Form **990-PF**

EXTENDED TO NOVEMBER 16, 20
Return of Private Foundation 2020

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

	Depai	rtment o	of the Treasury	• ,	•	social security numbers on rs gov/Form990PF for instr		-		Open to Public Inspection
- 4	***			r tax year beginni	-	1	, and e			
	Nar	ne of f	foundation		-	i			A Employer identification	n number
	_				<i>-</i>				00 606100	^
	_~			ABBY BROV		Y FOUNDATION		Room/suite	20-606100 B Telephone number	<u> </u>
			6TH ST	A Nomber II (IIali ie Ne				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	818-261-8	777
		ity or town, state or province, country, and ZIP or foreign postal code						C If exemption application is pending, check here		
	_B	OUL	DER, CO	80302						
						Initial return of a fo	ormer public (harity	D 1. Foreign organization	ns, check here
				Final re		Amended return Name change	Amended return			neeting the 85% test, computation
	<u>—</u>	heck t	type of organiza		s change ction 501(c)(3) ex	cempt private foundation	-	11.0	E If private foundation s	· · · · · ·
				nonexempt charit		Other taxable private founda	ıtıon	04	under section 507(b)(. —
	I Fa	ır mar	ket value of all	assets at end of ye	ar J Accounti	ng method: X Cash	Accr	ual	F If the foundation is in	a 60-month termination
			art II, col (c), lu			ther (specify) nn (d), must be on cash bas	ue \		under section 507(b)(1)(B), check here
	Pa	-	Analysis of Re			(a) Revenue and		vestment	(c) Adjusted net	(d) Disbursements
			(The total of amounecessarily equal	venue and Expensions in columns (b), (c) the amounts in columns	, and (d) may not n (a))	expenses per books		ome	income	for charitable purposes (cash basis only)
		1 (Contributions, g	ufts, grants, etc., r	eceived	50000.			N/A	
		_	Check Interest on savings	the foundation is not requ	red to attach Sch B	5.0		Г.С		GMA MENUTATE 1
0		3 (cash investments		utua.	33771.	 .	<u>56.</u> 33771.		STATEMENT 1 STATEMENT 2
2	•		Dividends and i Gross rents	nterest from secur	illes	33771.	 .	<u> </u>		DIATEMBAT 2
4		· .	Net rental income	or (loss)						
	a			om sale of assets not		134227.				
	enn	Da	Gross sales price f assets on line 6a		238142.		1	34227.		
	Revenu		Capital gain net ind Net short-term	come (from Part IV, line	Njičinal Keh	stine gerrice		34241.		
2022		9 1	Income modific	ations	Received US	Bank - USB				
		10a a	Gross sales less re and allowances	uturns	_ ~ 3	20				
2 2			Less Cost of good		NOV (5 2020				
		_	Gross profit or Other income	(loss)		-306.		-306.		STATEMENT 3
FEB			Total Add lines	s 1 through 11	Dade	n ur 217748.	1	67748.		
9				officers, directors, trus		0.		0.		0.
4				salaries and wage	S					
Ź	s			employee benefits						
SCANN	nse	16a L	Legal fees Accounting fees	•						
S	xpe	c (Other professio							
	Administrative Expenses	17 I	Interest							
	Iratı	18	Taxes		STMT 4	2750.		0.		0.
	ınısı	19 (Depreciation an	d depletion						
	۸dm	20 (21]	Occupancy Travel conferer	ices, and meetings	i		<u>.</u>			
	and /		Printing and pu							
	ng a		Other expenses		STMT 5	2518.		2518.		0.
	Operating	24 1		and administrativ		5268.		2518.		0.
	Оре	05 (•	lines 13 through 2 pifts, grants paid	3	33800.		2310.		33800.
•		23 (and disbursemen	ts.	- 33000				
			Add lines 24 an		· · ·	39068.		2518.		33800.
		27 5	Subtract line 26	from line 12	·	450600				
				over expenses and di		178680.		65230.		
				income (if negative			<u>_</u>	00200.	N/A	

1

Form **990-PF** (2019)

