Form **990-PF** Department of the Treasury Internal Revenue Service **Return of Private Foundation**

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.

, [0]	CAICI	idal year 2010 of tax year degilling	- <u></u>	, and ¢	y		-
Na	ne of	f foundation .				A Employer identification	number
10	, TTC	HANAN FAMILY FOUNDATION	T			46-1187037	,
_	_	and street (or P O box number if mail is not delivered to street			Room/suite	B Telephone number	
		BOX 1643	•			406-761-77	143
_		own, state or province, country, and ZIP or foreign p	onetal code			C If exemption application is p	
	,	AT FALLS, MT 59403	JUSIAI CUUE		τ	o if exemption application is p	bending, check here
		all that apply: Initial return	Initial return of a f	ormer public o	harity	D 1. Foreign organizations	s, check here
•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Final return	Amended return	ormor public (,,,,,,,,,	, roroign organizations	or one on the contract of the
		Address change	Name change	ē		Foreign organizations me check here and attach co	eeting the 85% test,
н (Check	type of organization: 'X Section 501(c)(3) ex			<u> </u>	E If private foundation sta	•
Ë	_		Other taxable private found	ation	`	under section 507(b)(1)	
1 F:		arket value of all assets at end of year J + Account		Accr	ual	F If the foundation is in a	•
			ther (specify)			under section 507(b)(1)	
	\$.		nn (d) must be on cash bas	ıs.)			
P	ırt l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements
_		→ (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	` inc		income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc , received	20691.	1 2 4 1 1 2 5 5	學的研究	WARREN N/AREARES	學與功能行為強強的
	2	Check if the foundation is not required to attach Sch. B	製造した。日本では、	小學的學家	ができる。	世界的學學的學	計算以時代的語言
	3	Interest on savings and temporary cash investments	37.		37.		STATEMENT 14
	4	Dividends and interest from securities	2414.		2414.	-	STATEMENT 2 4
	5a	Gross rents					为这个意思的思想的
	Ь	Net rental income or (loss)	阿尔克里 等於此樣		由的超到自	學學的學學	學是一種的學習
Cas .	6a	Net gain or (loss) from sale of assets not on line 10		T. O. Land The	是快烈工工	《他的图》	国共和国研究(1974年)
Ž	b	Gross sales price for all assets on line 6a	安国的教授。他们成	"是"	种层层的数	246年10年10年10年10年10年10年10年10年10年10年10年10年10年	学和创新的
Ğ;	7	Capital gain net income (from Part IV, line 2)	行言語の記憶を対す		0.	門本學的學科學科學	全部等的特別的。因此
∃N∺કં∨ર્ક્લપ્રહ	8	Net short-term capital gain	经理机的工作证据	经的证明			MAN CANDING THE
П	9	Income modifications	自由於江湖中央部沿湖	海路情報			海黑江南的中的小岛岛
<u> </u>	10a	Gross sales less returns and allowances	(学型性证的形式) [2]等	The Control		。推荐高级历史公司全局	
ĄP	Ь	Less Cost of goods sold	是这种 建二种医疗		海沟强制	创建的价格设计。这是	
ž	C	Gross profit or (loss)		學感嫌	通知。 通過		A THE STATE OF THE
63	11	Other income					とはないようにあっていることできます。
<u>(2)</u>	12	Total. Add lines 1 through 11	23142.		2451.		河南南河南南河南南
2019	13	Compensation of officers, directors, trustees, etc	0.		0.		0.
Ö	14	Other employee salaries and wages					
ø	15	Pension plans, employee benefits				,	
ıse	1	Legal fees	475.		475.		0.
ē		Accounting fees STMT 3	4/5.	. !	4/5.		0.
ũ	ı	Other professional fees RECEIVED					
Ę	17		92.	7.	72.		0.
Operating and Administrative Expens	18	Taxes STMT 4	92.	<u> </u>	14.		工程等等 空網立門時
Ë	19	Depreciation and poletioMAR 1 8 2019	 			 	74 6 X) 21 27 3 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Ę	20	Occupancy	<u> </u>				
Þ	21	Travel, conferences, and meetings. Printing and publications.					
e L	22	Trinding and pablications	20.		20.		0.
tino	23	•	20.		20.		<u> </u>
era	24	Total operating and administrative expenses. Add lines 13 through 23	587.	•	567.		0.
Ö	25	Contributions, gifts, grants paid	19000.	1 7 2 7 7 4 1 1 7	<u> </u>	李帝是人为李雄	19000.
		Total expenses and disbursements.	1,5000.	- · · · · · · · · · · · · · · · · · · ·		3. 27 2 3 2 3 4 5 4 5 5 4 5 5 5 5 5 5 5 5 5 5 5 5 5	23000
	26	Add lines 24 and 25	19587.		567.		19000.
_	27	Subtract line 26 from line 12:	1,507.	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	TOTAL SECTION AND ASSESSMENT	THE THE PROPERTY OF THE PARTY O
		Excess of revenue over expenses and disbursements	3555.				
	1	Net investment income (if negative, enter -0-)		22 Take 1	1884.	William Statement	新工作的企业的企业
	1	Adjusted net income (if negative, enter -0-)	では、大学などないない	"花"、"清新	Silent Mary 12	N/A	MAKENST ATAIN
8225		2-11-18 LHA For Paperwork Reduction Act Notic					Form 990-PF (2018)
0235	U 1 12	L. '' \	v 000 moneyhono.				

