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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.**

OMB No 1545-0052

2018

Open to Public Inspection

For calendar year 2018, or tax year beginning 01-01-2018 , and ending 12-31-2018

Name of foundation
BROWNING KIMBALL FOUNDATION
C/O FOUNDATION MANAGEMENT INC

A Employer identification number
94-2766079

Number and street (or P O box number if mail is not delivered to street address)
2932 NW 122ND ST

Room/suite

B Telephone number (see instructions)
(405) 755-5571

City or town, state or province, country, and ZIP or foreign postal code
OKLAHOMA CITY, OK 73120

C If exemption application is pending, check here ▶ ☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐
2 Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

I Fair market value of all assets at end of year (from Part II, col (c), *line 16)* ▶$ 21,434,885

J Accounting method ☐ Cash ☑ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))*

		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)				
	2 Check ▶ ☑ if the foundation is **not** required to attach Sch B				
	3 Interest on savings and temporary cash investments	166,561	166,561		
	4 Dividends and interest from securities	364,942	364,942		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	1,849,285			
	b Gross sales price for all assets on line 6a 5,476,848				
	7 Capital gain net income (from Part IV, line 2)		1,849,285		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 **Total.** Add lines 1 through 11	2,380,788	2,380,788		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)	125			
	b Accounting fees (attach schedule)	4,250			
	c Other professional fees (attach schedule)	229,882	103,433		126,449
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	56,556	5,537		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings	12,838			12,838
	22 Printing and publications				
	23 Other expenses (attach schedule)	540			
	24 **Total operating and administrative expenses.** Add lines 13 through 23	304,191	108,970		139,287
	25 Contributions, gifts, grants paid	858,135			858,135
	26 **Total expenses and disbursements.** Add lines 24 and 25	1,162,326	108,970		997,422
	27 Subtract line 26 from line 12				
	a **Excess of revenue over expenses and disbursements**	1,218,462			
	b **Net investment income** (if negative, enter -0-)		2,271,818		
	c **Adjusted net income** (if negative, enter -0-)				

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	755,241	833,329	833,329
	2 Savings and temporary cash investments			
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	12,807,390	13,379,972	13,379,972
	c Investments—corporate bonds (attach schedule)	5,513,586	7,221,584	7,221,584
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	15 Other assets (describe ▶ _____)			
	16 **Total assets** (to be completed by all filers—see the instructions Also, see page 1, item I)	19,076,217	21,434,885	21,434,885
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 **Total liabilities**(add lines 17 through 22)		0	
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.**			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ ☑ and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds	19,076,217	21,434,885	
	30 **Total net assets or fund balances** (see instructions)	19,076,217	21,434,885	
	31 **Total liabilities and net assets/fund balances** (see instructions)	19,076,217	21,434,885	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	19,076,217
2	Enter amount from Part I, line 27a	2	1,218,462
3	Other increases not included in line 2 (itemize) ▶ _____	3	1,140,206
4	Add lines 1, 2, and 3	4	21,434,885
5	Decreases not included in line 2 (itemize) ▶ _____	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	21,434,885

Part IV Capital Gains and Losses for Tax on Investment Income

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

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	See Additional Data Table			
b				
c				
d				
e				

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

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 }	2	1,849,285
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	4,940

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☑ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	1,041,285	22,101,489	0 047114
2016	1,106,117	20,894,170	0 052939
2015	903,353	20,593,658	0 043866
2014	876,277	20,476,391	0 042795
2013	890,334	18,355,292	0 048506

2	**Total** of line 1, column (d)	2	0 235220
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	3	0 047044
4	Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	21,979,774
5	Multiply line 4 by line 3	5	1,034,016
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	22,718
7	Add lines 5 and 6	7	1,056,734
8	Enter qualifying distributions from Part XII, line 4	8	997,422

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter _____ **(attach copy of letter if necessary–see instructions)**		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b	1	45,436
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	
3	Add lines 1 and 2	3	45,436
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-	5	45,436
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018 — 6a: 42,000		
b	Exempt foreign organizations—tax withheld at source — 6b:		
c	Tax paid with application for extension of time to file (Form 8868) — 6c: 8,000		
d	Backup withholding erroneously withheld — 6d:		
7	Total credits and payments Add lines 6a through 6d	7	50,000
8	Enter any **penalty** for underpayment of estimated tax Check here ☑ if Form 2220 is attached	8	439
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶	9	
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶	10	4,125
11	Enter the amount of line 10 to be **Credited to 2019 estimated tax** ▶ 4,125 **Refunded** ▶	11	

