efile GRAPHIC print - DO NOT PROCESS

DLN: 93491134038809

OMB No 1545-0052

2018

Return of Private Foundation

Department of the Treasury Internal Revenue Service

990-PF

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

Do not enter social security numbers on this form as it may be made public. ▶ Go to www.irs.gov/Form990PF for instructions and the latest information.

Open to Public Inspection

For calendar year 2018, or tax year beginning 01-01-2018 , and ending 12-31-2018 A Employer identification number ORO Y PLATA FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) PO BOX 1079 (406) 223-2595 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here KALISPELL, MT 59903 ☐ Initial return ☐ Initial return of a former public charity G Check all that apply D 1. Foreign organizations, check here 2 Foreign organizations meeting the 85% test, check here and attach computation ☐ Final return Amended return ☐ Name change Address change **E** If private foundation status was terminated under section 507(b)(1)(A), check here ✓ Section 501(c)(3) exempt private foundation **H** Check type of organization Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation I Fair market value of all assets at end ☑ Cash ☐ Accrual **F** If the foundation is in a 60-month termination under section 507(b)(1)(B), check here J Accounting method of year (from Part II, col (c), line 16) ▶\$ 8,339,630 Other (specify) (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total (d) Disbursements Net investment (c) Adjusted net for charitable of amounts in columns (b), (c), and (d) may not necessarily expenses per books purposes (cash basis only) income equal the amounts in column (a) (see instructions)) Contributions, gifts, grants, etc , received (attach schedule) Check \blacktriangleright lacksquare if the foundation is **not** required to attach 2 2.956 2.956 2.956 Interest on savings and temporary cash investments 4 Dividends and interest from securities 341,648 341,648 341,648 Gross rents 5a Net rental income or (loss) 202,331 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 202,331 Net short-term capital gain Income modifications . . 10a Gross sales less returns and allowances Less Cost of goods sold b Gross profit or (loss) (attach schedule) Other income (attach schedule) 12 Total. Add lines 1 through 11 546.935 546.935 344.604 Compensation of officers, directors, trustees, etc 64,051 19,215 44.836 13 14 Other employee salaries and wages 577 1.922 1.345 15 Pension plans, employee benefits Operating and Administrative Expenses Legal fees (attach schedule) . رو Accounting fees (attach schedule) 2,669 801 1,868 ارچە 2,559 768 1.791 Other professional fees (attach schedule) 17 [چە 23.929 20,098 16,751 18 Taxes (attach schedule) (see instructions) 9 19 Depreciation (attach schedule) and depletion 178 178 20 21 Travel, conferences, and meetings 10,01 3,005 7,012 22 Printing and publications . 202 61 141 Other expenses (attach schedule) 11,177 3,354 7,823 24 Total operating and administrative expenses. Add lines 13 through 23 . . . 116,704 48.057 81,567 25 Contributions, gifts, grants paid 994 000 994.000 26 Total expenses and disbursements. Add lines 24 and 1,110,704 48,057 1,075,567 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements Net investment income (If negative, enter -0-) 498,878 Adjusted net income (if negative, enter -0-) . . . 344,604 For Paperwork Reduction Act Notice, see instructions. Cat No 11289X Form **990-PF** (2018)

3,071

89

9,272,561

2,391

2,391

9,270,170

9,270,170

9,272,561

1

2 3

4

5

6

9,791,742

-563,769

9,270,170

9,270,170 Form **990-PF** (2018)

42,197

8,719,800

8,719,918

267

9,797,920

6,178

6,178

9,791,742

9,791,742

9,797,920

3,071

7,786,958

8,339,630

		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 ▶	
2	8	Inventories for sale or use	
ssets	9	Prepaid expenses and deferred charges	
As	10a	Investments—U S and state government obligations (attach schedule)	
	ь	Investments—corporate stock (attach schedule)	
	С	Investments—corporate bonds (attach schedule)	
	11	Investments—land, buildings, and equipment basis ▶	_

Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund

Capital stock, trust principal, or current funds

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Analysis of Changes in Net Assets or Fund Balances

Less accumulated depreciation (attach schedule) ▶ 1,456

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Accounts payable and accrued expenses .

Other assets (describe > _

Grants payable

Deferred revenue .

Other liabilities (describe ▶_

Unrestricted . . .

Permanently restricted .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) Add lines 1, 2, and 3

