

For calendar year 2017, or tax year beginning 07-01-2017, and ending 06-30-2018

Name of foundation NIBS AND EDNA ALLEN FOUNDATION		A Employer identification number 81-0480143	
Number and street (or P O box number if mail is not delivered to street address) PO BOX 1435		Room/suite	
City or town, state or province, country, and ZIP or foreign postal code MILES CITY, MT 59301		B Telephone number (see instructions) (703) 864-1257	
G Check all that apply <div><input type="checkbox"/> Initial return</div> <div><input type="checkbox"/> Initial return of a former public charity</div> <div><input type="checkbox"/> Final return</div> <div><input type="checkbox"/> Amended return</div> <div><input type="checkbox"/> Address change</div> <div><input type="checkbox"/> Name change</div>		D 1. Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check here and attach computation	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) \$ 2,657,118	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis )	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here	

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) )		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check <input checked="" type="checkbox"/> if the foundation is <b>not</b> required to attach Sch B . . . . .				
	3 Interest on savings and temporary cash investments . . . . .	1,212	1,212		
	4 Dividends and interest from securities . . . . .	49,844	49,844		
	5a Gross rents . . . . .				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	97,371			
	b Gross sales price for all assets on line 6a 373,668				
	7 Capital gain net income (from Part IV, line 2) . . . . .		97,371		
	8 Net short-term capital gain . . . . .				
	9 Income modifications . . . . .				
	10a Gross sales less returns and allowances _____				
Operating and Administrative Expenses	b Less Cost of goods sold . . . . .				
	c Gross profit or (loss) (attach schedule) . . . . .				
	11 Other income (attach schedule) . . . . .				
	12 Total. Add lines 1 through 11 . . . . .	148,427	148,427		
	13 Compensation of officers, directors, trustees, etc	6,750	675		6,075
	14 Other employee salaries and wages . . . . .				
	15 Pension plans, employee benefits . . . . .				
	16a Legal fees (attach schedule) . . . . .				
	b Accounting fees (attach schedule) . . . . .	1,660			166
	c Other professional fees (attach schedule) . . . . .	28,346	28,346		
	17 Interest . . . . .				
	18 Taxes (attach schedule) (see instructions) . . . . .	1,766			
	19 Depreciation (attach schedule) and depletion . . . . .				
	20 Occupancy . . . . .				
	21 Travel, conferences, and meetings . . . . .	5,271	516		4,639
	22 Printing and publications . . . . .				
	23 Other expenses (attach schedule) . . . . .	1,384	136		1,228
	24 Total operating and administrative expenses. Add lines 13 through 23 . . . . .	45,177	29,673		12,108
	25 Contributions, gifts, grants paid . . . . .	115,610			115,610
	26 Total expenses and disbursements. Add lines 24 and 25	160,787	29,673		127,718
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	-12,360			
	b Net investment income (if negative, enter -0-)		118,754		
	c Adjusted net income(if negative, enter -0-)				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			
		Beginning of year (a) Book Value	End of year (b) Book Value (c) Fair Market Value		
Assets	1	Cash—non-interest-bearing . . . . .	260,527	88,183	88,183
	2	Savings and temporary cash investments . . . . .	34,710	250,000	250,000
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable . . . . .			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use . . . . .			
	9	Prepaid expenses and deferred charges . . . . .			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) . . . . .	1,233,626	1,116,477	1,824,800
	c	Investments—corporate bonds (attach schedule) . . . . .	75,925	189,336	187,410
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans . . . . .			
	13	Investments—other (attach schedule) . . . . .	332,151	280,583	306,725
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	<b>Total assets</b> (to be completed by all filers—see the instructions Also, see page 1, item I)	1,936,939	1,924,579	2,657,118	
Liabilities	17	Accounts payable and accrued expenses . . . . .			
	18	Grants payable. . . . .			
	19	Deferred revenue . . . . .			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule). . . . .			
	22	Other liabilities (describe ▶ _____)			
	23	<b>Total liabilities</b> (add lines 17 through 22) . . . . .		0	
Net Assets or Fund Balances	<b>Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/></b> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	24	Unrestricted . . . . .			
	25	Temporarily restricted . . . . .			
	26	Permanently restricted . . . . .			
	<b>Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/></b> <b>and complete lines 27 through 31.</b>				
	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	1,936,939	1,924,579	
	30	<b>Total net assets or fund balances</b> (see instructions) . . . . .	1,936,939	1,924,579	
31	<b>Total liabilities and net assets/fund balances</b> (see instructions) .	1,936,939	1,924,579		