Part VII-A **Statements Regarding Activities**

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition)	1b		No
	*If the answer is "Yes" to **1a** or **1b**, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year **(1)** On the foundation ▶ $ _____ **(2)** On foundation managers ▶ $ _____			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ _____			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities*	2		No
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*	3		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T*	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes	
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*	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ UT			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? *If "No," attach explanation* .	8b	Yes	
9	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 taxable year beginning in 2018? See the instructions for Part XIV If "Yes," complete Part XIV	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*	10		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement See instructions	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶ WWW FMIOKC COM/CLIENTS/BROWNING-KIMBALL/

14 The books are in care of ▶ FOUNDATION MANAGEMENT INC Telephone no ▶ (405) 755-5571

Located at ▶ 1024 E BRITTON ROAD SUITE 200 OKLAHOMA CITY OK ZIP+4 ▶ 73131

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** —check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the year ▶ 15

16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16		No

See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes", enter the name of the foreign country ▶

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

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? ☐ Yes ☑ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☑ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☑ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☑ No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☑ No			
	(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). ☐ Yes ☑ No			
b	If any answer is "Yes" to 1a(1)–(6), did **any** of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?	1c		
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))			
a	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 before 2018? ☐ Yes ☑ No			
	If "Yes," list the years ▶ 20____ , 20____ , 20____ , 20____			
b	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)	2b		
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here ▶ 20____ , 20____ , 20____ , 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☑ No			
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 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).*	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b		No

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

			Yes	No
5a	During the year did the foundation pay or incur any amount to			
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☑ No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☑ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☑ No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? See instructions	☐ Yes ☑ No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☑ No		
b	If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance? See instructions	5b		
	Organizations relying on a current notice regarding disaster assistance check here ▶	☐		
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☐ Yes ☐ No		
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)			
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☑ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	6b		No
	If "Yes" to 6b, file Form 8870			
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☑ No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	7b		
8	Is the foundation subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment during the year?	☐ Yes ☑ No		

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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

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

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

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

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

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

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than $50,000	(b) Type of service	(c) Compensation
FOUNDATION MANAGEMENT INC 1024 E BRITTON ROAD SUITE 200 OKLAHOMA CITY, OK 73131	MANAGEMENT SVCS	117,449
DA DAVIDSON & COMPANY PO BOX 5015 GREAT FALLS, MT 59403	PORTFOLIO MGMT	103,432

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

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

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

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments See instructions 3	
Total. Add lines 1 through 3 . . . . . ▶	

Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations,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	21,520,206
b	Average of monthly cash balances	1b	794,285
c	Fair market value of all other assets (see instructions)	1c	0
d	**Total** (add lines 1a, b, and c)	1d	22,314,491
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	22,314,491
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	334,717
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	21,979,774
6	**Minimum investment return.** Enter 5% of line 5	6	1,098,989

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

1	Minimum investment return from Part X, line 6			1	1,098,989
2a	Tax on investment income for 2018 from Part VI, line 5	2a	45,436		
b	Income tax for 2018 (This does not include the tax from Part VI)	2b			
c	Add lines 2a and 2b			2c	45,436
3	Distributable amount before adjustments Subtract line 2c from line 1			3	1,053,553
4	Recoveries of amounts treated as qualifying distributions			4	
5	Add lines 3 and 4			5	1,053,553
6	Deduction from distributable amount (see instructions)			6	
7	**Distributable amount** as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1			7	1,053,553

Part 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	997,422
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	**Qualifying distributions.** Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	997,422
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 See instructions	5	
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4	6	997,422

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				1,053,553
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.			188,352	
b Total for prior years 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2018				
a From 2013.				
b From 2014.				
c From 2015.				
d From 2016.				
e From 2017.				
f **Total** of lines 3a through e.				
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ $ 997,422				
a Applied to 2017, but not more than line 2a			188,352	
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2018 distributable amount.				809,070
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2018				
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
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 —see instructions				
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				244,483
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 applied on line 5 or line 7 (see instructions) . . .				
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2014. . . .				
b Excess from 2015. . . .				
c Excess from 2016. . . .				
d Excess from 2017. . . .				
e Excess from 2018. . . .				