Enter amount from Part I, line 27a

Temporarily restricted

12

13 14

15 16

17

18

19 20

21

22

23

24

25

26

27

28

29

30

31

Part III

2

3

Liabilities

Fund Balances

ō

Net Assets

	e the kınd(s) of property sold (e g , arehouse, or common stock, 200 shs		How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a 350 VANGUARD S&P 500) ETF		Р	2017-02-16	2018-11-30
b Capital Gain Dividends					
c					
d					
e					
	(f)	i i	q)	(h)
(e) Gross sales price	Depreciation allowed		ther basis	Gain o	r (loss)
<u> </u>	(or allowable)	plus expe	nse of sale	(e) plus (f) mınus (g)
a 8	7,771		75,482		12,289
b					190,042
С					
d					
e					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation o	n 12/31/69	(I)
	(i)		k)		h) gain minus
(i) F M V as of 12/31/69	Adjusted basis		of col (ı)	col (k), but not	less than -0-) or
FM V 45 01 12/31/09	as of 12/31/69	over col	(j), if any	Losses (fro	om col (h))
a					12,289
b					
c					
d					
e					
	1	If gain, also enter in Pa	rt I. line 7		
	gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructi	ons) If (loss), enter -0-	·	3	202,331
Dort V Qualification I	Index Section 4040(a) for De	duced Tay on Net	Toursetment Tour		
	Jnder Section 4940(e) for Re				
(For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on net	: investment incom	e)	
If section 4940(d)(2) applies, le	eave this part blank				
Was the foundation liable for th	e section 4942 tax on the distributal		in the base period?) Y	es 🔽 No
	nount in each column for each year,	•	makıng anv entries		
(a) Base period years Calendar	(b) Adjusted qualifying distributions	(c) Net value of noncharitable		(d) Distribution rati	.0
year (or tax year beginning in)		THE VALUE OF HOHEHALILADIE		(col (b) divided by c	
2017	887,813		10,013,230		0 08866
2016	730,504		7,121,819		0 10257
2015	688,301		7,225,962		0 09525
2014	1,715,942		7,913,667		0 21683
2013	697,295		8,039,325		0 08674
2 Total of line 1, column (d)		2		0 590060
	for the 5-year base period—divide				0.440040
	ndation has been in existence if less		3		0 118012
	ncharitable-use assets for 2018 fron	·	4		9,925,369
5 Multiply line 4 by line 3	(40) 50 (7)		5		1,171,313
	ent income (1% of Part I, line 27b)		6		4,989
					1,176,302
	ons from Part XII, line 4 ,				1,075,567
If line 8 is equal to or gre instructions	eater than line 7, check the box in Pa	art VI, line 1b, and comp	olete that part usin	g a 1% tax rate Se	e the Part VI

Pal	Lt ATT-R	Statements Regard	ııng	Activities for Which	Form 4/20 May Be	Requirea	(continue	a)				
5a	During the	year did the foundation p	oay o	r incur any amount to							Yes	No
	(1) Carry o	n propaganda, or otherw	ise a	ttempt to influence legisla	ation (section 4945(e))?		Yes	✓	No.			
	(2) Influen	ce the outcome of any sp	ecıfı	c public election (see sect	ion 4955), or to carry		□ ies	4	110			
	on, dire	ectly or indirectly, any vo	ter r	egistration drive?			☐ Yes	~	No			
	(3) Provide	a grant to an individual	for t	ravel, study, or other sımı	lar purposes?		Yes		No			
	(4) Provide	a grant to an organizati	on ot	her than a charitable, etc	, organization described	I	1es	ت	110			
	ın sectio	on 4945(d)(4)(A)? See ır	nstru	ctions			☐ Yes	✓	No.			
	(5) Provide	for any purpose other the	han r	eligious, charitable, scient	ific, literary, or		c3	_	'''			
	educati	onal purposes, or for the	prev	ention of cruelty to childre	en or anımals?		☐ Yes	✓	No.			
b	If any answ	er is "Yes" to $5a(1)-(5)$,	dıd a	any of the transactions fa	l to qualify under the ex	ceptions desc	ribed in		"			
	Regulations	section 53 4945 or in a	curre	ent notice regarding disast	er assistance? See instri	uctions				5b		No
	Organizatio	ns relying on a current n	otice	regarding disaster assista	ance check here		▶					
С	If the answ	er is "Yes" to question 5a	a(4),	does the foundation claim	exemption from the							
	tax because	e it maintained expenditu	ire re	sponsibility for the grant?			☐ Yes	✓	No.			
	If "Yes," att	tach the statement requi	red b	y Regulations section 53 4	1945–5(d)			_	"			
6а	Did the four	ndation, during the year,	rece	ive any funds, directly or	indirectly, to pay premiu	ıms on						
	a personal l	benefit contract?					Yes	7	No.			
b	Did the four	ndation, during the year,	pay	premiums, directly or indi	rectly, on a personal bei	nefit contract	? ::		110	6b		No
	If "Yes" to 6	6b, file Form 8870										
7a	At any time	during the tax year, was	s the	foundation a party to a p	rohibited tax shelter trar	nsaction?	☐ Yes	~	No.			
b	If yes, dıd t	he foundation receive an	ıy pro	oceeds or have any net inc	come attributable to the	transaction?	es.	ت	"	7b		No
В	Is the found	dation subject to the sect	tion 4	1960 tax on payment(s) of	f more than \$1,000,000	ın remunerat	ion or					
	excess para	achute payment during th	ne ye	ar [?]			Yes	✓	No.			
	I	Information About C	Offic	ers, Directors, Trust	ees, Foundation Ma	nagers, Hi				yees,		
Pal	3 3 7 4	and Contractors		,	•		•					
1	List all offi	cers, directors, trustee	es, fo	oundation managers an	d their compensation.	See instruc	tions					
				(b) Title, and average	(c) Compensation (If	(d) Cont	tributions t	ю.	(0)	Evner	se acc	ount
	(a) Nan	ne and address		hours per week	not paid, enter	employee be					lowand	
PLIC	E ENNIS		DDEC	devoted to position IDENT/TREAS	- 0-)	 	ompensati	on				
	X 1079		4 00	IDENT/TREAS	٥							
	PELL, MT 599	03										
1ARG	ARET DAVIS			President	0							
	X 1079	0.2	1 00									
	FELL, MT 599	03	C						-			
	X 639		1 00	etary	0							
	NGS, MT 5910	3										
ELIC	IA ENNIS			dation Mana	64,051							
	X 1079		40 0)								
2 2	PELL, MT 599		: -1	nployees (other than th			ational T	£			NONE	71
	Compensa	tion of five nighest-par	iu ei	ipioyees (other than th	ose included on line 1		ributions t		ne, ei	itei	NONE.	<u> </u>
(a)	Name and ad	Idress of each employee	paid	(b) Title, and average			ee benefit		(e) E	Expens	se acco	ount,
		e than \$50,000	•	hours per week devoted to position	(c) Compensation		nd deferred	i			owance	
	_					comp	ensation					
ЮИ	=											
								-				
								\dashv				
ota	I number of	other employees paid ov	er \$5	0,000	<u> </u>		. •					
									For	m 99 0	D-PF (2018