F	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Deginning of year	Elid Ol	
<u> </u>		Colonin Should be for end-or-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	3989.	7528.	<u>7528.</u>
	2	_ · · · · · · · · · · · · · · · · · · ·			
	3	Accounts receivable ► 317.			
		Less: allowance for doubtful accounts	287.	317.	317.
	4	Pledges receivable ►			
		Less. allowance for doubtful accounts ▶	[.		
	5	Grants receivable		1	
	6	Receivables due from officers, directors, trustees, and other			
	1	disqualified persons			
	7	Other notes and toans receivable			···
	'	Less: allowance for doubtful accounts			
ر م	8	Inventories for sale or use			
Assets	"	Prepaid expenses and deferred charges			
Ass	10-	Investments - U.S. and state government obligations			
	1	_ <u>-</u> -	CEOAE	E0100	E0100
		Investments - corporate stock STMT 6	65845.	58189.	<u>58189.</u>
	1	Investments - corporate bonds STMT 7	24237.	23757.	23757.
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment: basis ▶	•		,
		Less accumulated depreciation			
	15	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	94358.	89791.	<u>89791.</u>
,	17	Accounts payable and accrued expenses			
	18	Grants payable			
Ś	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			. ·
abi	21	Mortgages and other notes payable			
ت	22	Other liabilities (describe		-	, , , , , , , , , , , ,
	23	Total liabilities (add lines 17 through 22)	0.	0.	
	<u> </u>	Foundations that follow SFAS 117, check here			-
	1	and complete lines 24 through 26, and lines 30 and 31			
es	24	Unrestricted			<i>2</i>
Š	25	Temporarily restricted			* · · · · · · · · · · · · · · · · · · ·
a	1	· · · · ·			
9	20	Permanently restricted Foundations that do not follow SFAS 117, check here			·
ڃ	1	• • • • • • • • • • • • • • • • • • • •		1	
<u>5</u>		and complete lines 27 through 31.	04350	89791.	
Net Assets or Fund Balances	27	Capital stock, trust principal, or current funds	94358.		
SSE	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ţ	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
ž	30	Total net assets or fund balances	94358.	89791.	***
					•
	31	Total liabilities and net assets/fund balances	94358.	<u>89791.</u>	
P	art	III Analysis of Changes in Net Assets or Fund Bal	ances		
<u></u>		<u></u>			
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 30)		
	(mus	t agree with end-of-year figure reported on prior year's return)	•	1	94358.
2	Enter	amount from Part I, line 27a		2	3555.
		increases not included in line 2 (itemize)		3	0.
		ines 1, 2, and 3		4	97913.
		eases not included in line 2 (itemize) <u>UNREALIZED G/L</u>	ON INVESTMENTS		8122.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu		6	89791.
<u> </u>		The transport of the tr			Form 990-PF (2018)

3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years

4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5

5 Multiply line 4 by line 3

6 Enter 1% of net investment income (1% of Part I, line 27b)

7 Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

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.

