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Form 990-PF

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93491310000279

2018

OMB No 1545-0052

Return of Private Foundation

▶ Go to <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

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.

Open to Public Inspection

For	cale	ndar year 2018, or tax year beginning 07-01-20)18 , aı	nd ending 06-30	-2019				
		undation		A Employer is	dentification numbe	r			
VI	ncent G	affney Foundation		36-3507945					
		d street (or P O box number if mail is not delivered to street address) n State Bank Trust Box 1446	Room/suite	B Telephone n	umber (see ınstructio	ns)			
	mencar	T State Bally 11 dat Box 1440	(701) 774-410	(701) 774-4100					
		n, state or province, country, and ZIP or foreign postal code D 588021446	C If exemption	application is pendin	g, check here				
G CI	песк а		former public charity		rganizations, check h	▶ ⊔			
					organizations meeting ck here and attach co				
		☐ Address change ☐ Name change		E If private fo	oundation status was	terminated			
_		pe of organization ✓ Section 501(c)(3) exempt private n 4947(a)(1) nonexempt charitable trust ☐ Other taxable		under secti	on 507(b)(1)(A), chec	ck here ▶ Ш			
			✓ Cash ☐ Accru	F If the found	lation is in a 60-mont	h termination			
of	year (f	from Part II, col (c), ▶\$ 1,019,862 □ Other (specify) (Part I, column (d) must		under section	on 507(b)(1)(B), chec				
Pa	rt I	Analysis of Revenue and Expenses (The total	Ī			(d) Disbursements			
		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	for charitable purposes (cash basis only)			
	1	Contributions, gifts, grants, etc , received (attach schedule)	33,088						
	2	check ▶ ☐ If the foundation is not required to attach	33,000						
		Sch B							
	3	Interest on savings and temporary cash investments	4,189	4,189	·				
	4	Dividends and interest from securities	17,880	17,880					
	5a	Gross rents							
	Ь	Net rental income or (loss)							
ξ	6a	Net gain or (loss) from sale of assets not on line 10	7,325						
Revenue	Ь	Gross sales price for all assets on line 6a 350,263							
ă	7	Capital gain net income (from Part IV, line 2)		7,325	5				
	8	Net short-term capital gain							
	9	Income modifications							
	10a	Gross sales less returns and allowances							
	b	Less Cost of goods sold]						
	C		5,677	5,677	7				
	11				+				
	12	Total. Add lines 1 through 11	68,159	35,07		2 622			
	13 14	Compensation of officers, directors, trustees, etc Other employee salaries and wages	7,263	3,63:	<u> </u>	3,632			
. ^	15	Pension plans, employee benefits							
Se	16a	Legal fees (attach schedule)							
æ	ь	Accounting fees (attach schedule)	2,450	(2,450			
and Administrative Expenses	C	Other professional fees (attach schedule)	2,430 2,430	750		800			
Ve		Interest	29 1,550	, 30	1	330			
rati	17 18		925	(0			
J St	19	Taxes (attach schedule) (see instructions) Depreciation (attach schedule) and depletion	323						
Ī		Occupancy							
Ad	20	Travel, conferences, and meetings				 			
nd I	22	Printing and publications							
g 9	23	Other expenses (attach schedule)							
Ē	24	Total operating and administrative expenses.							
Operating		Add lines 13 through 23	12,188	4,38:		6,882			
Ö	25	Contributions, gifts, grants paid	39,247	,		39,247			
	26	Total expenses and disbursements. Add lines 24 and	, "			,			
		25	51,435	4,383	<u>L</u>	46,129			
	27	Subtract line 26 from line 12							
	a	Excess of revenue over expenses and disbursements	16,724						
	ь	Net investment income (If negative, enter -0-)		30,690					
	С	Adjusted net income (If negative, enter -0-)							
For	Paper	work Reduction Act Notice, see instructions.	•	Cat No 11289	X Foi	m 990-PF (2018)			

136,454

404,204

17,792

733,749

153,543

580,206

733.749

733,749

136.454

377,474

750,473

153,543

596,930

750,473

750,473

2

3

4

5 6 733,749

16,724

750,473

750,473 Form 990-PF (2018)

0

17,792

242,030

434,098

124,981

1,019,862

Other notes and loans receivable (attach schedule)

Investments—U S and state government obligations (attach schedule)

Prepaid expenses and deferred charges

Investments—land, buildings, and equipment basis ▶ _ Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule)

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

Accounts payable and accrued expenses

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

Mortgages and other notes payable (attach schedule).