Form 990-PF (2018)		Page 7
Part VIII Information About Officers, Directors, Truste and Contractors (continued)	es, Foundation Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional se	ervices (see instructions). If none, enter "NON	IE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		_
T. I		
Total number of others receiving over \$50,000 for professional services.		
Part IX-A Summary of Direct Charitable Activities	de valeurant etablistical information such as the number of	
List the foundation's four largest direct charitable activities during the tax year Includ organizations and other beneficiaries served, conferences convened, research papers		Expenses
1 THE FOUNDATION IS ORGANIZED TO SUPPORT EFFECTIVE MONTANA		
PEOPLE ENLARGE THEIR COMPETENCIES AND CAPACITIES OYP PREF ART CENTERS, GENERAL HOSPITALS, THEATERS, NATIONAL LEVEL O	'	
INSTITUTIONS, ANIMAL ORGANIZATIONS, SPORTS ORGANIZATIONS	, PUBLIC BROADCASTING AND ECONOMIC	
DEVELOPMENT PROJECTS A LIMITED PORTION OF THE FOUNDATION ORGANIZATIONS THAT MAY BE OUTSIDE OF MONTANA OR THE PRIM		1 110 704
	ART FOCUS OF THE FOUNDATION	1,110,704
2		
2		
4		
Part IX-B Summary of Program-Related Investments (see instructions)	<u> </u>
Describe the two largest program-related investments made by the foundation dur		Amount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		
		Form 990-PF (2018)

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

За 3h

4

5

1.075.567

1,075,567

Form 990-PF (2018)

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

3

4

5

Page 9

486,290

486,290

Form **990-PF** (2018)

1	1	1		3	Г
14	٠.	.,	U		
					_

Form	990-PF	(2	018)
Do	_+ VTT1		

-PF	(2	018	3)		
/	Į			_	Ī

Part XIII	

P	art XIII	Undistributed Income (see instructio					
1	Distributable	e amount for 2	2018 fr	om Par	t XI, I	line 7	
2	Undistribute	d income, if a	ny, as	of the	end of	f 2018	
а	Enter amou	nt for 2017 on	ıly				

- 3 from Part XI, line 7 as of the end of 2018
- **b** Total for prior years 3 Excess distributions carryover, if any, to 2018 310.656
 - 1,329,537
- a From 2013. **b** From 2014. . . . c From 2015. . . 332.758
- **d** From 2016. . . .
- 377,478 408,676 e From 2017. f Total of lines 3a through e.
- 4 Qualifying distributions for 2018 from Part
 - XII, line 4 ▶ \$ 1,075,567
- a Applied to 2017, but not more than line 2a **b** Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election

same amount must be shown in column (a))

d Applied to 2018 distributable amount. e Remaining amount distributed out of corpus

5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the

a Corpus Add lines 3f, 4c, and 4e Subtract line 5

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

9 Excess distributions carryover to 2019.

10 Analysis of line 9

a Excess from 2014. . .

c Excess from 2016. . . .

d Excess from 2017. . .

e Excess from 2018. . .

b Excess from 2015. .

6 Enter the net total of each column as

b Prior years' undistributed income Subtract line 4b from line 2b 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) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2018 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2019 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2013 not

indicated below:

1.329.537 332,758

377,478

408.676

589.277

(a)

Corpus

2.759.105

589.277

3,348,382

310.656

3,037,726

(b)

Years prior to 2017

(c)

2017

512(a)(5)), or royalties). (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III). (3) Largest amount of support from an exempt organization (4) Gross investment income

Supplementary Information (Complete this part only if the foundation had \$5,000 or more in Part XV assets at any time during the year-see instructions.) Information Regarding Foundation Managers: 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))

See Additional Data Table 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 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here 🕨 🗹 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. to individuals or organizations under other conditions, complete items 2a, b, c, and d See instructions