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,936,939
2	Enter amount from Part I, line 27a . . . . .	2	-12,360
3	Other increases not included in line 2 (itemize) ▶ _____	3	
4	Add lines 1, 2, and 3 . . . . .	4	1,924,579
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	1,924,579

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co )	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
<b>1a</b>			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
<b>a</b>			
<b>b</b>			
<b>c</b>			
<b>d</b>			
<b>e</b>			

<b>2</b> Capital gain net income or (net capital loss) <span style="float: right;">{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }</span>	<b>2</b>	97,371
<b>3</b> Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 <span style="float: right;">{ }</span>	<b>3</b>	330

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income )

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

**1** Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2016	122,613	2,465,567	0 049730
2015	117,836	2,387,533	0 049355
2014	119,822	2,590,542	0 046254
2013	126,775	2,529,988	0 050109
2012	120,790	2,354,396	0 051304
<b>2 Total</b> of line 1, column (d)			<b>2</b> 0 246752
<b>3</b> Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			<b>3</b> 0 049350
<b>4</b> Enter the net value of noncharitable-use assets for 2017 from Part X, line 5			<b>4</b> 2,654,899
<b>5</b> Multiply line 4 by line 3			<b>5</b> 131,019
<b>6</b> Enter 1% of net investment income (1% of Part I, line 27b)			<b>6</b> 1,188
<b>7</b> Add lines 5 and 6			<b>7</b> 132,207
<b>8</b> Enter qualifying distributions from Part XII, line 4			<b>8</b> 127,718

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

<b>1a</b>	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)		
<b>b</b>	Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b . . . . .	<b>1</b>	2,375
<b>c</b>	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
<b>2</b>	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>2</b>	
<b>3</b>	Add lines 1 and 2. . . . .	<b>3</b>	2,375
<b>4</b>	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<b>4</b>	
<b>5</b>	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- . . . . .	<b>5</b>	2,375
<b>6</b>	Credits/Payments		
<b>a</b>	2017 estimated tax payments and 2016 overpayment credited to 2017	<b>6a</b>	1,883
<b>b</b>	Exempt foreign organizations—tax withheld at source . . . . .	<b>6b</b>	
<b>c</b>	Tax paid with application for extension of time to file (Form 8868) . . . . .	<b>6c</b>	
<b>d</b>	Backup withholding erroneously withheld . . . . .	<b>6d</b>	
<b>7</b>	Total credits and payments. Add lines 6a through 6d. . . . .	<b>7</b>	1,883
<b>8</b>	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	<b>8</b>	
<b>9</b>	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . .	<b>9</b>	492
<b>10</b>	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . .	<b>10</b>	
<b>11</b>	Enter the amount of line 10 to be <b>Credited to 2018 estimated tax</b> <input type="checkbox"/> <b>Refunded</b> <input type="checkbox"/>	<b>11</b>	

**Part VII-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	<b>1a</b>	No
<b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . . <i>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</i>	<b>1b</b>	No
<b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	<b>1c</b>	No
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation <input type="checkbox"/> \$ _____ (2) On foundation managers <input type="checkbox"/> \$ _____		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers <input type="checkbox"/> \$ _____		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	<b>2</b>	No
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i> . . . . .	<b>3</b>	No
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	<b>4a</b>	No
<b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	<b>4b</b>	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	<b>5</b>	No
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	<b>6</b>	Yes
<b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i> . . . . .	<b>7</b>	Yes
<b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) <input type="checkbox"/> MT		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	<b>8b</b>	Yes
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2017 or the taxable year beginning in 2017 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i> . . . . .	<b>9</b>	No
<b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i> . . . . .	<b>10</b>	No