30 Total liabilities and net assets/fund balances **Analysis of Changes in Net Assets or Fund Balances** Part III

Balance Sheets

2 Savings and temporary cash investments

Less: allowance for doubtful accounts

Less: allowance for doubtful accounts

Less: allowance for doubtful accounts

10a Investments - U.S. and state government obligations

9 Prepaid expenses and deferred charges

14 Land, buildings, and equipment: basis

instructions. Also, see page 1, item !) 17 Accounts payable and accrued expenses

21 Mortgages and other notes payable 22 Other liabilities (describe

23 Total liabilities (add lines 17 through 22)

and complete lines 24, 25, 29, and 30

24 Net assets without donor restrictions 25 Net assets with donor restrictions

and complete lines 26 through 30.

29 Total net assets or fund balances

26 Capital stock, trust principal, or current funds

16 Total assets (to be completed by all filers - see the

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

Foundations that follow FASB ASC 958, check here

6 Receivables due from officers, directors, trustees, and other

1 Cash - non-interest-bearing

3 Accounts receivable ►

4 Pledges receivable

disqualified persons 7 Other notes and loans receivable

8 Inventories for sale or use

13 Investments - other

18 Grants payable

Deferred revenue

19

Balances

Fund

ō

š

Less accumulated depreciation

b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans

5 Grants receivable

Part II

Total net assets or fund balances at beginning of year - Part II, column (a), line 29					
(must agree with end-of-year figure reported on prior year's return)			1		895235.
Enter amount from Part I, line 27a			2		178680.
Other increases not included in line 2 (itemize)	SEE	STATEMENT 6	3		278.
Add lines 1, 2, and 3	-		4		1074193.
Decreases not included in line 2 (itemize)	SEE	STATEMENT 7	5		77041.
· · · · · · · · · · · · · · · · · · ·	29		6	Т	997152.
	(must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 Decreases not included in line 2 (itemize)	(must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) SEE Add lines 1, 2, and 3	(must agree with end-of-year figure reported on prior year's return) Enter amount from Part I, line 27a Other increases not included in line 2 (itemize) Add lines 1, 2, and 3 Decreases not included in line 2 (itemize) SEE STATEMENT 7	(must agree with end-of-year figure reported on prior year's return) 1 Enter amount from Part I, line 27a 2 Other increases not included in line 2 (itemize) ► SEE STATEMENT 6 3 Add lines 1, 2, and 3 4 Decreases not included in line 2 (itemize) ► SEE STATEMENT 7 5	(must agree with end-of-year figure reported on prior year's return) 1 Enter amount from Part I, line 27a 2 Other increases not included in line 2 (itemize) SEE STATEMENT 6 3 Add lines 1, 2, and 3 4 Decreases not included in line 2 (itemize) SEE STATEMENT 7 5

Form **990-PF** (2019)