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.089078

90396.

8052.

8071.

19000.

19.

3

5

6

7

	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 -	1870 see in			Page 4
	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1				
ı a	Date of ruling or determination letter				
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%				19.
U	of Part I, line 27b				1).
•	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).				
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)				0.
	Add lines 1 and 2				19.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)				0.
5	Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-				<u>19.</u>
6	Credits/Payments:				<u> </u>
	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 0.				
	Exempt foreign organizations - tax withheld at source 6b 0.				
	Tax paid with application for extension of time to file (Form 8868) 6c 0.				
	Backup withholding erroneously withheld 6d 0.				
	Total credits and payments. Add lines 6a through 6d				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8				0.
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			-	19.
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				<u> </u>
	Enter the amount of line 10 to be: Credited to 2019 estimated tax				
	rt VII-A Statements Regarding Activities				
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in			Yes	No
	any political campaign?	<u> </u>	1a		X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	_	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	ļ			
	distributed by the foundation in connection with the activities.				
	Did the foundation file Form 1120-POL for this year?	İ	1c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 .				
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	managers. ►\$ 0.				
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	L	2		X
	If "Yes," attach a detailed description of the activities.				
3	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? If "Yes," attach a conformed copy of the changes	L	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	L	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	A L	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	L	5		<u> </u>
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or	1			
	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?	L	6		_X_
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	L	7	_X_	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. NONE				
	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? If "No," attach explanation	 	8b	<u>X</u>	<u> </u>
	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 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV	 -	9		<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		10 000	, DE	<u>X</u>
		Form	33 (,-rr	(2018)

Pa	int VII-A Statements Regarding Activities (continued)	1		
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	l		
	section 512(b)(13)? If "Yes," attach schedule See instructions	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	١.,		7,
	If "Yes," attach statement. See instructions	12	v	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	l
	Website address ► N/A The books are in care of ► CHARLIE M. BYRNE Telephone no. ► 406-76	1 7	7/2	
14			143	
4-	Located at ► PO BOX 1643, GREAT FALLS, MT Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	7403		$\overline{\Box}$
15	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	ш
10	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
10	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	١.,		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected	1		Х
_	before the first day of the tax year beginning in 2018? There are follows to distribute present (centre) 4043) (does not apply for years the foundation was a private operating foundation.	10	-	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
,	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
a	before 2018?			
	If "Yes," list the years \			
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
-	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after	1		
	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 2018.) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	۱.,		v
	had not been removed from jeopardy before the first day of the tax year beginning in 2018?	<u> 4b</u> orm 99 ()_DE	(2019)
	FC	iiii 33()-FF	(ZV IØ)

Form **990-PF** (2018)

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

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Hig Paid Employees, and Contractors (continued)	jhly	,	
3 Five highest-paid independent contractors for professional services. If none, enter "NONE."			
(a) Name and address of each person paid more than \$50,000 (b) Type of	service	(c) Comp	pensation
NONE			
		-	
			_
Total number of others receiving over \$50,000 for professional services	-	<u> </u>	0
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	
1 N/A			
2			
3			
4			
Part IX-B Summary of Program-Related Investments			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.		Amount	
1 N/A			
2			
All other program-related investments See instructions.			
3			
Total. Add lines 1 through 3	•		0.
		Form 990-P	F (2018)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndatior	ns, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	86014.
b	Average of monthly cash balances	1b	5759.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	91773.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	li	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	91773.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1377.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	90396.
6	Minimum investment return. Enter 5% of line 5	6	4520.
P	art XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations an	id certa	ın
	foreign organizations, check here 🕨 🔛 and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	4520.
2a	Tax on investment income for 2018 from Part VI, line 5	1	
b	Income tax for 2018. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	<u>19.</u>
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	4501.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	4501.
6	Deduction from distributable amount (see instructions)	6	0.
<u>7</u>	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	4501.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes.		
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	19000.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	,	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	19000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	<u> 19.</u>
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	18981.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies	for the section
	4940(e) reduction of tax in those years.		222 27

