</i>
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		
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	1	
44	Website address ► N/A			
14	***************************************	2) 774		
	Located at ► 850 DIXIE HIGHWAY, LOUISVILLE, KY ZIP+4 ►	4021	U	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here and enter the amount of tax-exempt interest received or accrued during the year		.	▶⊔
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?	16		1
	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			
	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?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? $\Box$ Yes $\Box$ 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 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.)			
þ	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2017?	1c		<b>✓</b>
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	ľ		
	6e, Part XIII) for tax year(s) beginning before 2017?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
þ	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	▶ 20 <sub></sub> , 20 <sub></sub> , 20 <sub></sub>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
þ	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.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<b>\</b>
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its			
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		1

Part	VII-B Statements Regarding Activities	for W	hich Form	4720 l	May Be R	equire	d (contii	nued)			
5a`	During the year, did the foundation pay or incur a	ny am	ount to:			-				Yes	No
	(1) Carry on propaganda, or otherwise attempt to	influe	nce legislatio	n (secti	ion 4945(e)	)? .	☐ Yes	✓ No			
	(2) Influence the outcome of any specific public	election	on (see secti	on 495	5); or to ca	arry on,					- 1
	directly or indirectly, any voter registration dri	ve?					☐ Yes	✓ No	İ	1	
	(3) Provide a grant to an individual for travel, stud	dy, or c	other similar p	ourpose	s?		☐ Yes	✓ No			
	(4) Provide a grant to an organization other than										
	section 4945(d)(4)(A)? See instructions						☐ Yes	✓ No			!
	(5) Provide for any purpose other than religious,				ry, or educ	ational					1
	purposes, or for the prevention of cruelty to c							✓ No			- 1
b	If any answer is "Yes" to 5a(1)-(5), did any of the							ibed in			
	Regulations section 53.4945 or in a current notice in	_	-			ructions	3		5b		
	Organizations relying on a current notice regarding							▶⊔			
C	If the answer is "Yes" to question 5a(4), does the									i	
	because it maintained expenditure responsibility		_				∐ Yes	∐ No			ŀ
•	If "Yes," attach the statement required by Regula					:					
ьа	Did the foundation, during the year, receive any ton a personal benefit contract?	runas,	directly or inc	airecuy,	to pay pre	emiums	_	<b>2</b> 84.			
											ـــِــا
Ь		is, dire	cuy or indired	suy, on	a personai	benem	Contract	·f ·	6b		<del></del> -
70	If "Yes" to 6b, file Form 8870.  At any time during the tax year, was the foundation a	nartu	to a probibited	l tav cha	alter transac	rtion?	☐ Yes	√ No			
							_	_	7b		
	b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? . 7b Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees,										
	and Contractors	,				- <b>3</b> ,				,	
1	List all officers, directors, trustees, and found	ation r	nanagers an	d their	compens	ation. S	ee instr	uctions			
		(b) Title	e, and average	(c) Cor	npensation	(d) (	Contribution	s to	(e) Expe	nse ac	count.
	(a) Name and address		rs per week ed to position		ot paid, ter -0-)		yee benefit erred compe	pians	other allowances		
JAY K	OVAL	PRESI	DENT, 10.0		0			0			0
850 D	XIE HIGHWAY, LOUISVILLE, KY 40210				U						
MIKE	KEYES		RESIDENT,	0				0			0
850 D	XIE HIGHWAY, LOUISVILLE, KY 40210	10.0									
JILL H		SECRE	ETARY, 10.0		0	ŀ		o			0
	XIE HIGHWAY, LOUISVILLE, KY 40210										
	PATTERSON	TREAS	SURER, 10.0		0	٥		o			0
	IXIE HIGHWAY, LOUISVILLE, KY 40210	- /-44	an Aban Aba	a incl	alad an li				) H ==		
2	Compensation of five highest-paid employee "NONE."	es (oun	er man mo:	se incii	uaea on II	ne 1—:	see instr	ucuons	ij. IT N	one,	enter
	(a) Name and address of each employee paid more than \$50,00	0	(b) Title, and a hours per v devoted to p	veek	(c) Comper	nsation	(d) Contrib employee plans and compen	benefit deferred	(e) Expe other	nse aca aliowan	
NONE											
			-								
Total	number of other employees paid over \$50,000 .									0	
								F	om <b>99</b>	0-PF	(2017)