Foundations that follow SFAS 117, check here ▶ □

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

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg, and equipment fund Retained earnings, accumulated income, endowment, or other funds

Capital stock, trust principal, or current funds

Total net assets or fund balances (see instructions)

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

Analysis of Changes in Net Assets or Fund Balances

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

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

Less allowance for doubtful accounts ▶ Inventories for sale or use

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe ▶ _

Other liabilities (describe -_

Grants pavable

Unrestricted

Temporarily restricted

Permanently restricted . .

and complete lines 27 through 31.

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

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) > ____

	5
	6
	7
2	8
Assets	9
As	10a
	b
	С
	11

12

13

14

15

16

17 18

19

20 21

22

23

24

25

26

28

29 Net

30

31

Part III

2 3

Liabilities

Balances

Fund

ō

Assets 27

Page **3**

	e the kınd(s) of property sold (e g , rehouse, or common stock, 200 shs		How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a Publicly Traded Securities	5		Р		
b Capital Gains Dividends			P		
C					
d					
e					
(e)	(f) Depreciation allowed		(g) other basis		h) r (loss)
Gross sales price	(or allowable)		ense of sale) minus (g)
a 34	3,838		342,938	(-/ (-	900
	6,425		3 12,730		6,425
	5,725				0,723
<u>c</u>					
d					
е					
Complete only for assets	showing gain in column (h) and ow	ned by the foundation o	on 12/31/69	(I)
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	Excess	(k) of col(ı) (յ), ıf any	col (k), but not	h) gain minus less than -0-) or om col (h))
a					900
b					6,425
c					· · · · · · · · · · · · · · · · · · ·
d					
-		Tf and also substitute Di	aut Tilona 7		
2 Capital gain net income	or (net capital loss)	If gain, also enter in Pa If (loss), enter -0- in P		2	7,325
3 Net short-term capital o	gain or (loss) as defined in sections :	1222(5) and (6)			
If gain, also enter in Pa in Part I, line 8	rt I, line 8, column (c) (see instructi		}	3	
Part V Qualification U	Jnder Section 4940(e) for Re	educed Tax on Net	Investment Inc	come	
For optional use by domestic p	rivate foundations subject to the sec	ction 4940(a) tax on ne	t investment incom	e)	
if section 4940(d)(2) applies, le	eave this part blank				
Nac the foundation liable for th	a caction 4042 tay on the distributa	ble amount of any year	in the base period?		es 🗹 No
	e section 4942 tax on the distributa ot qualify under section 4940(e) Do		in the base period		es 🖭 NO
	nount in each column for each year,		making any entries	•	
(a)	out the each column for each year,	see mstructions before		(d)	
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitabl	e-use assets	Distribution rat (col (b) divided by c	
2017	41,781		1,020,362		0 040947
2016	56,132		879,741		0 063805
2015	18,995		798,463		0 023789
2014	31,488		796,256		0 039545
2013	42,986		992,903		0 043293
2 Total of line 1, column (c	d)		2		0 211379
	for the 5-year base period—divide				
	idation has been in existence if less		3		0 042276
	ncharitable-use assets for 2018 fron		4		974,859
5 Multiply line 4 by line 3			5		41,213
6 Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		307
					41,520
	ons from Part XII, line 4 ,				46,129
	eater than line 7, check the box in Pa			l d a 1% tay rate. Se	<u> </u>
instructions	ate. than the 7, check the box in Fe	are vi, mic ib, and com	piece that part usin	g a 170 tax rate De	C CHC I GIC VI
				Fo	orm 990-PF (2018)

(b)