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)			(b) How	n cnase	(c) Date acquired (mo., day, yr.)		(d) Date sold (mo., day, yr.)		
2-Story Drick	warenouse; or c	ommon stock, 200 sns	. IVILC CO.)		D - D	onation	(IIIO., u	ay, yi.)	(IIIO., uay, yr.)
<u>1a</u>					<u> </u>				
<u>b</u>		· ·						-	<u> </u>
d d									
e									
(e) Gross sales price		reciation allowed r allowable)		t or other basis xpense of sale		· · · · · · · · · · · · · · · · · · ·		aın or (loss s (f) mınus	
<u>a</u>									
<u>b</u>	 								
<u>c</u>	+								
e 238142				10391	5.				134227.
Complete only for assets show		mn (h) and owned by t	he foundation			(1)	Gains (C	ol. (h) gain	
(i) Adjusted basis			cess of col. (1)			(I) Gains (Col. (h) gain minus ol. (k), but not less than -0-) or			
(i) FMV as of 12/31/69		of 12/31/69		col (j), if any			Losses	(from col (n))
a									
b	<u> </u>				_			_	
<u>c</u>									
<u>d</u>	 								124227
е					\		<u>.</u>		134227.
2 Capital gain net income or (net	capital loss)	If gain, also enter	in Part I, line - in Part I, line	7 7	} 2				134227
3 Net short-term capital gain or (loss) as defined	ın sections 1222(5) an	q (e).			!			
If gain, also enter in Part I, line					$ \cdot $			NT / 7	
If (loss), enter -0- in Part I, line Part V Qualification	: 8 Under Sec	tion 4940(e) for	Reduced	Tax on Net I	nvesti	nent Inco	me	N/A	
For optional use by domestic priva								_	
ror optional use by domestic priva	ate fourtuations	Subject to the Section 4	340(a) lax on	net investment inc	JUIII6. J				
f section 4940(d)(2) applies, leave	this part blank.								
Vas the foundation liable for the se				ar in the base peri	od?				Yes X No
f "Yes," the foundation doesn't qua									
Enter the appropriate amount i	n each column t	or each year; see the in	structions ber						
Base periód years	İ			ore making any en			T		(4)
		(b) Adjusted qualifying dist			(c)	le-use assets			(d) pution ratio
Calendar year (or tax year begin	ining in)	Adjusted qualifying dis	tributions	Net value of no	(c) ncharitab				rided by col. (c))
2018	nning in)	Adjusted qualifying dis	tributions		(c) ncharitab	le-use assets 719300 463765			nded by col. (c)) • 0 5 5 2 6 6
2018 2017	nning in)	Adjusted qualifying dis	tributions		(c) ncharitab	719300			olded by col. (c)) 055266 083447
2018 2017 2016	aning in)	Adjusted qualifying dis	1715 tributions 39753.		(c) ncharitab	719300. 463765.			.055266 .053447 .705602
2018 2017	nning in)	Adjusted qualifying dis	39753. 38700. 14069.		(c) ncharitab	719300 463765 19939			.055266 .083447 .705602
2018 2017 2016 2015	ining in)	Adjusted qualifying dis	tributions 39753. 38700. 14069. 6000.		(c) ncharitab	719300 463765 19939 19213			.055266 .083447 .705602 .312289
2018 2017 2016 2015 2014	ning in)	Adjusted qualifying dis	tributions 39753. 38700. 14069. 6000.		(c) ncharitab	719300 463765 19939 19213			.055266 .083447 .705602 .312289
2018 2017 2016 2015 2014 • Total of line 1, column (d)	anning in /	Adjusted qualifying disi	39753. 38700. 14069. 6000.	Net value of no	(c) ncharitab	719300 463765 19939 19213 17920			.055266 .083447 .705602 .312289 .965458
2018 2017 2016 2015 2014 2 Total of line 1, column (d)	ne 5-year base po	Adjusted qualifying dist	39753. 38700. 14069. 6000.	Net value of no	(c) ncharitab	719300 463765 19939 19213 17920			.055266 .083447 .705602 .312289 .965458
2018 2017 2016 2015 2014 2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in exist	ne 5-year base potence if less thai	Adjusted qualifying dist	17301.	Net value of no	(c) ncharitab	719300 463765 19939 19213 17920	2		.055266 .083447 .705602 .312289 .965458
2018 2017 2016 2015 2014 2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in exist	ne 5-year base potence if less thai	Adjusted qualifying dist	17301.	Net value of no	(c) ncharitab	719300 463765 19939 19213 17920	2		.055266 .083447 .705602 .312289 .965458
2018 2017 2016 2015 2014 Protal of line 1, column (d) Average distribution ratio for the foundation has been in exist. Enter the net value of noncharit	ne 5-year base potence if less thai	Adjusted qualifying dist	17301.	Net value of no	(c) ncharitab	719300 463765 19939 19213 17920	2 3		.055266 .083447 .705602 .312289 .965458 2.122062 .424412
2018 2017 2016 2015 2014 Protal of line 1, column (d) Average distribution ratio for the foundation has been in exist. Enter the net value of noncharit	ne 5-year base potence if less thai	Adjusted qualifying dist	17301.	Net value of no	(c) ncharitab	719300 463765 19939 19213 17920	2		.055266 .083447 .705602 .312289 .965458 2.122062 .424412
2018 2017 2016 2015 2014 Total of line 1, column (d) Average distribution ratio for the foundation has been in exist the foundation has been the foundation has been in exist the net value of noncharite Multiply line 4 by line 3	ne 5-year base potence if less that	eriod - divide the total on 5 years for 2019 from Part X, I	17301.	Net value of no	(c) ncharitab	719300 463765 19939 19213 17920	2 3		10ded by col. (c)) 1055266 1083447 1705602 1312289 1965458 2.122062 1424412 769784 326706
2018 2017 2016 2015 2014 Total of line 1, column (d) Average distribution ratio for the foundation has been in exist the foundation has been the foundation has been in exist the net value of noncharite Multiply line 4 by line 3	ne 5-year base potence if less that	eriod - divide the total on 5 years for 2019 from Part X, I	17301.	Net value of no	(c) ncharitab	719300 463765 19939 19213 17920	2 3		10ded by col. (c)) 1055266 1083447 1705602 1312289 1965458 2.122062 1424412 769784 326706
2018 2017 2016 2015 2014 Protal of line 1, column (d) Average distribution ratio for the foundation has been in exist the foundatio	ne 5-year base potence if less that	eriod - divide the total on 5 years for 2019 from Part X, I	17301.	Net value of no	(c) ncharitab	719300 463765 19939 19213 17920	2 3		
2018 2017 2016 2015 2014 2 Total of line 1, column (d) 3 Average distribution ratio for the the foundation has been in exis 4 Enter the net value of noncharit 5 Multiply line 4 by line 3 6 Enter 1% of net investment income	ne 5-year base potence if less that	eriod - divide the total on 5 years for 2019 from Part X, I	17301.	Net value of no	(c) ncharitab	719300 463765 19939 19213 17920	2 3 4 5 6		10ed by col. (c)) 1055266 1083447 1705602 1312289 1965458 2.122062 1424412 769784 326706 1652 328358
2018 2017 2016 2015 2014 2 Total of line 1, column (d) 3 Average distribution ratio for the	ne 5-year base postence if less that table-use assets	eriod - divide the total on 5 years for 2019 from Part X, I	17301.	Net value of no	(c) ncharitab	719300 463765 19939 19213 17920	2 3 4 5 6		10ed by col. (c)) 1055266 1083447 1705602 1312289 1965458 2.122062 1424412 769784 326706