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed ORO Y PLATA FOUNDATION

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other

ORO Y PLATA FOUNDATION DOES NOT ACCEPT UNSOLICITED GRANT APPLICATIONS



Enter gros	s amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
	m service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
d						
	and contracts from government agencies ership dues and assessments					
3 Intere	st on savings and temporary cash ments			14	2,956	
4 Divide	nds and interest from securities			14	341,648	
	ntal income or (loss) from real estate					
	r-financed property.					
	debt-financed property					
	investment income.					
	or (loss) from sales of assets other than					
ınvent	•			18	202,331	
	come or (loss) from special events					
10 Gross 11 Other	profit or (loss) from sales of inventory revenue a					
	tal Add columns (b), (d), and (e).					
12 Subto	tai Add columns (b), (d), and (e)				546,935	
				13	2	546 935
13 Total (See v	. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu	lations)			3	546,935
13 Total (See v	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculars Relationship of Activities to the	lations) ie Accomplish	nment of Exem	pt Purposes		546,935
13 Total (See v	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu I-B Relationship of Activities to the	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935
13 Total (See v Part XV Line No.	Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calcu T-B Relationship of Activities to th Explain below how each activity for which the accomplishment of the foundation's ex	lations) IE Accomplish Income is report	nment of Exemed in column (e) c	pt Purposes If Part XVI-A contribu	ted importantly to	546,935

. (==	- 0,	
	Information Regarding Transfers To and Transactions and Relationships With Noncharitable	
	Exempt Organizations	

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash	es No
(1) Cash. 1a(1) (2) Other assets. 1a(2)	No
(2) Other assets	No
· · ·	
b Other transactions	No
tas of the state of	
(1) Sales of assets to a noncharitable exempt organization	No.
(2) Purchases of assets from a noncharitable exempt organization	No No
(4) Reimbursement arrangements	No
(5) Loans or loan guarantees	No
(6) Performance of services or membership or fundraising solicitations	No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received	
(a) Line No (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrange	ments
2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations	
described in section 501(c) (other than section 501(c)(3)) or in section 527?	
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 of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information which preparer has any knowledge	
Sign Here 2019-05-14 ***** May the IRS discurreturn with the preparer	
Signature of officer or trustee Date Title (see instr.)?	
Print/Type preparer's name Preparer's Signature Date Check if self-	1
Paid Preparer KRISTI L TAYLOR CPA employed ▶ □ Firm's name ▶ StahlbergTaylor & Associates PC employed ▶ □	
Use Only StahlbergTaylor & Associates PC Firm's name ► StahlbergTaylor & Associates PC	27335
Firm's address ► 100 Cooperative Way Suite 100	
Kalispell, MT 599012386 Phone no (406) 2	57-8399

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the tot	a
contributions received by the foundation before the close of any tax year (but only if they have contributed more	
than \$5,000).	

tha BRUCE ENNIS

MARGARET DAVIS

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

BIG SKY INSTITUTE FOR ADVANCEMNT OF PO BOX 1514 HELENA, MT 59624	N/A	N/A	GENERAL OPERATING ASSISTANCE	20,000
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·	·

PO BOX 1514 HELENA, MT 59624				
BOYS GIRLS CLUB OF THE FLTHD RSRVAT PO BOX 334 RONAN, MT 59864	N/A	N/A	GENERAL OPERATING ASSISTANCE	40,000
BOYS GIRLS CLUB NORTHERN	N/A	N/A	GENERAL OPERATING	50,000

PO BOX 334 RONAN, MT 59864				
BOYS GIRLS CLUB NORTHERN CHEYENNE N PO BOX 309 LAME DEER, MT 59043	N/A	N/A	GENERAL OPERATING ASSISTANCE	50,000

994,000

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

a Paid during the year				
CASA FOR KIDS - FLATHEAD COUNTY PO BOX 271 KALISPELL, MT 59903	N/A	N/A	GENERAL OPERATING ASSISTANCE	45,000
<u> </u>				

KALISPELL, MT 59903				
CASA FOR KIDS EASTERN MONTANA PO BOX 1234 MILES CITY, MT 59301	N/A	N/A	GENERAL OPERATING ASSISTANCE	30,000
YWCA OF BILLINGS	N/A	N/A	GENERAL OPERATING	40,000

PO BOX 1234 MILES CITY, MT 59301	N/A	N/A	ASSISTANCE	30,000
YWCA OF BILLINGS 909 WYOMING AVENUE BILLINGS, MT 59101	N/A	N/A	GENERAL OPERATING ASSISTANCE	40,000

MILES CITY, MT 59301				
YWCA OF BILLINGS 909 WYOMING AVENUE BILLINGS, MT 59101	N/A	N/A	GENERAL OPERATING ASSISTANCE	40,000
Total			▶ 3a	994,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

DEPAR 1035 1ST AVENUE WEST KALISPELL, MT 59901	N/A	N/A	ASSISTANCE	1,000
FLATHEAD COUNTY AGENCY ON AGING	N/A	N/A	GENERAL OPERATING	10,000

1 000

KALISPELL, MT 59901				
FLATHEAD COUNTY AGENCY ON AGING 160 KELLY ROAD A KALISPELL, MT 59901	N/A	N/A	GENERAL OPERATING ASSISTANCE	10,000
HOCKADAY MUSEUM OF ART	N/A	N/A	GENERAL OPERATING	1,000