(c) Date acquired

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Form	990-PF (20	018)								F	age 6
Pa	rt VII-B	Statements Regar	ding	Activities for Which	Form 4720 May Be	Required (continue	ed)				
5a	During the	e year did the foundation	pay o	r incur any amount to						Yes	No
(1) Carry on propaganda, or otherwise				ttempt to influence legisl	No						
	(2) Influe	ence the outcome of any	specifi	c public election (see sect	ion 4955), or to carry	☐ Yes	_				
	•			egistration drive?		· · 🗌 Yes	✓	No			
		-		ravel, study, or other sım	•	Yes	✓	No			
		-		ther than a charitable, etc	· -		_				
				ctions		· · Yes	✓	No			
				eligious, charitable, scien rention of cruelty to childi							
h			•	any of the transactions fa		⊔ Yes	✓	No			
	•	, , , ,		ent notice regarding disas		•			5b		
	-			regarding disaster assist		_	·				
c	_	, -		does the foundation clain			Ш				
	tax becau	se it maintained expendit	ure re	sponsibility for the grant		· · □ Yes		No			
	If "Yes," a	ttach the statement requ	ured b	y Regulations section 53	4945-5(d)	□ res	Ш	NO			
6a	Did the fo	undation, during the yea	r, rece	ive any funds, directly or	indirectly, to pay premit	ıms on					
	a persona	I benefit contract?				· 🔲 Yes		No			
b	Did the fo	undation, during the yea	r, pay	premiums, directly or inc	irectly, on a personal be	nefit contract?		140	6b		No
		6b, file Form 8870									
7a	•			foundation a party to a p		⊔ Yes	✓	No			
				oceeds or have any net in					7b		
8				1960 tax on payment(s) o			_				
	excess pa			ar [?]			✓				
Pa	rt VIII	and Contractors	Offic	ers, Directors, Trust	ees, Foundation Ma	inagers, Highly Pai	d En	nplo	yees,		
1	List all of	ficers, directors, truste	es. fo	oundation managers ar	nd their compensation.	See instructions					
	List un oi	neers, un eccors, cruse		b) Title, and average	(c) Compensation (If	(d) Contributions t	:0	(2)	Eunan	ise acc	
	(a) Na	ame and address		hours per week	not paid, enter	employee benefit plans deferred compensat	and			lowand	
Glen I	Bummer		Δdvis	devoted to position sory Committee	-0-)		011	1			
	Rd 2030		1 00		,		Ū				
Reser	ve, MT 5925	58									
	ican State Ba	nk Trust	Trust 5 00	ee	7,263		0	1			C
	ox 1446 ton, ND 588	021446									
Nancy	/ Johnson			sory Committee	0		0				C
	x 1446	221446	1 00								
	Compens		aid en	nployees (other than t	ose included on line 1	 —see instructions),	f no	ne. ei	nter "	NONE	71
	Compens	ution of five ingliese p	uiu cii			(d) Contributions		110, 01	1001		•
(a)		address of each employed	e paid	(b) Title, and average hours per week	(c) Compensation	employee benefit				se acco	
	m	ore than \$50,000		devoted to position	(c) compensation	plans and deferred compensation	1	other allowances			es
NON	 E					Compensation					
					<u> </u>		_				
Iota	ı number o	ा other employees paid o	ver \$5	0,000		•			00	0-PF ((2010)
								For	n uul	1-PF (ZUT8

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Part VIII Information About Officers, Directors, Trustees, F and Contractors (continued)	Foundation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include releving and other beneficiaries served, conferences convened, research papers produc		Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see in	astructions)	
Describe the two largest program-related investments made by the foundation during the	<u>'</u>	Amount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		P 0
		Form 990-PF (2018)

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

2

3a 3h

4

5

46.129

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307 45,822

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

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

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

Amounts set aside for specific charitable projects that satisfy the

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

2

3

4

5

10.749

37,687

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0

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VIII	Ha

b Total for prior years

a From 2013. **b** From 2014. . . . c From 2015. . . d From 2016. e From 2017.

Form 990-PF (20	018)
Part XIII	Undistributed Income (see instructions)

1 Distributable amount for 2018 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2018 a Enter amount for 2017 only.

Excess distributions carryover, if any, to 2018

f Total of lines 3a through e. 4 Qualifying distributions for 2018 from Part XII, line 4 🕨 \$ a Applied to 2017, but not more than line 2a

b Applied to undistributed income of prior years (Election required—see instructions). c Treated as distributions out of corpus (Election

5 Excess distributions carryover applied to 2018

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 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

(If an amount appears in column (d), the

6 Enter the net total of each column as

be distributed in 2019 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions) 8 Excess distributions carryover from 2013 not

9 Excess distributions carryover to 2019.

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. . .