3		"
	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE  (a) Name and address of each person paid more than \$50,000  (b) Type of service	(c) Compensation
ION		(-,
_		
ota	number of others receiving over \$50,000 for professional services	
Par	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 anizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
2		
_		
3		
4		
2ar	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		

			1 11
Part	·	gn toun	dations,
	see instructions.)	<u> </u>	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
<b>a</b>	Average monthly fair market value of securities	1a	2 222 222
þ	Average of monthly cash balances	1b	6,363,636
C	Fair market value of all other assets (see instructions)	1c	2 222 222
đ	Total (add lines 1a, b, and c)	1d	6,363,636
е	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	6,363,636
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see	_	
	instructions)	4	95,455
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	6,268,181
6	Minimum Investment return. Enter 5% of line 5	6	56,671
Part .	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f	oundation	ons
	and certain foreign organizations, check here ▶ □ and do not complete this part.)	<del></del>	
1	Minimum investment return from Part X, line 6	1	56,671
<b>2</b> a	Tax on investment income for 2017 from Part VI, line 5	1 1	
b	Income tax for 2017. (This does not include the tax from Part VI.)	<u> </u>	
C	Add lines 2a and 2b	2c	238
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	56,433
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	56,433
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	56,433
Part	XII Qualifying Distributions (see instructions)		
	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1	
1	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	0
a	Program-related investments—total from Part IX-B	1b	0
ь 2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	15	
~	purposes	2	
•	Amounts set aside for specific charitable projects that satisfy the:		
3	Suitability test (prior IRS approval required)	3a	
a	Cash distribution test (attach the required schedule)	3b	0
ь 4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	0
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	<del>                                     </del>	
J	Enter 1% of Part I, line 27b. See instructions	5	
e	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0
6			
	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 wnoth	er ute touridation

Part	VIII Undistributed Income (see instruction	ons)			·
•		(a)	(b)	(c)	(d)
1	Distributable amount for 2017 from Part XI,	Corpus	Years prior to 2016	2016	2017
	line 7				56,433
2	Undistributed income, if any, as of the end of 2017:				
а	Enter amount for 2016 only			<del></del> -	
ь	Total for prior years: 20 13 ,20 14 ,20 15				····
3	Excess distributions carryover, if any, to 2017:				
a	From 2012				İ
b	From 2013			1	
_	From 2014				
C	<del></del>				
d	From 2015				
e		0			
f	Total of lines 3a through e				
4	line 4: > \$ 0	1			
a	Applied to 2016, but not more than line 2a .			<u></u>	<u> </u>
b	Applied to undistributed income of prior years (Election required—see instructions)		•		•
	•		0		
C	Treated as distributions out of corpus (Election	۔ ا		1	
	required—see instructions)	0	1		
đ	Applied to 2017 distributable amount				
e	Remaining amount distributed out of corpus	0			
5	Excess distributions carryover applied to 2017				0
	(If an amount appears in column (d), the same				
	amount must be shown in column (a).)	ı I			
6	Enter the net total of each column as	 			
	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0	!		
b	Prior years' undistributed income. Subtract	9			
	line 4b from line 2b		0	i I	
C	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				İ
	tax has been previously assessed				
d	Subtract line 6c from line 6b. Taxable				
	amount—see instructions		0		
e	Undistributed income for 2016. Subtract line				
	4a from line 2a. Taxable amount-see				
	instructions			0	
f	Undistributed income for 2017. Subtract lines				
	4d and 5 from line 1. This amount must be				
	distributed in 2018				56,433
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)	0			<u> </u>
8	Excess distributions carryover from 2012 not				
	applied on line 5 or line 7 (see instructions) .	0			
9	Excess distributions carryover to 2018.				
	Subtract lines 7 and 8 from line 6a	0	t .		
10	Analysis of line 9:				
a	Excess from 2013				
b	Excess from 2014	[			
c	Excess from 2015	<b>j</b>			
d	Excess from 2016	[			
e	Excess from 2017				
Ų		l			