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. . . . . ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for 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					

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

1 Information Regarding Foundation Managers:

a 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))

BARBARA COWAN

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

2 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

KARI BLAKLEY REPRESENTATIVE
2932 NW 122ND ST SUITE D
OKLAHOMA CITY, OK 73120
(405) 755-5571

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

APPLICATION PACKAGE CONTAINS ALL REQUIREMENTS

c Any submission deadlines

LETTER OF INQUIRY DUE MARCH 1ST GRANT APPLICATIONS DUE JULY 12TH

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

N/A

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

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

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments. . . .					
3 Interest on savings and temporary cash investments			14	166,561	
4 Dividends and interest from securities. . . .			14	364,942	
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.					
6 Net rental income or (loss) from personal property					
7 Other investment income.					
8 Gain or (loss) from sales of assets other than inventory			18	1,849,285	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e). .				2,380,788	
13 **Total.** Add line 12, columns (b), (d), and (e).				**13**	2,380,788

(See worksheet in line 13 instructions to verify calculations)

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

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)

Part XVII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

		Yes	No
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	1a(1)		No
(2) Other assets	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
(3) Rental of facilities, equipment, or other assets	1b(3)		No
(4) Reimbursement arrangements	1b(4)		No
(5) Loans or loan guarantees	1b(5)		No
(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		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 arrangements

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? ☐ Yes ☑ No

b If "Yes," complete the following schedule

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

Sign Here

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

******	2019-11-13	******
Signature of officer or trustee	Date	Title

May the IRS discuss this return with the preparer shown below (see instr)? ☐ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☑	PTIN
WILLIAM J JOHNSON		2019-11-13		P01259854

Firm's name ▶ ROBISON GARY JOHNSON & ASSOCIATES PLLC — Firm's EIN ▶46-1765638

Firm's address ▶ 14220 BARBOUR AVE OKLAHOMA CITY, OK 73134 — Phone no (405) 507-3905

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

	List and describe the kind(s) of property sold (e g , real estate, **(a)** 2-story brick warehouse, or common stock, 200 shs MLC Co)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo , day, yr)	**(d)** Date sold (mo , day, yr)
1	PUBLICLY TRADED SECURITIES 9110	D	2018-09-19	2018-10-12
1	PUBLICLY TRADED SECURITIES 9110	D	2017-01-01	2018-12-31
	PUBLICLY TRADED SECURITIES 9110	D	2017-01-01	2018-12-31
	PUBLICLY TRADED SECURITIES 8550	D	2018-01-01	2018-12-31
	PUBLICLY TRADED SECURITIES 8550	D	2017-01-01	2018-12-31
	PUBLICLY TRADED SECURITIES 9092	D	2018-01-01	2018-12-31
	PUBLICLY TRADED SECURITIES 9092	D	2017-01-01	2018-12-31

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
100,707		100,762	-55
526,414		529,246	-2,832
18,891		18,891	
367,892		351,129	16,763
3,870,588		2,092,883	1,777,705
235,412		247,180	-11,768
343,609		287,472	56,137

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col (i) **(k)** over col (j), if any	
			-55
			-2,832
			16,763
			1,777,705
			-11,768
			56,137

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

(a) Name and address	Title, and average hours per week **(b)** devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	Expense account, **(e)** other allowances
BARBARA COWAN PO BOX 2607 HAVRE, MT 59501	DIRECTOR 000 00	0	0	0
MICHELLE COWAN PO BOX 2607 HAVRE, MT 59501	DIRECTOR 000 00	0	0	0
WILLIAM COWAN PO BOX 2607 HAVRE, MT 59501	DIRECTOR 000 00	0	0	0
WILLIAM B COWAN PO BOX 2607 HAVRE, MT 59501	PRESIDENT 000 00	0	0	0
BRETT HUESTIS PO BOX 2607 HAVRE, MT 59501	DIRECTOR 000 00	0	0	0
LISA COWAN HUESTIS PO BOX 2607 HAVRE, MT 59501	DIRECTOR 000 00	0	0	0

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
ACCESS UNLIMITED305 POPLAR DRIVE BOZEMAN, MT 59718	NONE	501(C)(3)	MOBILITY EQUIPMENT FOR IMPOVERISHED	20,000
AMERICAN NATIONAL CATTLEWOMEN INC 200 NW 66TH STREET SUITE OKLAHOMA CITY, OK 73116	NONE	501(C)(3)	COLLEGIATE BEEF ADVOCACY PROGRAM	5,000
ANGEL FLIGHT WEST 3161 DONALD DOUGLAS LOOP SANTA MONICA, CA 90405	NONE	501(C)(3)	HEALTH TAKES FLIGHT	5,000
Total . . . . . ▶ **3a**				858,135