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

Subtract lines 7 and 8 from line 6a

indicated below:

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

same amount must be shown in column (a))

(a)

Corpus

0

0

(b)

Years prior to 2017

(c)

2017

35,380

35,380

Page **10** Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a	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 organizati	on is a private oper	ating foundation des	cribed in section	4942(j)(3) or □] 4942(j)(5)			
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) Tatal			
	income from Part I or the minimum investment return from Part X for each	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total			
	year listed								
b	85% of line 2a								
С	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								
е	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								
а	"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								
С	"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								
Pa	rt XV Supplementary Information assets at any time during th			foundation had s	5,000 or more	in			
1	Information Regarding Foundation Man		H 20/ - 6 H 1-1-	l					
а	List any managers of the foundation who have before the close of any tax year (but only if					n			
ь	List any managers of the foundation who owi	n 10% or more of th	ne stock of a corpora	tion (or an equally la					
2	ownership of a partnership or other entity) or Information Regarding Contribution, Gr.								
_			• • • • • • • • • • • • • • • • • • • •	_					
	Check here ► ☐ If the foundation only mak unsolicited requests for funds If the founda other conditions, complete items 2a, b, c, ai	tion makes gifts, gr	ants, etc to individu	_	•				
a	The name, address, and telephone number of	or e-mail address of	the person to whom	applications should	be addressed				
	Laurie Pederson VP Trust Officer Am								
	PO Box 1446 Williston, ND 588021446								
	(701) 774-4120								
b	The form in which applications should be sul	omitted and informa	ition and materials th	ney should include					
	In addition to applicants name, date of birth	, grade school, addr	ress, and phone num	ber, the application	requests the name of	of the applicant's			

guardian and reason for application. If applicable, the estimate of any procedure to be performed must accompany the application. In addition, the guardian's most recent tax return must be included with the application. c Any submission deadlines None

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

For health, welfare, & feeding of needy children under the age of 18 years



Enter gross	amounts unless otherwise indicated	Unrelated bu	ısıness ıncome	Excluded by section	512, 513, or 514	(e) Related or exempt
	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
	and contracts from government agencies					
	on savings and temporary cash			14	4,189	
4 Dividen	ds and interest from securities			14	17,880	
	tal income or (loss) from real estate					
	financed property					
	ebt-financed property tall income or (loss) from personal property					
	nvestment income			15	5,677	
	(loss) from sales of assets other than					
inventoi	•			18	7,325	
	ome or (loss) from special events profit or (loss) from sales of inventory					
11 Other r	evenue a					
		1				
е			0		35 071	
e 12 Subtota 13 Total. /	Add line 12, columns (b), (d), and (e)		0		35,071 3	35,071
e 12 Subtota 13 Total. / (See wo	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Adshrksheet in line 13 instructions to verify calcu	lations)		13	35,071	
e 12 Subtota 13 Total. / (See wo	Add line 12, columns (b), (d), and (e)	lations) ne Accomplish income is reporte	ment of Exempled in column (e) of	13 pt Purposes Part XVI-A contribut	ted importantly to	
e	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 14 instructions to the second lish ment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain in line 15 instructions.	lations) ne Accomplish income is reporte	ment of Exempled in column (e) of	13 pt Purposes Part XVI-A contribut	ted importantly to	
e	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 14 instructions to the second lish ment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain in line 15 instructions.	lations) ne Accomplish income is reporte	ment of Exempled in column (e) of	13 pt Purposes Part XVI-A contribut	ted importantly to	
e	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 14 instructions to the second lish ment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain in line 15 instructions.	lations) ne Accomplish income is reporte	ment of Exempled in column (e) of	13 pt Purposes Part XVI-A contribut	ted importantly to	
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e	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 14 instructions to the second lish ment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain in line 15 instructions.	lations) ne Accomplish income is reporte	ment of Exempled in column (e) of	13 pt Purposes Part XVI-A contribut	ted importantly to	
e	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 14 instructions to the second lish ment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain in line 15 instructions.	lations) ne Accomplish income is reporte	ment of Exempled in column (e) of	13 pt Purposes Part XVI-A contribut	ted importantly to	
e	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 14 instructions to the second lish ment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain in line 15 instructions.	lations) ne Accomplish income is reporte	ment of Exempled in column (e) of	13 pt Purposes Part XVI-A contribut	ted importantly to	
e	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 14 instructions to the second lish ment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain in line 15 instructions.	lations) ne Accomplish income is reporte	ment of Exempled in column (e) of	13 pt Purposes Part XVI-A contribut	ted importantly to	
e	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 14 instructions to the second lish ment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain in line 15 instructions.	lations) ne Accomplish income is reporte	ment of Exempled in column (e) of	13 pt Purposes Part XVI-A contribut	ted importantly to	
e	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 14 instructions to the second lish ment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain in line 15 instructions.	lations) ne Accomplish income is reporte	ment of Exempled in column (e) of	13 pt Purposes Part XVI-A contribut	ted importantly to	
e	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 14 instructions to the second lish ment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain in line 15 instructions.	lations) ne Accomplish income is reporte	ment of Exempled in column (e) of	13 pt Purposes Part XVI-A contribut	ted importantly to	
e	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 14 instructions to the second lish ment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain in line 15 instructions.	lations) ne Accomplish income is reporte	ment of Exempled in column (e) of	13 pt Purposes Part XVI-A contribut	ted importantly to	
e	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 14 instructions to the second lish ment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain in line 15 instructions.	lations) ne Accomplish income is reporte	ment of Exempled in column (e) of	13 pt Purposes Part XVI-A contribut	ted importantly to	
e	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 14 instructions to the second lish ment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain in line 15 instructions.	lations) ne Accomplish income is reporte	ment of Exempled in column (e) of	13 pt Purposes Part XVI-A contribut	ted importantly to	
e	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 14 instructions to the second lish ment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain in line 15 instructions.	lations) ne Accomplish income is reporte	ment of Exempled in column (e) of	13 pt Purposes Part XVI-A contribut	ted importantly to	
e	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 14 instructions to the second lish ment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain in line 15 instructions.	lations) ne Accomplish income is reporte	ment of Exempled in column (e) of	13 pt Purposes Part XVI-A contribut	ted importantly to	
e	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 14 instructions to the second lish ment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain in line 15 instructions.	lations) ne Accomplish income is reporte	ment of Exempled in column (e) of	13 pt Purposes Part XVI-A contribut	ted importantly to	
e	Add columns (b), (d), and (e) Add line 12, columns (b), (d), and (e) Add line 12 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 13 instructions to verify calcumate in line 14 instructions to the second lish ment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain in line 15 instructions.	lations) ne Accomplish income is reporte	ment of Exempled in column (e) of	13 pt Purposes Part XVI-A contribut	ted importantly to	