**Part VII-A Statements Regarding Activities** (continued)

<b>11</b>	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).	<b>11</b>		<b>No</b>
<b>12</b>	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)	<b>12</b>		<b>No</b>
<b>13</b>	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address <b>N/A</b>	<b>13</b>	<b>Yes</b>	
<b>14</b>	The books are in care of <b>WILLIAM HAND</b> Telephone no <b>(703) 864-1257</b>			

Located at **PO BOX 431 NYE MT** ZIP+4 **590610431**

<b>15</b>	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year . . . . . <b>15</b>			
<b>16</b>	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes," enter the name of the foreign country <b>▶</b>	<b>16</b>	<b>Yes</b>	<b>No</b>

**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.**

<b>1a</b>	During the year did the foundation (either directly or indirectly)		<b>Yes</b>	<b>No</b>
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> 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). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	<b>1b</b>		<b>No</b>
<b>c</b>	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? <input type="checkbox"/>	<b>1c</b>		
<b>2</b>	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))			
<b>a</b>	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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years <b>▶ 20____, 20____, 20____, 20____</b>			
<b>b</b>	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 <b>all</b> years listed, answer "No" and attach statement—see instructions). <input type="checkbox"/>	<b>2b</b>		
<b>c</b>	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here <b>▶ 20____, 20____, 20____, 20____</b>			
<b>3a</b>	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>b</b>	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2017). <input type="checkbox"/>	<b>3b</b>		
<b>4a</b>	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	<b>4a</b>		<b>No</b>
<b>b</b>	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2017?	<b>4b</b>		<b>No</b>

**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

<b>5a</b>	During the year did the foundation pay or incur any amount to				
	<b>(1)</b> Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
	<b>(2)</b> Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
	<b>(3)</b> Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
	<b>(4)</b> Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions).	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
	<b>(5)</b> Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
<b>b</b>	If any answer is "Yes" to 5a(1)–(5), did <b>any</b> of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?	<b>5b</b>			
	Organizations relying on a current notice regarding disaster assistance check here. 				
<b>c</b>	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
	<i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>				
<b>6a</b>	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<b>6b</b>	<b>No</b>
<b>b</b>	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?				
	<i>If "Yes" to 6b, file Form 8870</i>				
<b>7a</b>	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<b>7b</b>	
<b>b</b>	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?				

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

**1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

**2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."**

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				

**Total** number of other employees paid over \$50,000. . . . . ▶

**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
NONE		

**Total** number of others receiving over \$50,000 for professional services. . . . . ▶

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
<b>1</b>	
<b>2</b>	
<b>3</b>	
<b>4</b>	

**Part IX-B Summary of Program-Related Investments (see instructions)**

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
<b>1</b> N/A	
<b>2</b>	
All other program-related investments See instructions	
<b>3</b>	

**Total.** Add lines 1 through 3 . . . . . ▶

**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

<b>1</b>	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.	<b>1a</b>	2,423,650
<b>b</b>	Average of monthly cash balances.	<b>1b</b>	271,679
<b>c</b>	Fair market value of all other assets (see instructions).	<b>1c</b>	0
<b>d</b>	<b>Total</b> (add lines 1a, b, and c).	<b>1d</b>	2,695,329
<b>e</b>	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to line 1 assets.	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	2,695,329
<b>4</b>	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	<b>4</b>	40,430
<b>5</b>	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4.	<b>5</b>	2,654,899
<b>6</b>	<b>Minimum investment return.</b> Enter 5% of line 5.	<b>6</b>	132,745

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

<b>1</b>	Minimum investment return from Part X, line 6.	<b>1</b>	132,745
<b>2a</b>	Tax on investment income for 2017 from Part VI, line 5.	<b>2a</b>	2,375
<b>b</b>	Income tax for 2017 (This does not include the tax from Part VI).	<b>2b</b>	
<b>c</b>	Add lines 2a and 2b.	<b>2c</b>	2,375
<b>3</b>	Distributable amount before adjustments. Subtract line 2c from line 1.	<b>3</b>	130,370
<b>4</b>	Recoveries of amounts treated as qualifying distributions.	<b>4</b>	
<b>5</b>	Add lines 3 and 4.	<b>5</b>	130,370
<b>6</b>	Deduction from distributable amount (see instructions).	<b>6</b>	
<b>7</b>	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	<b>7</b>	130,370