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
BENEFIS HEALTH SYSTEM FOUNDATION PO BOX 7008 GREAT FALLS, MT 59406	NONE	501(C)(3)	REGIONAL EMERGENCY DEPARTMENT	45,000
BIG BROTHERS BIG SISTERS 30 W 6TH AVE HELENA, MT 59601	NONE	501(C)(3)	MENTORING	20,000
BOYS AND GIRLS CLUB OF THE HI-LINE PO BOX 68 HAVRE, MT 59501	NONE	501(C)(3)	HEALTH AND LIFE SKILLS PROGRAM	20,000
Total . . . . . ▶ **3a**				858,135

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CASA OF HILL COUNTY INC 2229 5TH AVENUE SUITE 13 HAVRE, MT 59501	NONE	501(C)(3)	VOLUNTEER RECRUITMENT AND TRAINING	7,500
CASA-CAN-325 2ND AVE N GREAT FALLS, MT 59401	NONE	501(C)(3)	CASA-CAN	12,000
CENTER FOR MENTAL HEALTH FND P O BOX 1653 GREAT FALLS, MT 59403	NONE	501(C)(3)	MENTAL HEALTH FUNCTIONALITY	12,150
Total . . . . . ▶ **3a**				858,135

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
CENTER FOR MUSIC- PEOPLE W DISABILI 415 WEST CENTRAL AVE MISSOULA, MT 59801	NONE	501(C)(3)	YOUTH WITH DISABILITIES	8,500
EAGLE-MOUNT GREAT FALLS P O BOX 2866 GREAT FALLS, MT 59403	NONE	501(C)(3)	LIFE IS AN ADVENTURE	25,000
FLORENCE CRITTENTON HOME & SERVICES 901 N HARRIS HELENA, MT 59601	NONE	501(C)(3)	RESIDENTIAL SERVICES SUPPORT	7,500
Total . . . . . ▶ **3a**				858,135

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
FRIENDS OF MONTANAPBS PO BOX 10715 BOZEMAN, MT 59719	NONE	501(C)(3)	MONTANAPBS KID'S CLUB	2,500
FRIENDSHIP HOUSE OF CHRISTIAN SERV 3123 8TH AVE BILLINGS, MT 59101	NONE	501(C)(3)	INVESTING IN AT-RISK CHILDREN	2,500
GARDEN CITY HARVEST INCPO BOX 205 MISSOULA, MT 59806	NONE	501(C)(3)	GARDEN CITY HARVEST FARM TO SCHOOL	2,500
Total . . . . . ▶ **3a**				858,135

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
GREAT FALLS CHILDRENS RECEIVING HOM P O BOX 1061 GREAT FALLS, MT 59403	NONE	501(C)(3)	SEECIFIC ASSISTANCE TO CHILDREN	10,000
GREAT FALLS CLINIC LEGACY FOUND 3010 15TH AVE GREAT FALLS, MT 59405	NONE	501(C)(3)	HOUSING FOR SPECIAL NEEDS CHILDREN	20,000
GREAT FALLS-RESCUE MISSION P O BOX 129 GREAT FALLS, MT 59403	NONE	501(C)(3)	HOMELESS INDIVIDUALS & FAMILIES	10,000
Total . . . . . ▶ **3a**				858,135

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
GREAT FALLS-SENIOR CENTER 1004 CENTRAL AVE GREAT FALLS, MT 59401	NONE	501(C)(3)	AFFORDABLE MEALS PROGRAM	2,500
HAVRE BENEATH THE STREETS PO BOX 1605 HAVRE, MT 59501	NONE	501(C)(3)	UNDERGROUND IMPROVEMENTS	4,132
HE & M TURNER CLACK MEMORIAL MUSEUM P O BOX 1496 HAVRE, MT 59501	NONE	501(C)(3)	OPERATIONS	11,000
Total . . . . . ▶ **3a**				858,135

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
HUDSON DAVID MCNEEL MEMORIAL FUND 4580 KLAHANIE DRIVE SE SU SAMMAMISH, WA 98029	NONE	501(C)(3)	A STREAM OF HOPE	21,000
INTERMOUNTAIN DEACONESS CHILDREN'S 500 S LAMBORN ST HELENA, MT 59601	NONE	501(C)(3)	TECHNOLOGY UPGRADE	20,000
IRWIN & FLORENCE ROSTEN FOUNDATION 515 MADISON STREET HAMILTON, MT 59840	NONE	501(C)(3)	MAPS MEDIA INSTITUTE	10,000
Total . . . . . ▶ **3a**				858,135