. (20	,10)		
	Information Regarding Transfers To and Transactions and Relationships With Noncharit Exempt Organizations	able	

Part 2	XVII	Exempt Organi	-	ansic	15 10 0	ina mansacu	10113	and Relation	isinps with No	iiciiaiic	авіс		
		anization directly or in han section 501(c)(3)	directly enga							on 501		Yes	No
` , ,		om the reporting foun	-	•			•	_		ŀ			
										.	1a(1)		No
(2)	Other	assets								F	1a(2)		No
b Othe	r trans	actions								Ī			
(1)	Sales	of assets to a nonchar	itable exemp	t organı:	zation.						1b(1)		No
(2)	Purcha	ases of assets from a r	noncharitable	exempt	: organız	ation				[1b(2)		No
(3)	Rental	of facilities, equipmer	nt, or other a	ssets.						[1b(3)		No
(4)	Reımb	ursement arrangemen	ts							. [1b(4)		No
(5)	Loans	or loan guarantees.								. [1b(5)		No
(6)	Perforn	nance of services or m	embership or	r fundra	ısıng solı	icitations				. [1b(6)		No
c Shar	ing of t	facılıtıes, equipment, n	nailing lists, d	other as	sets, or	paid employees.				. [1c		No
		er to any of the above											
		ls, other assets, or ser saction or sharing arra									9		
iii aii	iy cian.	saction or snaring arra	rigerrierie, sin	0 111 00	ianin (a	i) the value of the	ic go	ous, other asset	s, or services recei	ı veu			
(a) Line I	No	(b) Amount involved	(c) Name of	noncharit	table exer	mpt organization		(d) Description of t	transfers, transactions	, and shar	ng arra	ngemen	ts
	_												
		dation directly or indire	•			•					1		
		n section 501(c) (other		1 501(c)	(3)) or ı	n section 527? .	•		LIY	es 🛂	No		
b If "Y	es," co	mplete the following s		1		> - 6		1					
		(a) Name of organization	on		(6) Type of organiza	ation		(c) Description	n of relation	nship		
	Unde	r penalties of perjury,	I declare tha	t I have	examin	ed this return, ir	nclud	ing accompanyir	ng schedules and st	tatement	s, and	to the l	best
	of my	/ knowledge and belief	, it is true, co										
Sign	which	n preparer has any kno	wledge			ı							
dere	*	****				2019-11-01		*****		May the return	e IRS di	scuss th	115
теге	-							_)			e prepa	rer show	vn
	s	ignature of officer or t	rustee			Date		Title		below	وا در ا	√ γes [¬
		T		1						(see iii	su) · L	i res .	- 110
		Print/Type preparer's	name	Prepare	er's Sıgn	nature	D	ate		PTIN			
									Check if self-		00144	185	
		Melissa White CPA						2019-11-01	employed ▶ ☐				
Paid													
Prepa		Firm's name ▶ EIDE	BAILLY LLP							Fırm's EI	N ▶45	-03719	51
Jse C	nly									S L1	.,,,,	55,15	
		Firm's address ► 43	10 17TH AVE	5 PO B	OX 254!	5							
		FA	RGO, ND 58	3108254	5					Phone no	(701) 239-8	3500