160 KELLY ROAD A KALISPELL, MT 59901			ASSISTANCE	
HOCKADAY MUSEUM OF ART 302 2ND AVE E KALISPELL, MT 59901	N/A	N/A	GENERAL OPERATING ASSISTANCE	1,000

HOCKADAY MUSEUM OF ART 302 2ND AVE E KALISPELL, MT 59901	N/A	N/A	GENERAL OPERATING ASSISTANCE	1,000
Total			▶ 3a	994,000

Recipient If recipient is an individual, show any relationship to any foundation manager recipient Purpose of grant or contribution

Name and address (home or business)

Amount recipient

	or substantial contributor			
a Paid during the year				
NORTH VALLEY FOOD BANK INC PO BOX 142	N/A	N/A	GENERAL OPERATING ASSISTANCE	1,000

WHITEFISH, MT 59937				
SHEPHERD'S HAND CLINIC-CHRIST LUTHE 5150 RIVER LAKES PARKWAY	N/A	N/A	GENERAL OPERATING ASSISTANCE	1,000

LUTHE 5150 RIVER LAKES PARKWAY WHITEFISH, MT 59937			ASSISTANCE	
THE PARENTING PLACEPO BOX 3805 MISSOULA, MT 59806	N/A	N/A	GENERAL OPERATING ASSISTANCE	25,000

994,000

Total .

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

LAKECIDE MT E0022

Total .

a Paid during the year				
WEST SHORE COMMUNITY LIBRARY	N/A	N/A	GENERAL OPERATING	2,000

LAKESIDE, MI 59922				
WEST VALLEY SCHOOL 2290 FARM TO MARKET ROAD KALISPELL, MT 59901	N/A	N/A	GENERAL OPERATING ASSISTANCE	

WEST VALLEY SCHOOL 2290 FARM TO MARKET ROAD KALISPELL, MT 59901	N/A	N/A	GENERAL OPERATING ASSISTANCE	1,000
TAMARACK GRIEF RESOURCE CENTER	N/A	N/A	GENERAL OPERATING	25,000

KALISPELL, MT 59901			ASSISTANCE	
TAMARACK GRIEF RESOURCE CENTER 516 S ORANGE ST	N/A	N/A	GENERAL OPERATING ASSISTANCE	25,00

KALISPELL, MT 59901				
TAMARACK GRIEF RESOURCE CENTER 516 S ORANGE ST MISSOULA, MT 59801	N/A	N/A	GENERAL OPERATING ASSISTANCE	25,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year HUMAN THERAPY ON HORSEBACK N/A N/A GENERAL OPERATING 1,000

PO BOX 5565 KALISPELL, MT 59903			ASSISTANCE	
INTERMOUNTAIN HOMES 500 SOUTH LAMBORN HELENA, MT 59601	N/A	N/A	GENERAL OPERATING ASSISTANCE	2,000
OVERCOMER'S RECOVERY 1108 UTAH AVE LIBBY ASSMBLY OF GOD	N/A	N/A	GENERAL OPERATING ASSISTANCE	11,500

994,000

LIBBY, MT 59923

Total .

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Purpose of grant or contribution

Amount

a Paid during the year

N/A

HOPA MOUNTAIN FOUNDATION

Total . .

234 E BABCOCK SUITE E BOZEMAN, MT 59715			ASSISTANCE	
LAKESIDE QUICK RESPONSE UNIT	N/A	N/A	GENERAL OPERATING	2,000

l N/A

GENERAL OPERATING

▶ 3a

15,000

PO BOX 911 LAKESIDE, MT 59922	N/A	N/A	ASSISTANCE	2,000
YWCA OF HELENAPO BOX 518 HELENA, MT 59624	N/A	N/A	GENERAL OPERATING ASSISTANCE	25,000

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BOYS GIRLS OF THE HI-LINEPO BOX 68 N/A N/A 20,000 GENERAL OPERATING

HAVRE, MT 59501			ASSISTANCE	
BOYS AND GIRLS CLUB OF LEWISTOWN 134 PARK ST LEWISTOWN, MT 59457	N/A	N/A	GENERAL OPERATING ASSISTANCE	20,000
MONTANA YOUTH HOMES	N/A	N/A	GENERAL OPERATING	25,000

134 PARK ST LEWISTOWN, MT 59457			ASSISTANCE	
MONTANA YOUTH HOMES 825 E OREGON KALISPELL, MT 59901	N/A	N/A	GENERAL OPERATING ASSISTANCE	25,000

Total .