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
LEWIS & CLARK FNDPO BOX 398 GREAT FALLS, MT 59403	NONE	501(C)(3)	FESTIVAL & SUMMER SEASONAL STAFF	5,000
MAKE-A-WISH MONTANA 1015 MOUNT AVE SUITE C MISSOULA, MT 59801	NONE	501(C)(3)	SUPPORT-A-WISH	10,000
MENTAL HEALTH AMERICA MONTANA P O BOX 88 BOZEMAN, MT 59771	NONE	501(C)(3)	YOUTH MENTAL HEALTH RECOVERY LINE	25,000
Total . . . . . ▶ **3a**				858,135

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MONTANA FFA FOUNDATION 502 SOUTH 19TH AVE 102 BOZEMAN, MT 59718	NONE	501(C)(3)	YOUTH AGRICULTURE EDUCATION	10,000
MONTANA FOOD BANK NETWORK 5625 EXPRESSWAY MISSOULA, MT 59808	NONE	501(C)(3)	RURAL FOOD DISTRIBUTION	15,000
MONTANA METH PROJECTPO BOX 8944 MISSOULA, MT 59807	NONE	501(C)(3)	DRUG PREVENTION CAMPAIGN	10,000
Total . . . . . ▶ **3a**				858,135

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MONTANA FARM BUREAU FDN P O BOX 8944 502 S 19TH AVE STE 104 BOZEMAN, MT 59718	NONE	501(C)(3)	COLLEGIATE YOUNG FARMER SCHOLARSHIP	1,000
MONTANA SCHOOL DEAF & BLIND FD PO BOX 6576 GREAT FALLS, MT 59406	NONE	501(C)(3)	VISUALLY IMPAIRED KIDS TECHNOLOGY	24,000
MONTANA STATE UNIVERSITY FOUNDATION PO BOX 172750 BOZEMAN, MT 59717	NONE	501(C)(3)	AGRICULTURE SCHOLARSHIP	31,579
Total . . . . . ▶ **3a**				858,135

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
MSU NORTHERN ALUMNI FOUNDATION 300 11TH ST HAVRE, MT 59501	NONE	501(C)(3)	STUDENT LAB UPGRADES	76,274
NEIGHBORHOOD HOUSING SERVICES INC 509 1ST AVE S GREAT FALLS, MT 59401	NONE	501(C)(3)	HIGH SCHOOL HOUSE PROJECT	10,000
OAK HALL ESPICOPAL SCHOOL 2815 MT WASHINGTON RD ARDMORE, OK 73401	NONE	501(C)(3)	OPERATIONAL BUDGET	90,000
Total . . . . . ▶ **3a**				858,135

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
OGDEN NATURE CENTER 966 WEST 12TH STREET OGDEN, UT 84404	NONE	501(C)(3)	NATURE EDUCATION PROGRAMS	5,000
OKLAHOMA HEART HOSPITAL RESEARCH FN 4200 W MEMORIAL AVE SUI OKLAHOMA CITY, OK 73120	NONE	501(C)(3)	ON BEHALF OF DR TOM HENNEDRY	9,000
ONE MONTANA 280 WEST KAGY BLVD SUIT BOZEMAN, MT 59715	NONE	501(C)(3)	MONTANA TEENPRENEUR CHALLENGE	10,000
Total . . . . . ▶ **3a**				858,135

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
OPERATION WARMPO BOX 822431 PHILADELPHIA, PA 191822431	NONE	501(C)(3)	COATS FOR CHILDREN IN NEED	5,000
PEACE PLACE1315 CENTRAL AVENUE GREAT FALLS, MT 59401	NONE	501(C)(3)	PEACE PLACE SERVICES AGES 6-10	7,500
PROVIDENCE MONTANA HEALTH FD 502 W SPRUCE STREET MISSOULA, MT 59802	NONE	501(C)(3)	ST PATRICK HOUSE RESTORATION FUND	5,000
Total . . . . . ▶ **3a**				858,135