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

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

Name and address (nome or business)	or substantial contributor			
a Paid during the year				
American State Bank Trust Co - fbo PO Box 1446	None	I	For medical and travel expenses for indigent children	5,576

Williston, ND 588011446				
American State Bank Trust Co - fbo PO Box 1446 Williston, ND 588011446	None	I	For medical and travel expenses for indigent children	

Total .

American State Bank Trust Co - fbo PO Box 1446 Williston, ND 588011446	None	I	For medical and travel expenses for indigent children	4,376
Dr Tony Fischer - fbo Indigent Chil 215 West Highland Street	None	I	For orthodontic work with indigent children each of which	1,264

PO Box 1446 Williston, ND 588011446			for indigent children	
Dr Tony Fischer - fbo Indigent Chil 215 West Highland Street Williston, ND 58801	None	I	For orthodontic work with indigent children each of which was under \$1,000	1,264

39,247

77111100011,7110			
Dr Tony Fischer - fbo Indigent Chil 215 West Highland Street Williston, ND 58801	None	For orthodontic work with indigent children each of which was under \$1,000	1,264

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

Name and address (nome or business)	or substantial contributor	·		
a Paid during the year				
Dr Tony Fischer - fbo J Potter 215 West Highland Street	None	I	For orthodontic work with	1,705

Williston, ND 58801			indigent children	
Dr Tony Fischer - fbo L M Wells 215 West Highland Street Williston, ND 58801	None	I	For orthodontic work with indigent children	2,720

Dr Tony Fischer - fbo L M Wells 215 West Highland Street Williston, ND 58801	None	I	For orthodontic work with indigent children	2,720
Dr Tony Fischer - fbo J M Niblock 215 West Highland Street Williston, ND 58801	None	I	For orthodontic work with indigent children	2,695

215 West Highland Street Williston, ND 58801			ındıgent children	·
Dr Tony Fischer - fbo J M Niblock 215 West Highland Street Williston, ND 58801	None	I	For orthodontic work with indigent children	2,695
Total			▶ 3a	39,247

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year Dr Tony Fisher - fbo T Carrier None For orthodontic work with 2,695

Williston, ND 58801			Indigent children	
Culbertson Froid Bainville Health Care Corp DBA Roosevelt Medical Center 818 2nd Avenue East Culbertson, MT 59218	None	PC	General operations	2,950

818 2nd Avenue East Culbertson, MT 59218				
Dr Tony Fischer - fbo E Bentley 215 West Highland Street Williston, ND 58801	None	I	For orthodontic work with indigent children	2,220
Total			▶ 3a	39,247

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

Name and address (home or business)

Hame and dadress (nome of basiness)	or substantial contributor		
a Paid during the year			
Dr Tony Fischer - fbo C L Bird Hat 215 West Highland Street	None	For orthodontic work with indigent children	1,110

recipient

Williston, ND 58801			margene emaren	
Dr Tony Fischer - fbo A Borntrager 215 West Highland Street Williston, ND 58801	None	I	For orthodontic work with indigent children	1,576

Dr Tony Fischer - fbo A Borntrager 215 West Highland Street Williston, ND 58801	None	I	For orthodontic work with indigent children	1,576
Dr Tony Fischer - fbo T M Romo 215 West Highland Street williston, ND 58801	None	I	For orthodontic work with indigent children	2,035