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				4501.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			0.	, <u> </u>
b Total for prior years:		0		
3 Excess distributions carryover, if any, to 2018:		0.		<u> </u>
a From 2013 2610.				
b From 2014 2269.				
c From 2015 4529.				
d From 2016 4881.				
e From 2017 4696.				
f Total of lines 3a through e	18985.			
4 Qualifying distributions for 2018 from				
Part XII, line 4: ►\$ 19000.			,	
a Applied to 2017, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2018 distributable amount				4501.
e Remaining amount distributed out of corpus	14499.			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	33484.			-
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
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		0.		
d Subtract line 6c from line 6b. Taxable			· · · · · · · · · · · · · · · · · · ·	
amount - see instructions		0.		
e Undistributed income for 2017. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2019				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2013				
not applied on line 5 or line 7	2610.			
9 Excess distributions carryover to 2019				
Subtract lines 7 and 8 from line 6a	30874.			
10 Analysis of line 9:				
a Excess from 2014 2269.				
b Excess from 2015 4529 .				
c Excess from 2016 4881.				
d Excess from 2017 4696.				
e Excess from 2018 14499.				
				Form 990-PE (2019)

Form 990-PF (2018) BUCHANA Part XIV Private Operating F	N FAMILY FO		I.A. question 9)	46-11 N/A	87037 Page 10
			II-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo b Check box to indicate whether the found			in section	4942(j)(3) or 49	942(_J)(5)
2 a Enter the lesser of the adjusted net	Tax year	y louridation described	Prior 3 years	4342())(0) UI	1
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
investment return from Part X for	(4) - 5 - 5	(-)	(-)	ļ	· · · · · · · · · · · · · · · · · · ·
each year listed b 85% of line 2a					
				-	
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:					
a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross					
investment income (interest,				`	
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income			if the - feet and - 4 in m	h = d &E 000 == ==	
Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	nad \$5,000 or mo	ore in assets
at any time during t		uctions.)			
1 Information Regarding Foundation				face dates a bafass the ale	
a List any managers of the foundation wh year (but only if they have contributed r			tributions received by the	Touridation before the cio	SE OI AIIY IAX
NONE					
b List any managers of the foundation wh other entity) of which the foundation ha			(or an equally large portion	on of the ownership of a p	artnership or
NONE				<u> </u>	
2 Information Regarding Contribut	ion, Grant, Gift, Loan,	Scholarship, etc., P	rograms:		
Check here X if the foundation of the foundation makes gifts, grants, etc.,	only makes contributions to individuals or organiza	o preselected charitable	organizations and does r	not accept unsolicited requal b, c, and d.	ests for funds. If
a The name, address, and telephone num					
b The form in which applications should to	oe submitted and informat	ion and materials they s	should include:		
c Any submission deadlines:					
d Any restrictions or limitations on award	s, such as by geographica	Il areas, charitable fields	, kinds of institutions, or o	other factors:	*

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation status of Purpose of grant or show any relationship to Amount contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year GENERAL OPERATING CHILD BRIDGE P.O. BOX 310 500. BIGFORK, MT 59911 GENERAL OPERATING CITIZENS FOR A BETTER FLATHEAD P.O.BOX 10518 KALISPELL, MT 59901 100. EAGLE MOUNT GENERAL OPERATING P.O. BOX 2866 GREAT FALLS, MT 59403 150. FLATHEAD FOOD BANK GENERAL OPERATING 1203 HWY 2 W, STE 2 300. KALISPELL, MT 59901 GENERAL OPERATING FLATHEAD VALLEY CRIMESTOPPERS P.O. BOX 1719 50. KALISPELL MT 59901 SEE CONTINUATION SHEET(S) ▶ 3a 19000. Total b Approved for future payment NONE **▶** 3b Total