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

a Paid during the year				
THE LIGHTHOUSE CHRISTIAN HOME PO BOX 8931 KALISPELL, MT 59904	N/A	N/A	GENERAL OPERATING ASSISTANCE	3,000
MONTANA NONPROFIT ASSOCIATION	N/A	N/A	GENERAL OPERATING	30,000

MONTANA NONPROFIT ASSOCIATION PO BOX 1744 HELENA, MT 59624	N/A	N/A	GENERAL OPERATING ASSISTANCE	30,000
FAMILY PROMISE OF MISSOULA PO BOX 5882	N/A	N/A	GENERAL OPERATING ASSISTANCE	25,000

PO BOX 1744 HELENA, MT 59624			ASSISTANCE	
FAMILY PROMISE OF MISSOULA PO BOX 5882 MISSOULA, MT 59806	N/A	N/A	GENERAL OPERATING ASSISTANCE	25,000
Total			▶ 3a	994,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
NAMI MONTANA 616 HELENA AVE SUITE 218 HELENA, MT 59601	N/A	N/A	GENERAL OPERATING ASSISTANCE	35,000

HELENA, MT 59601				
ST MATTHEWS602 S MAIN ST KALISPELL, MT 59901	N/A	N/A	GENERAL OPERATING ASSISTANCE	1,000
FRONT RANGE CASAPO BOX 954	N/A	N/A	GENERAL OPERATING	25,000

KALISPELL, MT 59901	1974	IV/A	ASSISTANCE	1,000
FRONT RANGE CASAPO BOX 954 CONRAD, MT 59425	N/A	N/A	GENERAL OPERATING ASSISTANCE	25,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

Total .

a Paid during the year				
SPARROW'S NEST204 7TH AVE WEST KALISPELL, MT 59901	N/A	N/A	GENERAL OPERATING ASSISTANCE	25,000

MONTANA ORAL HEALTH FOUNDATION PO BOX 1154 HELENA, MT 59624	N/A	N/A	GENERAL OPERATING ASSISTANCE	
BOYS AND GIRLS CLUB OF GLACIER	N/A	N/A	GENERAL OPERATING	

HELENA, MT 59624				
BOYS AND GIRLS CLUB OF GLACIER COUN PO BOX 961 KALISPELL.MT 59904	N/A	N/A	GENERAL OPERATING ASSISTANCE	80,000

1,000

HELENA, MT 59624				
BOYS AND GIRLS CLUB OF GLACIER COUN PO BOX 961 KALISPELL, MT 59904	N/A	N/A	GENERAL OPERATING ASSISTANCE	80,0

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
PIEGAN INSTITUTEPO BOX 890 BROWNING, MT 59417	N/A	N/A	GENERAL OPERATING ASSISTANCE	30,000

FAMILIES IN PARTNERSHIPPO BOX 762 LIBBY, MT 59923	N/A	N/A	GENERAL OPERATING ASSISTANCE	
ROCKY BOY VETERANS CENTER	N/A	N/A	GENERAL OPERATING	

LIBB1, MI 39923			ASSISTANCE	
ROCKY BOY VETERANS CENTER PO BOX 544	N/A	N/A	GENERAL OPERATING ASSISTANCE	10,0
BOX ELDER, MT 59521				

ROCKY BOY VETERANS CENTER PO BOX 544 BOX ELDER, MT 59521	N/A	N/A	GENERAL OPERATING ASSISTANCE	10,000

35,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

or substantial contributor

Total .

a Paid during the year				
GLACIER NATIONAL PARK CONSERVANCY PO BOX 2749 COLUMBIA FALLS, MT 59912	N/A	N/A	GENERAL OPERATING ASSISTANCE	1,000

COLUMBIA FALLS, MT 59912				
SAMARITAN HOUSE124 9TH AVE WEST KALISPELL, MT 59901	N/A	N/A	GENERAL OPERATING ASSISTANCE	1
YOUNG PARENTS EDUCATION CENTER	N/A	N/A	GENERAL OPERATING	20

KALISPELL, MT 59901	N/A	N/A	ASSISTANCE	1,000
YOUNG PARENTS EDUCATION CENTER 1400 CENTRAL AVE GREAT FALLS, MT 59401	N/A	N/A	GENERAL OPERATING ASSISTANCE	20,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

/				
BIG BROTHERS BIG SISTERS FLATHEAD V 137 S MAIN ST C KALISPELL, MT 59901	N/A	N/A	GENERAL OPERATING ASSISTANCE	20,000
SEVENTH GENERATION FUND	N/A	N/A	GENERAL OPERATING	1 000

KALISPELL, MT 59901				
SEVENTH GENERATION FUND YELLOWBIRD PO BOX 4569 ARCATA, CA 95518	N/A	N/A	GENERAL OPERATING ASSISTANCE	1,000
ABBIE SHELTERPO BOX 1401	N/A	N/A	GENERAL OPERATING	4,000

PO BOX 4569 ARCATA, CA 95518				
ABBIE SHELTERPO BOX 1401 KALISPELL, MT 59903	N/A	N/A	GENERAL OPERATING ASSISTANCE	4,000

994,000

ARCATA, CA 95518				
ABBIE SHELTERPO BOX 1401 KALISPELL, MT 59903	N/A	N/A	GENERAL OPERATING ASSISTANCE	4,00

Total .

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor

Purpose of grant or contribution

recipient

FAMILY PROMISEPO BOX 455 GREAT FALLS, MT 59403	N/A	N/A	GENERAL OPERATING ASSISTANCE	25,000
CHILD BRIDGEPO BOX 310 BIGFORK, MT 59911	N/A	N/A	GENERAL OPERATING ASSISTANCE	3,000
a Faid during the year				

GREAT FALLS, MT 59403	147	N/ C	ASSISTANCE	23,000
FLORENCE CRITTENTON HOME SERVICES 901 HARRISON HELENA, MT 59601	N/A	N/A	GENERAL OPERATING ASSISTANCE	30,000

Total .