Williston, ND 58801			malgent children	
Dr Tony Fischer - fbo T M Romo 215 West Highland Street williston, ND 58801	None	I	For orthodontic work with indigent children	2,035
Total			▶ 3a	39,247

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

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

,	or substantial contributor			
a Paid during the year				
Dr Tony Fischer - fbo T Falcon 215 West Highland Street Williston, ND 58801	None	I	For orthodontic work with indigent children	2,035

Dr Tony Fischer - fbo K C Goebel 215 West Highland Street Williston, ND 58801	None	I	For orthodontic work with indigent children	2,220
Dr Tony Fischer - fbo K LeRoux	None	I	For orthodontic work with	1.850

215 West Highland Street Williston, ND 58801	None	1	indigent children	2,220
Dr Tony Fischer - fbo K LeRoux 215 West Highland Street Williston, ND 58801	None	I	For orthodontic work with indigent children	1,850

Williston, ND 58801		_	
Dr Tony Fischer - fbo K LeRoux 215 West Highland Street Williston, ND 58801	None	For orthodontic work with indigent children	1,850
Total		 ▶ 3a	39,247

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

D =	N.		 2 220
a Paid during the year			
Name and address (home or business)	or substantial contributor	recipiente	

recipient

• •				
Dr Tony Fischer - fbo B Martinez 215 West Highland Street Williston, ND 58801	None	l .	For orthodontic work with indigent children	2,220

215 West Highland Street Williston, ND 58801		ındıgent children	,
Total	 	▶ 3a	39,247

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491310000279					
TY 2018 Accounting Fe	es Schedule			_	
Name: Vincent Gaffney Foundation					
	EIN: 36-3507945				
		1		 1	
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
Accounting	2,450	0		2,450	

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491310000279
		•

TY 2018 Investments Corporate Stock Schedule

Name: Vincent Gaffney Foundation

FIN: 36-3507945

EIN: 36-3507945 Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
Apple Inc Common	9,187	27,709
Chevron Corp New Common	5,152	19,164
Coca Cola Co	8,114	10,948
Conocophillips	8,084	8,540
Duke Energy Holding Corp	7,984	11,030
Great Northern Drilling Co	4,000	9,760
Intel Corp	8,150	18,909
Johnson & Johnson	16,017	30,642
MDU Res Group	8,171	7,740
Merck and Co Inc. New	8,010	16,351
Southern Co	8,144	10,503
United Parcel Service Inc Class B	8,109	11,360
US BanCorp Del Common New	13,135	20,960
Verizon Communications Inc	16,065	20,567
Xcel Energy Inc.	8,132	17,847

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TY 2018 Investments - Other Schedule

Name: Vincent Gaffney Foundation

EIN: 36-3507945

Investments Other Schedule 2				
Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value	
Dodge & Cox Funds Intl Stk Fund	AT COST	22,312	23,017	
Dodge & Cox Income Fund	AT COST	38,806	39,474	
Harbor Fund Cap Appreciation Fund Instl	AT COST	53,143	64,012	
Vanguard Fixed Income Secs Fund Gnma Admiral	AT COST	8,368	9,320	
Vanguard Fixed Income Secs Inter-Term	AT COST	16,680	17,742	
Vanguard Fixed Income Secs Short-term	AT COST	25,899	25,713	
Vanguard Index Funds Mid Cap Index Fund	AT COST	31,860	42,807	
Vanguard Index Funds Small Cap Index	AT COST	31,855	42,679	
Vanguard Index Funds Value Index Fund	AT COST	29,659	38,249	
Fidelity Advisor Total Bond Fund Class Z Mf	AT COST	37,620	39,592	
Western Asset Core Plus Bond Fund Class IS Mf	AT COST	41,769	44,437	
American Funds Mutual Fund Class F2 MF	AT COST	5,818	6,517	
Dodge & Cox Stock Fund Mf	AT COST	6,029	6,576	
Fidelity Contrafund Contra Mf	AT COST	5,806	7,002	
Fidelity Low Price Stock Priced Mf	AT COST	2,958	3,340	
Fidelity Small Cap Growth Fund Class Z Mf	AT COST	2,958	3,796	
Harbor Small Cap Value Fun Class Retrmt Mf	AT COST	2,958	3,577	
T Rowe Price Diversified Midcap Growth Fund	AT COST	2,958	3,819	
T Rowe Price International Discovery Fund	AT COST	1,313	1,539	
Vanguard 500 Index Fund Class Adm Mf	AT COST	5,822	6,868	
Vanguard Emerging Markets Stock Index Fund	AT COST	1,326	1,482	
Vanguard Growth Index Fund Grw Class Adm Mf	AT COST	1,557	2,540	