Form 99	0-PF (2017)					,Page 10
Part					)	
1a'	If the foundation has received a ruling					
	foundation, and the ruling is effective fo		-			2 07 1 4040(1/5)
_	Check box to indicate whether the four	Tax year	operating tourida	Prior 3 years	ection	3) or <u>4942(j)(5)</u>
za	Enter the lesser of the adjusted net income from Part I or the minimum	<u> </u>	6N 2016	· · · · · · · · · · · · · · · · · · ·	(d) 2014/	(e) Total
	investment return from Part X for	(a) 2017	<b>(b)</b> 2016	(c) 2015	(0) 20147	<del></del>
	each year listed					<del></del>
_	85% of line 2a			<u></u>		<del></del>
Ç	Qualifying distributions from Part XII, line 4 for each year listed			,	/	
	·				/	<del></del>
a	Amounts included in line 2c not used directly for active conduct of exempt activities					
_	•			/		<del></del>
е	Qualifying distributions made directly				1	
	for active conduct of exempt activities.  Subtract line 2d from line 2c					
•	***************************************					<del></del>
3	Complete 3a, b, or c for the					
	alternative test relied upon:					
а	"Assets" alternative test—enter:		/	1		
	(1) Value of all assets		/	<del>                                     </del>	<del> </del>	
	(2) Value of assets qualifying under section 4942(j)(3)(B)(j)					
b	"Endowment" alternative test—enter 2/3		/		-	
~	of minimum investment return shown in					
_	Part X, line 6 for each year listed		<del>  /</del>			
¢	"Support" alternative test—enter:		/			
	(1) Total support other than gross investment income (interest,		/			
	dividends, rents, payments on	/	4			
	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)			<u> </u>	· · · · · · · · · · · · · · · · · · ·	
	(3) Largest amount of support from an exempt organization					
	, •	<i></i>				
Part	(4) Gross investment income XV Supplementary Information	n (Complete #	ic part only if t	he foundation b	ad \$5 000 or mo	ve in accete at
ган	any time during the year-			ne roundauon n	iau 40,000 oi iiic	ne ili assets at
			19.1			
1 a	Information Regarding Foundation List any managers of the foundation		ted more than 20	% of the total cont	ributions received l	by the foundation
a	before the close of any tax year (but of					by the loundation
	before the close of any tax year (but t	only in they have of		40,000/. (000 0	0011011001(0)(2).)	
	List any managers of the foundation	who own 10% o	r more of the sto	ck of a comporatio	n (or an equally lar	rge portion of the
U	ownership of a partnership or other e			•		ge portion of the
	ownership of a paranership or ourse o	inity) or inition alo	10011001101111000	. o /o o. g.ou.o	J. 05	
2	Information Regarding Contribution	Grant Gift Los	n Scholarshin e	ate Programs		
~	Check here ▶ ☐ if the foundation				organizations and	does not accept
	unsolicited requests for funds. If the f					
	complete items 2a, b, c, and d. See in		gino, giamo, oto.,	10 111011100010 01 0	agamzanono andor	outer containency
a	The name, address, and telephone no		dress of the nerso	n to whom applica	ations should be ad	ldressed:
	ORN, 850 DIXIE HIGHWAY, LOUISVILLE,				ations should be ad	iaressea.
h	The form in which applications should	t he submitted and	d information and	materials they sho	aniq include:	
	OUNDATION DOES HAVE A FORMAL ON					ORT.
	Any submission deadlines:	<u> </u>	•			
	ISSION DEADLINES FOR MAY 1, 2018 TH	ROUGH APRIL 30	2019 ARE MAY 1 A	NUG. 1. NOV. 1. FFR	. 1	
	Any restrictions or limitations on av					itutions, or other
-	factors:		, 334			
(SEE :	STATEMENT)					

3 .		ile real of white	ou ivi Ful	wie Fayment	
	Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	Name and address (home or business)	or substantial contributor	recipient	Consideration	
а	Paid during the year				
			1		
					}
				-	
	•				
			:	,	
			ŀ		
	Total			<b>&gt; 3a</b>	
b	Approved for future payment			`	
	•				
	Total			▶ 3b	1