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year FLATHEAD FOOD BANK N/A N/A GENERAL OPERATING 1.000 1203 HWY 2 WEST ASSISTANCE KALISPELL MT 50001

KALISI EEE, MT 33301				
CENTER FOR RESTORATIVE YOUTH JUSTIC 29 3RD ST E KALISPELL, MT 59901	N/A	N/A	GENERAL OPERATING ASSISTANCE	15,000
COMMUNITY LEADERSHIP DEVELOPMENT IN	N/A	N/A	GENERAL OPERATING ASSISTANCE	2,000

Ш	29 3RD ST E KALISPELL, MT 59901			ASSISTANCE	
	COMMUNITY LEADERSHIP DEVELOPMENT IN 109 1/2 32ND STREET	N/A	N/A	GENERAL OPERATING ASSISTANCE	2,000

Total . .

KALISPELL, MT 59901				
COMMUNITY LEADERSHIP DEVELOPMENT IN 109 1/2 32ND STREET BILLINGS, MT 59102	N/A	N/A	GENERAL OPERATING ASSISTANCE	2,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
FAMILY SERVICES1924 1ST AVE N BILLINGS, MT 59101	N/A	N/A	GENERAL OPERATING ASSISTANCE	1,500

BILLINGS, MT 59101			ASSISTANCE	
TUMBLEWEED505 N 24TH ST BILLINGS, MT 59101	N/A	N/A	GENERAL OPERATING ASSISTANCE	1,500
ST VINCENT DE PAUL	N/A	N/A	GENERAL OPERATING	3.000

BILLINGS, MT 59101	TVA	INA	ASSISTANCE	1,500
ST VINCENT DE PAUL 3005 1ST AVE SOUTH BILLINGS, MT 59101	N/A	N/A	GENERAL OPERATING ASSISTANCE	3,000

BILLINGS, TH SSIGI			7,331317,11462	
ST VINCENT DE PAUL 3005 1ST AVE SOUTH BILLINGS, MT 59101	N/A	N/A	GENERAL OPERATING ASSISTANCE	3,000
Total				994,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year BOYS AND GIRLS CLUB CARBON N/A N/A GENERAL OPERATING 15.000

COUNTY PO BOX 11 RED LODGE, MT 59068			ASSISTANCE	
BOYS AND GIRLS CLUB OF THE MONDAK 201 3RD AVE SE	N/A	N/A	GENERAL ADMINISTRATIVE ASSISTANCE	10,000

BOYS AND GIRLS CLUB OF THE MONDAK 201 3RD AVE SE SIDNEY, MT 59270	N/A	N/A	GENERAL ADMINISTRATIVE ASSISTANCE	10,000
MT CASAGAL ASSOCIATION PO BOX 1234	N/A	N/A	GENERLA ADMINISTRATIVE SUPPORT	30,000

Total			▶ 3a	994,000
MT CASAGAL ASSOCIATION PO BOX 1234 MILES CITY, MT 59301	N/A	N/A	GENERLA ADMINISTRATIVE SUPPORT	30,000
201 3RD AVE SE SIDNEY, MT 59270				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

CASA LINCOLN COUNTYPO BOX 11195 KALISPELL, MT 59901	N/A	N/A	GENERAL ADMINISTRATIVE SUPPORT	20,000
CASA OF LAKE AND SANDERS COUNTIES PO BOX 511 POLSON, MT 59860	N/A	N/A	GENERAL ADMINISTRATIVE SUPPORT	5,000
BOYS AND GIRLS CLUB OF CASCADE	N/A	N/A	GENERAL ADMINISTRATIVE	20,000

PO BOX 511 POLSON, MT 59860				
BOYS AND GIRLS CLUB OF CASCADE COUN 600 1ST AVE SW GREAT FALLS, MT 59404	N/A	N/A	GENERAL ADMINISTRATIVE SUPPORT	20,000

PO BOX 511 POLSON, MT 59860				
BOYS AND GIRLS CLUB OF CASCADE COUN 600 1ST AVE SW GREAT FALLS, MT 59404	N/A	N/A	GENERAL ADMINISTRATIVE SUPPORT	20,000
Total			▶ 3a	994,000

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year

HEISEY COMMUNITY CENTER 313 7TH ST N GREAT FALLS, MT 59401	N/A	N/A	GENERAL ADMINISTRATIVE SUPPORT	15,000
TROY SCHOOL DISTRICTNEW	N/A	N/A	GENERAL ADMINISTRATIVE	29,000

HORIZONS 116 E MISSOULA AVE TROY, MT 59935	N/A	N/A	SUPPORT	29,000
MUSEUM AT CENTRAL SCHOOL	N/A	N/A	GENERAL ADMINISTRATIVE	1,500

116 E MISSOULA AVE TROY, MT 59935				
MUSEUM AT CENTRAL SCHOOL 124 2ND AVE E KALISPELL, MT 59901	N/A	N/A	GENERAL ADMINISTRATIVE SUPPORT	1,500

994,000

124 2ND AVE E SUPPORT	TRUT, MI 39933			1
KALISI ELE, MI 33301		N/A	N/A	1,50

Total .