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As Filed Data -

Name: Vincent Gaffney Foundation

Mineral Interests

	ETIA.	JU-JJU/ J4 J

Description

Beginning of Year -

Book Value

17,792

Other Assets Schedule

26 2507045

Value

End of Year - Book

17,792

DLN: 93491310000279

End of Year - Fair Market Value

124,981

TY 2018 Other Income Schedule	

Description

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Name: Vincent Gaffney Foundation

Oil Royalties

	EIN:	36-3507945	
Other Income Schedule			

5,677

Revenue And

Expenses Per Books

Net Investment

5,677

Income

Adjusted Net Income

5,677

DLN: 93491310000279

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491310000279					
TY 2018 Other Professional Fees Schedule					
Name: Vincent Gaffney Foundation EIN: 36-3507945					
Category Amount Net Investment Income Income Disbursements for Charitable Purposes					
Appraisal	800	0		800	

US Sterling

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491310000279						
TY 2018 Taxes Schedule						
	Name:	Vincent Gaff	ney Foundation			
EIN: 36-3507945						
Category Amount Net Investment Adjusted Net Disbursements Income Income for Charitable Purposes						
Tax		925	0		0	

efile GRAPHIC print - DO	NOT PROCESS As Filed Dat	ta -		DLN: 93491310000279	
Schedule B	Sche	edule of Contributors		OMB No 1545-0047	
(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service		ch to Form 990, 990-EZ, or 990-PF rs gov/Form990 for the latest inform	nation	2018	
Name of the organization Vincent Gaffney Foundation	1		Employer i	dentification number	
Organization type (check	: one)		36-3507945	i	
	,				
Filers of:	Section:				
Form 990 or 990-EZ					
	☐ 4947(a)(1) nonexempt of	charitable trust not treated as a p	rivate foundation		
	☐ 527 political organizatio	on			
Form 990-PF	✓ 501(c)(3) exempt privat	e foundation			
	☐ 4947(a)(1) nonexempt of	charitable trust treated as a priva	te foundation		
	501(c)(3) taxable private foundation				
		90-PF that received, during the yor Complete Parts I and II See in			
Special Rules					
under sections 509 received from any	9(a)(1) and 170(b)(1)(A)(vi), that	filing Form 990 or 990-EZ that me checked Schedule A (Form 990 total contributions of the greater complete Parts I and II	or 990-EZ), Part II, line 13	, 16a, or 16b, and that	
during the year, to	tal contributions of more than \$1	(8), or (10) filing Form 990 or 99 ,000 <i>exclusively</i> for religious, cha n or animals Complete Parts I, II	aritable, scientific, literary, c		
during the year, co If this box is check purpose Don't cor	ntributions exclusively for religioned, enter here the total contribution of the parts unless the	(8), or (10) filing Form 990 or 99 bus, charitable, etc., purposes, busions that were received during the General Rule applies to this or 000 or more during the year	t no such contributions tota e year for an <i>exclusively</i> re ganization because it rece	aled more than \$1,000 eligious, charitable, etc, eved <i>nonexclusively</i>	
990-EZ, or 990-PF), but it	must answer "No" on Part IV, lir	I Rule and/or the Special Rules d ne 2, of its Form 990, or check the that it doesn't meet the filing req	e box on line H of its		
For Paperwork Reduction Actor Form 990, 990-EZ, or 990-		Cat No 30613X	Schedule B (Form 990	0, 990-EZ, or 990-PF) (2018)	

Name of organization

Employer identification number

/incent Gaffney F	pundation	36-3507945	
Part I	Contributors (See instructions) Use duplicate copies of Part I if ad	ditional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Vincent Gaffney Trust American State Bank Trustee PO Box Williston, ND 588021446	\$ 33,088	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
(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
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Schedule B (Form 99	90, 990-EZ, or 990-PF) (2018)		Page 3	
Name of organization Vincent Gaffney Foundation		Employer identification number		
	ation	36-35	07945	
Part II	Noncash Property		_	
(a) No. from Part I	(See instructions) Use duplicate copies of Part II if additional space is needed (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	
=				
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received	
=				
L		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2018)	

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)