Capital Gallis allu Los	ises for Tax on Investment income				
(a) List and 2-story br	describe the kind(s) of property so ick warehouse, or common stock, 2	ld, e.g., real estate, 100 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr)	(d) Date sold (mo , day, yr.)
1a KOHL FOUNDATION	N PARTNERS-ST		P		
b KOHL FOUNDATION			P		
c KOHI FOUNDATION	N PARTNERS-1231		P		
d KOHL FOUNDATION	N PARTNERS-1256-	ST	P		
e KOHL FOUNDATION	PARTNERS-1256-	LT	P		
f 1307 SH APPLE S	STOCK		D	12/21/15	09/06/19
g					
h	<u> </u>				
<u>k</u>					
1					
<u>m</u>					
n					
0		T	<u> </u>		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) (e) p	Gain or (loss) lus (f) minus (g)	
a 2037.					2037.
b 3829.					3829.
c -263.					-263.
d 69.					69.
e 104.		100015			104.
f 232366.		103915.			128451.
9					
h					
1					
k	 	 		_	
m ·	 -				
n					
0	, · • • • • • • • • • • • • • • • • • •	<u> </u>			
	g gain in column (h) and owned by	the foundation on 12/31/69	(I) Los	ses (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	Gains (excess o	of col. (h) gain over ot less than "-0-")	col. (k),
a					2037.
b					3829.
С					-263.
d					, 69 .
e					104.
f					128451.
g					
h					
I					
<u> </u>					
k					
<u> </u>					 -
<u>m</u>	_	 			
n					
0	 	<u> </u>			
2 Capital gain net income or (net ca	pital loss) { If gain, also ente If (loss), enter "-	r in Part I, line 7 0-" in Part I, line 7	2		134227.
3 Net short-term capital gain or (los		5			
If gain, also enter in Part I, line 8, If (loss), enter "-0-" in Part I, line 8	column (c).	}	3	N/A	