Excluded by section 512, 513, or 514

Unrelated business income

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.		ed business income		uded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
			 		
a		<u> </u>			
b	ŀ		 		
<u> </u>	1		 		
a			1	 	
e			+		
			 		
g Fees and contracts from government agencies			 		
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash					2.7
investments	-		-		37.
4 Dividends and interest from securities			-		2414.
5 Net rental income or (loss) from real estate:	,		_		·-
a Debt-financed property		1	-		
b Not debt-financed property			ļ		
6 Net rental income or (loss) from personal					
property			<u> </u>		
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			ļ		
11 Other revenue:					
a			<u> </u>		
b					
C					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		0.	2451.
13 Total. Add line 12, columns (b), (d), and (e)				13	2451.
(See worksheet in line 13 instructions to verify calculation	ons.)				
Part XVI-B Relationship of Activit	ties to the Acc	omplishment of Ex	kemp	t Purposes	
Line No. Explain below how each activity for which	ch income is reported	ın column (e) of Part XVI-A	\ contri	buted importantly to the accom	plishment of
▼ the foundation's exempt purposes (other					
4 DIVIDEND INCOME HELI	PS PROVIDE	CASH FOR CO	NTR	IBUTIONS	
					<u> </u>
					_
		·-·-·			
	 				
	<u></u>				
				_ 	<u>-</u>

Form 990-I	PF (2018) BUCH<i>I</i>	ANAN FAMILY FOU	JNDATION	46-118	87037	' Pa	ıge 13
Part X		egarding Transfers to		nd Relationships With Nonch			×
1 Did th	ne organization directly or ind	rectly engage in any of the follo	wing with any other organization	on described in section 501(c)		Yes	No
(othe	r than section 501(c)(3) orga	nizations) or in section 527, rela	iting to political organizations?		1		
a Trans	sfers from the reporting found	fation to a noncharitable exempt	organization of:		İ		l
(1)	Cash				1a(1)		X
(2)	Other assets				1a(2)		X
	transactions:						
	Sales of assets to a noncharita	·			1b(1)		X
` '		oncharitable exempt organization	1		1b(2)		X
	Rental of facilities, equipment,				1b(3)	<u> </u>	X
	Reimbursement arrangements	3			1b(4)	-	<u> X</u>
	oans or loan guarantees				1b(5)		X
		embership or fundraising solicity			1b(6)		X
	-	ailing lists, other assets, or paid	-		1c		Х
				vays show the fair market value of the goods e in any transaction or sharing arrangement,		sets,	
		other assets, or services receive		e in any transaction of sharing arrangement,	, 5110W III		
(a) Line no	(b) Amount involved		able exempt organization	(d) Description of transfers, transactions, an	ud sharing an	zangeme	nts
<u> </u>	(-,	N/A	 				
		21,7 3	-		_		
• • • • • • • • • • • • • • • • • • • •							
							
	<u> </u>						
		· · · · · · · · · · · · · · · · · · ·					
			 				
			.				
		Alice (Closed control of the control		A described			
		tly affiliated with, or related to, o		ations described		X	مادا
		on 501(c)(3)) or in section 527?		· ·	Yes	لـهـ) NO
	s," complete the following sch (a) Name of orç		(b) Type of organization	(c) Description of relation	ishin		—
	N/A	guineasion	(b) Type of organization	(e) bestription of felation	p		
	N/A						
							
						-	
				 -			

May the IRS discuss this return with the preparer shown below? See instr Sign Here 9 URER X Yes Signature of officer or trustee Date Title Print/Type preparer's name Preparer's signature Date Check _____ if PTIN self- employed MAR - 9 2019 **Paid** P00039907 RANDAL J BOYSUN **Preparer** Firm's name ► DOUGLAS WILSON Firm's EIN ► 81-0446334 **Use Only** Firm's address ► 1000 FIRST AVENUE SOUTH GREAT FALLS, MT 59401 Phone no. 4067614645

declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge

Under penalties of perjury, I

and belief, it is the

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information.