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution

Name and address (home or business)	any foundation manager or substantial contributor	recipient		
a Paid during the year				
CASTING FOR RECOVERY	N/A	N/A	GENERAL ADMINISTRATIVE	2,000

109 EAST OAK ST STE 1G BOZEMAN, MT 59715	IN/A	IN/A	SUPPORT	2,000
FARMERS FOR THE FUTURE	N/A	N/A	GENERAL ADMINISTRATIVE	1,000

BOZEMAN, MT 59715				
FARMERS FOR THE FUTURE 400 VETERANS DR COLUMBIA FALLS, MT 59912	N/A	N/A	GENERAL ADMINISTRATIVE SUPPORT	
FAMILY SUPPORT NETWORK	N/A	N/A	GENERAL ADMINISTRATIVE	

400 VETERANS DR COLUMBIA FALLS, MT 59912			SUPPORT	
FAMILY SUPPORT NETWORK 1002 10TH ST SUITE 1 BILLINGS, MT 59102	N/A	N/A	GENERAL ADMINISTRATIVE SUPPORT	3,000

COLOMBIA FALLS, PH 39912					
FAMILY SUPPORT NETWORK 1002 10TH ST SUITE 1 BILLINGS, MT 59102	N/A	N/A GENERAL ADMINISTRATIVE SUPPORT		3,000	
Total			▶ 3a	994,000	

efile GRAPHIC print - DO NOT PR	ROCESS As Filed D	Data -	DI	N: 93491134038809				
TY 2018 Accounting Fees Schedule								
Name: ORO Y PLATA FOUNDATION								
EIN: 46-0512750								
Software ID: 18007218								
Software Version: 2018v3.1								
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes				
	2,669	801	0	1,868				

Note: To capture the full content of this document, please select landscape mode (11" \times 8.5") when printing.									
TY 2018 Depreciation Schedule									
		Name:	ORO Y PLATA F	OUNDATION					
		EIN:	46-0512750						
	So	ftware ID:	18007218						
	Software	e Version:	2018v3.1						
	Deprecia	ation Schedule							4
Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included

11 52 %

178

1,278 200DB

DLN: 93491134038809

2014-03-05

1,545

MAC COMPUTER

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491134038809
TY 2018 Investments Corpora	te Stock Sched	ule	
Name:	ORO Y PLATA FOU	NDATION	
EIN:	46-0512750		
Software ID:	18007218		
Software Version:	2018v3.1		
Investments Corporation Stock Schedule			

Investments Corporation Stock Schedule					
Name of Stock		End of Year Book Value	End of Year Fair Market Value		
DAIN RAUSCHER ACCOUNT		2,544,284	2,478,390		
TIFF MUTUAL FUNDS		6,175,516	5,308,568		

efile GRAPHIC print - DO NOT PROC	ESS As Filed Da	ta -	DLI	N: 93491134038809
TY 2018 Land, Etc. Schedule				
N an	ne: ORO Y PLATA	FOUNDATION		
E	IN: 46-0512750			
Software	ID: 18007218			
Software Versi	on: 2018v3.1			
Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value

1,456

89

1,545

Machinery and Equipment

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	I: 93491134038809	
TY 2018 Other Expenses Schedule					
I					
Name: ORO Y PLATA FOUNDATION					
EIN:	46-0512750				
Software ID:	oftware ID: 18007218				
Software Version: 2018v3.1					
Other Expenses Schedule					
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
ANNUAL FILING FEES	120	36		84	
BANK WIRE FEES/CHECKS	39	12		27	
COMPUTER SUPPORT	60	18		42	
DUES & SUBSCRIPTIONS	7,097	2,129		4,968	

1,200

1,200

INSURANCE

POSTAGE

MISCELLANEOUS

OFFICE SUPPLIES

SPONSORSHIP

TELEPHONE/INTERNET

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491134038809		
TY 2018 Other Increases Schedule					
Name:	ORO Y PLATA	FOUNDATION			
EIN:	46-0512750				
Software ID:	18007218				
Software Version:	2018v3.1				
De	escription		Amount		
NONDIVIDEND DISTRIBUTIONS			42,197		

efile GRAPHIC print - DO NOT PROCES	SS As Filed Data	-	DLN	N: 93491134038809	
TY 2018 Other Professional Fees Schedule					
Nar	me: ORO Y PLATA	A FOUNDATION			
E	IN: 46-0512750	: 46-0512750			
Software ID: 18007218					
Software Version: 2018v3.1					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
GRANT CONSULTING FEES	2,000	600	0	1,400	
OUTSIDE SERVICES	559	168	0	391	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data		DLI	N: 93491134038809
TY 2018 Taxes Schedule				
Name:	ORO Y PLAT	A FOUNDATION		
EIN: 46-0512750				
Software ID: 18007218				
Software Version: 2018v3.1				
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
2017 FEDERAL EXCISE TAX	18,457	18,457	,	12,920
PAYROLL TAXES	4,951	1,485		3,466
WORKERS COMPENSATION	521	156		365