Pa	rt X	VI-A Analysis of Income-Producing Ac	tivities				·
Ente	r gro	ss amounts unless otherwise indicated.		isiness 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
1	Pro	gram service revenue:	Business code	Amount	Exclusion code	Amount	(See instructions.)
	а						
	b		_				
	C d				-		
	u e						
	f					·	·
	Ω	Fees and contracts from government agencies					
2	_	mbership dues and assessments			-	· <del>-</del>	
3		rest on savings and temporary cash investments		:	14	11,882	
4		idends and interest from securities					_
5	Net	rental income or (loss) from real estate:					
		Debt-financed property			_		
		Not debt-financed property			ļ. <u>.</u> .		
6		rental income or (loss) from personal property					
7		ner investment income					
8		n or (loss) from sales of assets other than inventory			<del>                                     </del>		
9		income or (loss) from special events	-		<del>                                     </del>		
10		per revenue: a					
••	b	let revenue. a					
	C			=			
	_		1				
	е						•
12	Şul	ototal. Add columns (b), (d), and (e)		0		11,882	0
						13	11,882
•		ksheet in line 13 instructions to verify calculation					
		VI-B Relationship of Activities to the A		<u>.</u>	<u>-</u>		
Lin	e No	<ul> <li>Explain below how each activity for which accomplishment of the foundation's exempt pur</li> </ul>	income is repo	orted in column	(e) of Part XVI	-A contributed in	nportantly to the
	▼	accomplishment of the foundation's exempt pur	poses (other tha			uses). (See institut	atoris.)
		<u> </u>		<del> </del>			
		`					<del> </del>
				•			
				<u> </u>			
		1 11111111			· · · · · · · · · · · · · · · · · · ·		
	-						
					-		
						•	
		<del></del>				Fo	m <b>990-PF</b> (2017)

Part )	KVII	Organization		sters to and Transac	tions and H	eiationsnip	e vaitu i	voncnai	itable	EXe	mpt
1 1	Dial Al			engage in any of the follo	nuina with on	t other ergen	ization de	acribad		Yes	No
				501(c)(3) organizations					1 1	103	110
		nizations?	thoi than section	out (c)(o) organizations	, 01 111 0000	O. C. C. C. C.	aning to	political	[		
	_		norting foundation to	a noncharitable exemp	t organization	of:					1
			-		_	<b>01.</b>			1a(1)		<del></del> -1
		ther assets .	• • • • • •		• • • •			• •	1a(2)	-	<del>-</del>
	• •	transactions:				• • • • •		• •	1.9(5)	_	<u> </u>
			a noncharitable eve	mpt organization					1b(1)		<del>_</del>
				ible exempt organization		• • • • •		• •	1b(2)		<u></u>
				rassets		• • • • •		• •	1b(3)		~
	• •	•						• •	1b(4)	┰	<u> </u>
	• •	oans or loan gua	•					• •	1b(5)		~
				ip or fundraising solicite				• •	1b(6)		<u></u>
				sts, other assets, or paid				• •	1c		<del>-</del>
				s," complete the followi						oir m	
				ces given by the reporti							
				omont, show in column							
(a) Line		b) Amount involved		aritable exempt organization	<del>` `</del>	ription of transfer					
						•	<del></del>				
	_				1	<del></del>					
	_				<u> </u>	<del></del> -			<del>-</del>		
		•			1	· · · · · ·					
	一十										
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	一				1.						
			· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·					
2a	Is the	foundation dire	ectly or indirectly aff	fillated with, or related	to, one or mo	re tax-exem	ot organiz	ations			
				ction 501(c)(3)) or in sec					] Yes	।	No
b	If "Ye	s," complete the	e following schedule					_			-
		(a) Name of organ	lization	(b) Type of organiz	ration		(c) Descripti	on of relation	nship		
						•					
						-					
						· · · · · · · · · · · · · · · · · · ·					
			······································	· · · · · · · · · · · · · · · · · · ·	•				•		
				d this return, including accompa				f my knowle	dge and l	ellef, it	ls true,
Sign	COTTO	ct, and complete. Deci	laration of preparer (other the	an texpayor) is based on all inform	nation of which prep	parer has any know	Medge.	May the	RS discu	ss this	return
Here	<b>)</b> (	Sau tto	سلا	13/8/20A	SECRETARY			with the p	a reparer s	hown b	elow?
		aure of officer or tru	stee	Date	Title			See Instru	ciions,		סאך
Do:4		Print/Type preparer	r's name	Preparer's signature		Date	Cha	ck   if	PTIN		
Paid		RACHEL SPURL	оск	Raile Am	Nock	3/15/2		employed	P00	52072	29
Preparer Use Only		· · · · · · · · · · · · · · · · · · ·	CROWE LLP	<del></del>			Firm's EIN		35-092		
use (	אוחכ	Firm's address		O ROAD SUITE 400, LC	UISVILLE. KY	40241-1122	Phone no.		02) 326-		
								F	orm 99	0-PF	(2017)
											•

## Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

**BROWN-FORMAN FOUNDATION** 

## **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 82-4595018

Organiz	zation type (check o	ne):
Filers o	f:	Section:
Form 99	90 or 990-EZ	☐ 501(c)( ) (enter number) organization
		4947(a)(1) nonexempt charitable trust not treated as a private foundation
		☐ 527 political organization
Form 99	90-PF	√ 501(c)(3) exempt private foundation
		☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
		☐ 501(c)(3) taxable private foundation
	only a section 501(c)(	s covered by the <b>General Rule</b> or a <b>Special Rule</b> .  7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See
Genera	l Rule	
		ofiling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributions.
Special	i Rules	
	regulations under s	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% support test of the sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line d that received from any one contributor, during the year, total contributions of the greater of (1) 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.	
	contributor, during contributions totale during the year for General Rule appli	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one the year, contributions exclusively for religious, charitable, etc., purposes, but no such and more than \$1,000. If this box is checked, enter here the total contributions that were received an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the lies to this organization because it received nonexclusively religious, charitable, etc., contributions more during the year
	•	at isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Cat. No. 30613X

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	
BROWN-FORMAN FOLINDATION	

Employer identification number 82-4595018

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				
	BROWN-FORMAN CORPORATION  850 DIXIE HIGHWAY  LOUISVILLE, KY 40210	\$ 70,000,000 	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				
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution				
		<b>\$</b>	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				

Name of organization
BROWN-FORMAN FOUNDATION

Employer Identification number 82-4595018

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.					
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		<b>\$</b>				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See Instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		\$				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		s				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See Instructions.)	(d) Date received			
		<b>s</b>				
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		  \$				

Schedule B (Form 990, 990-EZ, or 990-PF) (2017) Name of organization Employer identification number **BROWN-FORMAN FOUNDATION** 82-4595018 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (c) Use of gift (d) Description of how gift is held from Part I (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

Sun	plemer	ital Inf	forma	lion

Supplemental Information. additional information (see instructions).

Return Reference - Identifier	Explanation
LINE 2D - RESTRICTIONS	THE FOUNDATION WILL PROVIDE DISTRIBUTIONS AND MAY PROVIDE SUPPORT TO OTHER ORGANIZATIONS FOR CHARITABLE, LITERARY, SCIENTIFIC, AND EDUCATIONAL PURPOSES THAT WILL ENRICH THE EXPERIENCE OF LIFE IN COMMUNITIES IN WHICH BROWN-FORMAN CORPORATION OPERATES AND ITS EMPLOYEES ARE LOCATED.

Part II<sub>6</sub> Line 15 (Column a, Column b & column c)

Other Assets (continued)

Description	Book Value BOY	Book Value EOY	Fair Market Value
ACCRUED INTEREST	0	11,882	11,882
TOTAL	0	11,882	11,882

Part VJI, Section A, Line 10	Substantial Contributor (continued)	
•		
Name	Address	
BROWN-FORMAN CORPORATION	850 DIXIE HIGHWAY, LOUISVILLE, KY 40210	