Employer identification number

OMB No 1545-0047

BUCHANAN FAMILY FOUNDATION 46-1187037 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1 Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 if this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

BUCHANAN FAMILY FOUNDATION

46-1187037

Part i	Contributors (see instructions) Use duplicate copies of Part I if additions	al space is needed	
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE SB TRUST 439 GRAND AVE BIGFORK, MT 59911	\$ 20691.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occupiete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

BUCHANAN FAMILY FOUNDATION

46-1187037

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

Name of organization

Employer identification number

BUCHA	NAN FAMILY FOUNDATION			46-1187037					
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a)	through (a) and the following line or	ntry Ear arganizations						
	completing Part III, enter the total of exclusively religious, c	haritable, etc., contributions of \$1,000 or	r less for the year (Enter this info one	ce) ► \$					
· - · -	Use duplicate copies of Part III if additional	space is needed							
(a) No. from Part I	(b) Purpose of gift	urpose of gift (c) Use of gift		(d) Description of how gift is held					
}		(e) Transfer of gr	<u> </u>						
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee								
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held					
				· · · · · · · · · · · · · · · · · · ·					
-									
		(e) Transfer of gi	ft						
	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee								
}	Transferee's name, address, an	d ZIF + 4	nelationship of transfer to transfer ee						
(a) No. from	(h) Durnose of gift	(c) Use of gift	(d) Desc	cription of how gift is held					
Part I	(b) Purpose of gift (c) Use of g		(4) 500						
									
	(e) Transfer of gift								
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee						
Ì	Transfer of training actions of the								
									
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held					
Part I	(6), a.poss o, g			·					
}		(e) Transfer of gift							
	हिं। संवाजन में भूति								
	Transferee's name, address, an	d ZIP + 4	Relationship of transferor to transferee						
ļ									
•		_							

FORM 990-PF INTEREST ON S	AVINGS	S AND TEM	PORARY	CASH I	NVESTMENTS	STATEMENT 1
SOURCE				(B) VVESTMENT VCOME	(C) ADJUSTED NET INCOME	
WELLS FARGO		37.		37.		
TOTAL TO PART I, LINE 3			37.		37.	
FORM 990-PF DIVID	ENDS A	ND INTER	EST FR	OM SECUI	RITIES	STATEMENT 2
GROS SOURCE AMOU		CAPITAL GAINS DIVIDEND	R	(A) EVENUE ER BOOKS	(B) NET INVES MENT INCO	
WELLS FARGO 2	414.		0.	2414	241	4.
TO PART I, LINE 4 2	414.		0.	2414	241	4.
FORM 990-PF		ACCOUNTI	NG FEE	:S		STATEMENT 3
DESCRIPTION		(A) PENSES R BOOKS	NET I	B) NVEST- INCOME	(C) ADJUSTED NET INCOM	
ACCOUNTING FEES		475.		475.		0.
TO FORM 990-PF, PG 1, LN 1	6B	475.		475.		0.
FORM 990-PF		TAX	ES			STATEMENT 4
		(A) PENSES		B) NVEST-	(C) ADJUSTED	
DESCRIPTION		R BOOKS			NET INCOM	E PURPOSES
DESCRIPTION FEDERAL TAX FOREIGN TAX						PURPOSES 0. 0.

FORM 990-PF	OTHER EXPENSES			STATEMENT 5			
DESCRIPTION		(B) NET INVEST- MENT INCOME		(C) ADJUSTED NET INCOM		(D) CHARITABLE PURPOSES	
OFFICE SUPPLIES	20.		20.			0.	
TO FORM 990-PF, PG 1, LN 23	20.		20.			0.	
FORM 990-PF	CORPORAT	E STOCK	,		STATEMENT	6	
DESCRIPTION			вос	OK VALUE	FAIR MARKE VALUE	T	
ANADARKO PETROLEUM STOCK SPDR S&P 500 TRUST VANGUARD INTL EQTY ET INDEX E	FDS			1491. 30490. 26208.	14 304 262		
TOTAL TO FORM 990-PF, PART I	L, LINE 10B			58189.	581	89.	
	• ,	ř					
FORM 990-PF	CORPORAT	E BONDS			STATEMENT	7	
DESCRIPTION			вос	OK VALUE	FAIR MARKE VALUE	a T	
DOUBLELINE FUNDS TRUST			•	23757;	237	57.	
TOTAL TO FORM 990-PF, PART II	I, LINE 10C			23757.	237	57.	