**Part XII Qualifying Distributions** (see instructions)

<b>1</b>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
<b>a</b>	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	<b>1a</b>	127,718
<b>b</b>	Program-related investments—total from Part IX-B.	<b>1b</b>	
<b>2</b>	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	<b>2</b>	
<b>3</b>	Amounts set aside for specific charitable projects that satisfy the		
<b>a</b>	Suitability test (prior IRS approval required).	<b>3a</b>	
<b>b</b>	Cash distribution test (attach the required schedule).	<b>3b</b>	
<b>4</b>	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	<b>4</b>	127,718
<b>5</b>	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).	<b>5</b>	
<b>6</b>	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4.	<b>6</b>	127,718

**Note:** The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.



**Part XIII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
<b>1</b> Distributable amount for 2017 from Part XI, line 7				130,370
<b>2</b> Undistributed income, if any, as of the end of 2017				
<b>a</b> Enter amount for 2016 only. . . . .				
<b>b</b> Total for prior years 20____, 20____, 20____				
<b>3</b> Excess distributions carryover, if any, to 2017				
<b>a</b> From 2012. . . . .	1,749			
<b>b</b> From 2013. . . . .				
<b>c</b> From 2014. . . . .	2,014			
<b>d</b> From 2015. . . . .				
<b>e</b> From 2016. . . . .	1,181			
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	4,944			
<b>4</b> Qualifying distributions for 2017 from Part XII, line 4 ▶ \$ 127,718				
<b>a</b> Applied to 2016, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .				
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .				
<b>d</b> Applied to 2017 distributable amount. . . . .				127,718
<b>e</b> Remaining amount distributed out of corpus				
<b>5</b> Excess distributions carryover applied to 2017 (If an amount appears in column (d), the same amount must be shown in column (a) )	2,652			2,652
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,292			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b . . . . .				
<b>c</b> 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. . . . .				
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .				
<b>e</b> Undistributed income for 2016 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .				
<b>f</b> Undistributed income for 2017 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2018 . . . . .				0
<b>7</b> 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). . . . .				
<b>8</b> Excess distributions carryover from 2012 not applied on line 5 or line 7 (see instructions). . . . .				
<b>9</b> <b>Excess distributions carryover to 2018.</b> Subtract lines 7 and 8 from line 6a . . . . .	2,292			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2013. . . . .				
<b>b</b> Excess from 2014. . . . .	1,111			
<b>c</b> Excess from 2015. . . . .				
<b>d</b> Excess from 2016. . . . .	1,181			
<b>e</b> Excess from 2017. . . . .				

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

<b>1a</b> If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2017, enter the date of the ruling. . . . . ▶					
<b>b</b> Check box to indicate whether the organization is a private operating foundation described in section <input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)					
<b>2a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed . . . . .	Tax year	Prior 3 years			(e) Total
	(a) 2017	(b) 2016	(c) 2015	(d) 2014	
<b>b</b> 85% of line 2a . . . . .					
<b>c</b> Qualifying distributions from Part XII, line 4 for each year listed . . . . .					
<b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities . . . . .					
<b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c . . . . .					
<b>3</b> Complete 3a, b, or c for the alternative test relied upon					
<b>a</b> "Assets" alternative test—enter					
<b>(1)</b> Value of all assets . . . . .					
<b>(2)</b> Value of assets qualifying under section 4942(j)(3)(B)(i)					
<b>b</b> "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed. . .					
<b>c</b> "Support" alternative test—enter					
<b>(1)</b> Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . .					
<b>(2)</b> Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
<b>(3)</b> Largest amount of support from an exempt organization					
<b>(4)</b> Gross investment income					

**Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)**

<b>1 Information Regarding Foundation Managers:</b>	
<b>a</b> List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2) )	
<b>b</b> List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest	
<b>2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:</b>	
Check here <input type="checkbox"/> if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d	
<b>a</b> The name, address, and telephone number or e-mail address of the person to whom applications should be addressed NIBS AND EDNA ALLEN FOUNDATION PO BOX 1435 MILES CITY, MT 59301 (703) 864-1257	
<b>b</b> The form in which applications should be submitted and information and materials they should include WRITTEN APPLICATIONS INDICATING NAME AND ADDRESS OF APPLICANT, DESCRIPTION/PURPOSE OF REQUEST, EVIDENCE OF 501(C)(3), GOVERNMENTAL, RELIGIOUS OR EQUIVALENT STATUS	
<b>c</b> Any submission deadlines FOUNDATION HAS TWO GRANT CYCLES PER YEAR, GENERALLY IN MAY AND SEPTEMBER, MINIMUM TWO WEEK REVIEW OF	
<b>d</b> Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors PREFERENCE IS GIVEN TO SOUTHEAST MONTANA	

**Part XV** **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			<b>3a</b>	115,610
<b>b</b> <i>Approved for future payment</i>				
<b>Total</b> . . . . .			<b>3b</b>	

## Enter gross amounts unless otherwise indicated

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

Form **990-PF** (2017)

## Part XVII

		<b>Yes</b>	<b>No</b>
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<b>1a(1)</b>	<b>No</b>
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1a(2)	No
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<b>1b(1)</b>	<b>No</b>
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<b>1b(2)</b>		<b>No</b>
--------------	--	-----------

<b>1b(3)</b>		<b>No</b>
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<b>1b(4)</b>		<b>No</b>
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<b>1b(5)</b>	<b>No</b>
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<b>1b(6)</b>		<b>No</b>
--------------	--	-----------

1c		No
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value  
ue[illegible]

**2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations

described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? . . . . . ☐ Yes ☒ No

**b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here
\*\*\*\*\*
2018-11-01
\*\*\*\*\*
May the IRS discuss this return

Signature of officer or trustee \_\_\_\_\_ Date \_\_\_\_\_ Title \_\_\_\_\_

May the IRS discuss this return with the preparer shown below

(see instr )? ☒ Yes ☐ No

<b>Paid Preparer Use Only</b>	BRETT E MOATS		2018-11-01		
	Firm's name ► BRETT MOATS CPA				Firm's EIN ► 81-0793354

Print/Type preparer's name  BRETT E MOATS	Preparer's Signature	Date  2018-11-01	Check if self-employed ▶ <input checked="" type="checkbox"/>	PTIN  P00277098
Firm's name ▶ BRETT MOATS CPA				Firm's EIN ▶ 81-0793354
Firm's address ▶ 908 MAIN ST  MILES CITY, MT 593013320				Phone no (406) 852-0227

Form 990FP Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
WILLIAM HAND	TREASURER 1 00	750	0	420
PO BOX 431 NYE, MT 590610431				
EDNA JENSEN	PRESIDENT 1 00	750	0	820
5407 CORNER STONE AVE BILLINGS, MT 59106				
ROSE HAND	DIRECTOR 1 00	750	0	0
1141 SW TRAIL RIDGE DR BLUE SPRINGS, MO 64015				
GEORGE HAND	DIRECTOR 1 00	750	0	0
58 TANGLEWOOD RD NEWNAN, GA 30263				
CHARLES HAND	DIRECTOR 1 00	750	0	1,688
1015 E ROCKWOOD BLVD SPOKANE, WA 99203				
CAROLYN PETERSOHN	DIRECTOR 1 00	375	0	0
806 WYOMING BILLINGS, MT 59101				
KERRY JANE GALLAGHER	SECRETARY 1 00	750	0	1,523
5085 CATAMOUNT DR LAS CRUCES, NM 88011				
JAMIE SUE SHELHAMER	DIRECTOR 1 00	750	0	1,091
3155 BUNKER LAKE BLVD NW ANDOVER, MN 55304				
INGERI LEUTHOLD	DIRECTOR 1 00	750	0	0
PO BOX 81183 BILLINGS, MT 59108				
CARL LARSON	ASSIST TREAS 1 00	375	0	0
10739 AKRON ST HENDERSON, CO 80640				
MARILOU GREEN	BOARD MEMBER 000 00	0	0	415
2019 15TH ST W BILLINGS, MT 59102				
LINDA GREEN-RUTHERFORD	BOARD MEMBER 000 00	0	0	0
3125 AVE E BILLINGS, MT 59102				
NANCY LARSON	BOARD MEMBER 000 00	0	0	0
5085 W 136TH AVE APT 128 BROOMFIELD, CO 80023				
NICHOLAS MOSSIE	BOARD MEMBER 000 00	0	0	0
3650 SW KIMSTIN CIR BLUE SPRINGS, MO 64015				
CRISTIN DICKERT	BOARD MEMBER 000 00	0	0	0
11039B VILLARIDGE COURT RESTON, VA 20191				

**Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation**

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
HEATHER LANNIGAN 5601 AIRPORT ROAD PULLMAN, WA 99163	BOARD MEMBER 000 00	0	0	0
MICHAEL HAND 943 PEACHTREE ST NE UNIT 802 ATLANTA, GA 30309				
GREGORY HAND 1394 SILVER PINE LANE TALLAHASSEE, FL 32312	BOARD MEMBER 000 00	0	0	0
PAUL HAND 1516 LYNN DRIVE WYLIE, TX 75098				
MICHELLE PAULSON 2714 HANOVER CIR BILLINGS, MT 59106	BOARD MEMBER 000 00	0	0	0
KELLEY GALLAGHER 1140 WOODSIDE ST MANHATTAN, MT 59741				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
RANGE RIDERS INC 435 LP AMDERSON RD MILES CITY, MT 59301	N/A	PC	DISPLAY PROTECTION	8,400
MILES CITY BLUEGRASS FESTIVAL INC PO BOX 146 MILES CITY, MT 59301	N/A	PC	SUPPORT THE ARTS-ANNUAL FESTIVAL	1,500
LINCOLN ELEMENTARY SCHOOL 1604 MAIN ST MILES CITY, MT 59301	N/A	GOV	PURCHASE READING PROGRAM LICENSES	3,610
<b>Total . . . . . ▶</b> <b>3a</b>				115,610




Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> Paid during the year				
MILES CITY UNIFIED SCHOOL DISTRICT 1604 MAIN ST MILES CITY, MT 59301	N/A	GOV	PURCHASE BAND INSTRUMENTS	2,500
CARTER COUNTY SCHOOL DISTRICT 1 PO BOX 284 HAMMOND, MT 59322	N/A	GOV	SUPPORT READINESS PROGRAM	5,400
SACRED HEART PARISH SCHOOL 519 N CENTER AVE MILES CITY, MT 59301	N/A	NC	PURCHASE EDUCATIONAL EQUIPMENT	3,900
<b>Total . . . . . ▶</b> <b>3a</b>				115,610

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
GARFIELD COUNTY SHERIFF DEPARTMENT PO BOX 103 JORDAN, MT 59337	N/A	GOV	PURCHASE DRIVER FEEDBACK SIGNS	5,180
MILES CITY BLUEGRASS FESTIVAL INC PO BOX 146 MILES CITY, MT 59301	N/A	PC	SUPPORT THE ARTS-ANNUAL FESTIVAL	1,500
GARFIELD ELEMENTARY SCHOOL 1015 MILWAUKEE MILES CITY, MT 59301	N/A	GOV	PURCHASE EDUCATIONAL MATERIALS	2,500
<b>Total . . . . .</b> ► <b>3a</b>				115,610

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
WATERWORKS ART MUSEUM PO BOX 1284 85 WATERPLANT RD MILES CITY, MT 59301	N/A	PC	SUPPORT ART EDUCATION PROGRAM	8,000
POWDER RIVER FIRST RESPONDERS LTD PO BOX 125 BOYES, MT 59316	N/A	PC	SUPPORT OUTREACH EDUCATION PROGRAM	2,400
GARFIELD COUNTY HEALTH CENTER 332 LEAVITT AVE JORDAN, MT 59337	N/A	GOV	PURCHASE KITCHEN EQUIPMENT	20,000
<b>Total . . . . . ▶</b> <b>3a</b>				115,610