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
SAINT DOMINIC SAVIO ACADEMY INC 1835 E GUADALUPE RD SUI TEMPE, AZ 85283	NONE	501(C)(3)	SDSA STAFF ADVANCEMENT INITIATIVE	40,000
SPECIAL K RANCHP O BOX 479 COLUMBUS, MT 59019	NONE	501(C)(3)	TUITION SUPPORT	19,500
ST PHILLIPS CHURCH516 MCLISH AVE ARDMORE, OK 73401	NONE	501(C)(3)	DISCRETIONARY GRANT	5,000
Total . . . . . ▶ **3a**				858,135

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
UNIVERSITY OF OKLAHOMA FOUNDATION 100 TIMBERDELL ROAD NORMAN, OK 73019	NONE	501(C)(3)	REFUND GRANT	-5,000
VALIER PUBLIC LIBRARYPO BOX 247 VALIER, MT 59486	NONE	501(C)(3)	LIBRARY ADDITION FURNISHING	5,000
WESTERN SUSTAINABILITY EXCHANGE PO BOX 1448 LIVINGSTON, MT 59047	NONE	501(C)(3)	LOCAL FOOD CONNECTION	5,000
Total . . . . . ▶ **3a**				858,135

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
YCC FAMILY CRISIS CENTER 1535 NORTH 775 OGDEN, UT 84404	NONE	501(C)(3)	GENERAL OPERATIONS	40,000
YOUNG PARENTS EDUCATION CENTER 2400 CENTRAL AVE GREAT FALLS, MT 59401	NONE	501(C)(3)	EDUCATION SUPPORT	15,000
YOUTH IMPACT INC2305 GRANT AVE OGDEN, UT 84401	NONE	501(C)(3)	FACILITY & MEALS & GENERAL EDUCATION	60,500
Total . . . . . ▶ **3a**				858,135

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
YWCA OF HELENAPO BOX 518 HELENA, MT 596240518	NONE	501(C)(3)	WINGS PROGRAM	20,000
Total . . . . . ▶ **3a**				858,135

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319002219

TY 2018 Accounting Fees Schedule

Name: BROWNING KIMBALL FOUNDATION
C/O FOUNDATION MANAGEMENT INC

EIN: 94-2766079

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	4,250			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319002219

TY 2018 Investments Corporate Bonds Schedule

Name: BROWNING KIMBALL FOUNDATION
C/O FOUNDATION MANAGEMENT INC

EIN: 94-2766079

Investments Corporate Bonds Schedule

Name of Bond	End of Year Book Value	End of Year Fair Market Value
DA DAVIDSON 9110	5,598,436	5,598,436
DA DAVIDSON 1159	1,623,148	1,623,148

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491319002219

TY 2018 Investments Corporate Stock Schedule

Name: BROWNING KIMBALL FOUNDATION
C/O FOUNDATION MANAGEMENT INC

EIN: 94-2766079

Investments Corporation Stock Schedule

Name of Stock	End of Year Book Value	End of Year Fair Market Value
DA DAVIDSON 9105	2,760,344	2,760,344
DA DAVIDSON 8550	7,266,648	7,266,648
DA DAVIDSON 9092	3,352,980	3,352,980

TY 2018 Legal Fees Schedule

Name: BROWNING KIMBALL FOUNDATION
C/O FOUNDATION MANAGEMENT INC

EIN: 94-2766079

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	125			

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TY 2018 Other Expenses Schedule

Name: BROWNING KIMBALL FOUNDATION
C/O FOUNDATION MANAGEMENT INC

EIN: 94-2766079

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
EXPENSES				
TELEPHONE	540			

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TY 2018 Other Increases Schedule

Name: BROWNING KIMBALL FOUNDATION
C/O FOUNDATION MANAGEMENT INC

EIN: 94-2766079

Description	Amount
UNREALIZED GAINS	1,140,206

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TY 2018 Other Professional Fees Schedule

Name: BROWNING KIMBALL FOUNDATION
C/O FOUNDATION MANAGEMENT INC

EIN: 94-2766079

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
DA DAVIDSON 1159	7,490	7,490		
DA DAVIDSON 8550	52,064	52,064		
DA DAVIDSON 9092	17,176	17,176		
DA DAVIDSON 9105	11,531	11,531		
DA DAVIDSON 9110	15,172	15,172		
MANAGEMENT FEES	117,449			117,449
CONSULTING FEES	9,000			9,000

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TY 2018 Taxes Schedule

Name: BROWNING KIMBALL FOUNDATION
C/O FOUNDATION MANAGEMENT INC

EIN: 94-2766079

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAX PAID 8550	377	377		
FOREIGN TAX PAID 9105	5,160	5,160		
EXCISE TAX	51,019			