BUCHANAN FAMILY FOUNDATION

Part XV | Supplementary Information

Part XV Supplementary Informatio	n			·
3 Grants and Contributions Paid During the	Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient	Contribution	741100111
•				
FRIENDS OF BIGFORK FIRE DEPARTMENT			GENERAL OPERATING	
P.O. BOX 2333 BIGFORK MT 59911				
GREAT FALLS CENTRAL CATHOLIC HIGH			GENERAL OPERATING	
SCHOOL				
2800 18TH AVE SOUTH				200
GREAT FALLS, MT 59405				300.
GREAT FALLS RESCUE MISSION			GENERAL OPERATING	
P.O.BOX 129				
GREAT FALLS, MT 59403	<u> </u>			300.
			•	
INTERMOUNTAIN			GENREAL OPERATING	
500 S LAMBORN ST				
HELENA MT 59601				_1000.
MANNING FOUNDATION			GENERAL OPERATING	
401 13TH AVE SOUTH				
GREAT FALLS, MT 59405				100.
MONTANA COMMUNITY FOUNDATION FBO UM	.		JOHN AND SHEILA BUCHANAN FND. FBO OF U	
P.O. BOX 1145 HELENA, MT 59624	1		OF M SCHOOL OF	
			BUSINESS	
			ADMINISTRATION	1000.
VONTANA NA PROPERTO DE PARA DE LA CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DEL CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA DE LA CONTRA			DELIVEDAY OPERATIO	
MONTANA NARCOTICS OFFICERS ASSOCIATION	•		GENERAL OPERATING GENERAL OPERATING	
1420 MT HWY 35 SUITE #203				
KALISPELL MT 59901				100.
PARTNERSHIP FOR CHANGE			GENERAL OPERATING	
PO BOX 29455			SENERAL OF ERATING	
SAN FRANCISCO, CA 94429			,	1000.
	'			
CAMARYMAN MONOR	,		GENERAL OPERATING	
SAMARITAN HOUSE P.O. BOX 592			GENERAL OFERATING	
KALISPELL, MT 59903				300.
<u> </u>				
SPARROW'S NEST OF NW MONTANA P.O. BOX 8384			GENERAL OPERATING	
KALISPELL MT 59904				_500.
Total from continuation sheets				17900

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to status of recipient Amount any foundation manager Name and address (home or business) or substantial contributor UNIVERSITY OF MONTANA FOUNDATION SCHOOL OF BUSINESS P.O. BOX 7159 SCHOLARSHIP MISSOULA, MT 59807 2000. UNIVERSITY OF PROVIDENCE SCHOLARSHIP PROGRAM 1301 20TH AVE. SOUTH 1000. GREAT FALLS, MT 59405 YWCA MERCY HOME GENERAL OPERATING 220 2ND ST NORTH GREAT FALLS, MT 59401 200. BENEFIS FOUNDATION - PEACE HOSPICE GENERAL OPERATING P.O. BOX 7008 GREAT FALLS MT 59406 2000. BENEFIS FOUNDATION - SLETTEN CANCER GENERAL OPERATING INSTITUTE P.O. BOX 7008 GREAT FALLS, MT 59406 1000. NEIGHBORWORKS GREAT FALLS GENERAL OPERATING 509 1ST AVENUE S GREAT FALLS, MT 59401 5000. MONTANA FFA FOUNDATION GENERAL OPERATING 502 S 19TH AVE, SUITE 113 BOZEMAN, MT 59718 1000. DELIVERFUND GENERAL OPERATING 25 HIGHLAND PARK VILLAGE SUITE 100-851 DALLAS TX 75205 1000. Total from continuation sheets