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
KEEP MILES CITY BEAUTIFUL PO BOX 722 MILES CITY, MT 59301	N/A	PC	SUPPORT WEST END TRAIL PROJECT	8,000
MILES CITY AREA ECON DEV COUNCL INC 1010 MAIN ST STE 18 MILES CITY, MT 59301	N/A	PC	PURCHASE OFFICE EQUIPMENT	1,550
CUSTER COUNTY DISTRICT HIGH SCHOOL 20 SOUTH CENTER AVE MILES CITY, MT 59301	N/A	GOV	PURCHASE ATHLETIC DEPARTMENT EQUIP	10,000
<b>Total . . . . .</b> ▶ <b>3a</b>				115,610

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
CUSTER COUNTY EDUCATIONAL FD INC PO BOX 1092 MILES CITY, MT 59301	N/A	PC	SUPPORT EDUCATIONAL SCHOLARSHIPS	16,000
MILES CITY CONVENT KEEPERS 1411 LEIGHTON BLVD MILES CITY, MT 59301	N/A	PC	MAINTAIN HISTORICAL FACILITY	8,170
CUSTER COUNTY DISTRICT HIGH SCHOOL 1604 MAIN ST MILES CITY, MT 59301	N/A	GOV	SUPPORT VO TECH PROGRAM	2,000
<b>Total . . . . .</b> ► <b>3a</b>				115,610

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a</b> <i>Paid during the year</i>				
MILES COMMUNITY COLLEGE ENDOWMENT 2715 DICKINSON ST MILES CITY, MT 59301	N/A	PC	IMROVE AGRICULTURAL TECH CENTER	5,000
<b>Total</b> . . . . . 				115,610
<b>3a</b>				

**TY 2017 Accounting Fees Schedule****Name:** NIBS AND EDNA ALLEN FOUNDATION**EIN:** 81-0480143**Accounting Fees Schedule**

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
PREPARATION FORM 990PF & MEETING	1,660			166

**TY 2017 Investments Corporate Bonds Schedule****Name:** NIBS AND EDNA ALLEN FOUNDATION**EIN:** 81-0480143**Investments Corporate Bonds Schedule**

<b>Name of Bond</b>	<b>End of Year Book Value</b>	<b>End of Year Fair Market Value</b>
BANK OF AMERICA CORP	24,738	24,633
BANK OF NEW YORK MELLON	25,151	24,865
HCP INC	24,524	24,449
MARATHON PETROLEUM CORP	24,671	24,416
MARSH & MCLENNAN COS INC	24,478	24,448
MICROSOFT CORP	25,565	24,606
TOYOTA MOTOR CREDIT CORP	25,209	24,993
PIMCO FOREIGN BOND FUND	15,000	15,000



**TY 2017 Investments Corporate Stock Schedule**

**Name:** NIBS AND EDNA ALLEN FOUNDATION  
**EIN:** 81-0480143

Name of Stock	End of Year Book Value	End of Year Fair Market Value
JPMORGAN HIGH YIELD FUND CLASS I 3	70,000	68,573
PUTNAM FLOATING RATE INC FUND 1857	46,975	45,610
T ROWE PRICE INSTITUTIONAL FLOAT	25,030	24,830
FIDELITY ADVISORS EMERGING MARKETS	40,000	36,638
WESTERN ASSET EMERGING MARKET		
TCW EMRG MKTS INCM-I 4721	30,000	29,924
COMCAST CORP CLASS A	8,066	14,764
HOME DEPOT INC	7,322	9,755
LAS VEGAS SANDS CORP	8,842	11,454
NIKE INC CL B	7,790	11,952
TARGET CORP	6,227	7,612
TJX COMPANIES INC	4,483	9,518
WALT DISNEY CO	5,228	10,481
CVS HEALTH CORPORATION	13,170	14,479
HAIN CELESTIAL GROUP INC	6,877	5,215
AFFILIATED MANAGERS GROUP INC COM		
EOG RESOURCES, INC	5,675	6,221
AMERIPRISE FINL INC	5,216	6,994
BERKSHIRE HATHAWAY INC	4,406	9,332
BLACKROCK INC	6,289	9,981
CITIGROUP INC	11,851	16,730
CME GROUP INCE	2,870	8,196
JPMORGAN CHASE & CO	6,064	15,630
PNC FINANCIAL SERVICES GROUP	11,768	16,887
ELI LILLY & CO COM	7,437	8,533
GILEAD SCIENCES INC	6,320	8,855
MCKESSON CORP	6,202	6,670
MERCK & CO INC MEW	8,981	10,623
THERMO FISHER SCIENTIFIC INC	2,948	10,357
UNITEDHEALTH GROUP INC	4,726	20,854

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ZOETIS INC	7,037	10,649
BOEING CO	2,095	10,065
SPIRIT AEROSYSTEMS HODL-CL A	4,570	8,591
UNION PACIFIC CORP	8,878	21,252
UNITED PARCEL SERVICE-CL B	7,176	10,623
ALPHABET INC CL C	16,621	27,891
APPLE INC	19,197	37,022
CISCO SYSTEMS INC	9,144	20,440
COGNIZANT TECH SOLUTIONS CRP COM	12,485	17,773
MICROSOFT CORP	11,339	34,514
CELANESE CORP	6,381	16,659
AT&T INC	11,754	10,436
BAYER AG - ADR	6,344	6,895
DIAGEO PIC- ADR	8,366	10,801
EATON CORP PLC	4,712	7,474
FLEX LTD	9,858	8,113
MANULIFE FINANCIAL CORP	10,051	12,579
ROCHE HOLDINGS LTD - ADR	12,546	10,361
SCHLUMBERGER LTD	18,077	15,082
SUNCOR ENERGY INC NEW F	11,161	17,086
TE CONNECTIVITY LTD	10,555	13,509
TOTAL S.A. - ADR	13,823	16,654
UBS GROUP AG	10,599	8,437
ISHARES MSCI JAPAN ETF	23,240	28,955
ISHARES RUSSELL 1000 GROWTH ETF	150,396	431,400
ISHARES S&P MID-CAP 400 GROWTH	24,534	70,806
ISHARES S&P MID-CAP 400 VALUE	30,101	72,913
ISHARES S&P SMALL-CAP 600 GROWTH	19,825	66,136
ISHARES S&P SMALL-CAP 600 VALUE	20,443	57,144
ISHARES EUROPE ETF	20,415	22,355

Name of Stock	End of Year Book Value	End of Year Fair Market Value
ISHARES MSCI EAFE ETF	73,566	85,387
TWEEDY BROWNE FD INC GLOBAL VALUE	68,028	78,850
VANGUARD FTSE EMERGING MARKETS ETF	82,397	101,280

**TY 2017 Investments - Other Schedule****Name:** NIBS AND EDNA ALLEN FOUNDATION**EIN:** 81-0480143**Investments Other Schedule 2**

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
AQR MANAGED FUTURES STRATEGY FUND	AT COST		
ASG GLOBAL ALTERNATIVES FUND CLASS Y	AT COST	16,507	16,638
BOSTON PARTNERS LONG/SHORT RESEARCH	AT COST	18,354	22,374
EATON VANCE GLOBAL MACRO ABSOLUTE	AT COST	15,000	14,571
NEUBERGER BERMAN LONG SHORT FUND	AT COST	13,000	15,107
THE BLACKROCK GLOBAL LONG/SHORT	AT COST	15,000	15,527
THE MERGER FUND CLASS INST 301	AT COST	14,173	15,146
CREDIT SUISSE COMMODITY RETURN STRAT	AT COST	40,000	39,213
SPDR DJ WILSHIRE INTERNATIONAL REAL	AT COST	79,512	78,554
VANGUARD REAL ESTATE ETF	AT COST	69,037	89,595

**TY 2017 Other Expenses Schedule****Name:** NIBS AND EDNA ALLEN FOUNDATION**EIN:** 81-0480143**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
LICENSE	20			
DUES	600	60		540
OFFICE EXPENSE	764	76		688

**TY 2017 Other Professional Fees Schedule****Name:** NIBS AND EDNA ALLEN FOUNDATION**EIN:** 81-0480143

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
INVESTMENT MANAGEMENT	28,346	28,346		

**TY 2017 Taxes Schedule****Name:** NIBS AND EDNA ALLEN FOUNDATION**EIN:** 81-0480143

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
SEC 4940	1,000			
FOREIGN	766			