orm 9	90-PF (2019) DOUGLAS & ABBY BROWN FAMILY FOUNDATION VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4940(b), 4940(e), or 4940(b), 4940(e), or 4940(e),		61006 e instru		Page 4
1a F	xempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				
	ate of ruling or determination letter: (attach copy of letter if necessary-see instructions)				
	omestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1		33	05.
	f Part I, line 27b				•••
	If other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)				
_	ax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	2			Ō.
	dd lines 1 and 2	3		33	05.
-	ubtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	4	-		0.
				33	05.
	ax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		33	05.
	redits/Payments:				
	019 estimated tax payments and 2018 overpayment credited to 2019 6a 603.	-			
b E	xempt foreign organizations - tax withheld at source 6b 0.	4			
	ax paid with application for extension of time to file (Form 8868) 6c 1000.				
d B	ackup withholding erroneously withheld 6d 0 •				
7 To	otal credits and payments Add lines 6a through 6d	7		16	03.
B E	nter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			0.
9 Ta	ax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		17	02.
0	verpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10			
	nter the amount of line 10 to be: Credited to 2020 estimated tax	11			
art	VII-A Statements Regarding Activities				
la D	uring the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene	ın		Yes	No
	ny political campaign?		1a		Х
	id it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the defin	ition	1b		Х
	the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	11.011			
					ľ
	istributed by the foundation in connection with the activities.		1		X
	id the foundation file Form 1120-POL for this year?		1c		
	nter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
	I) On the foundation. ► \$ O . (2) On foundation managers. ► \$ O .	-			
	nter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation				
	nanagers. ▶ \$0 .				
2 H	as the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
lf	"Yes," attach a detailed description of the activities.				
3 H	as the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, c	r			
by	ylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		X
a D	id the foundation have unrelated business gross income of \$1,000 or more during the year?		4a		Х
b If	"Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5 W	as there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
	"Yes," attach the statement required by General Instruction T				
	re 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			
		1444	6	x	_
	emain in the governing instrument?			X	
7 D	id 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		\vdash
Ba Fi	nter the states to which the foundation reports or with which it is registered. See instructions.				
	CA		_		
_	the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		_		
	f each state as required by General Instruction G? If "No," attach explanation		8b	<u>x</u>	
		ndar	- 60		
	the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cale	iiuai			x
	ear 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes," complete Part XIV Id any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		9		v
	in any percent percent currently contributors during the tay very a wark a saked le between their percent addresses		10	1	

923531 12-17-19

	n 990-PF(2019) DOUGLAS & ABBY BROWN FAMILY FOUNDATION 20-6061	<u>.006</u>		Page 5
Р	art VII-A Statements Regarding Activities (continued)			
			Yes	No
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		Х
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		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	~ `
	Website address ► N/A			
14	The books are in care of ▶ DOUGLAS BROWN Telephone no. ▶818 – 26	1-8	777	
	Located at ▶980 6TH ST, BOULDER, CO ZIP+4 ▶80	302		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here		•	$\cdot \Box$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16			Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country			
P	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1	a During the year, did the foundation (either directly or indirectly)			
•	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	ł		
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days) Yes X 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	1		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		بِ
	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 2019?	1c		X
,	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	-10		
	defined in section 4942(j)(3) or 4942(j)(5)):			
	a At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
	6d and 6e) for tax year(s) beginning before 2019? Yes X No			1
	If "Yes," list the years ►,,,,,,,,,,,,,,,			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			1
	statement - see instructions.) N/A	2b		
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
2	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			- 1
3	during the year?			
	b if "Yes," did it have excess business holdings in 2019 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 Form 4720, Schedule C. to determine if the foundation had excess business holdings in 2019.) N/A	3b		
	• • • • • • • • • • • • • • • • • • • •			X
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jcopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?	4b		$\overline{\mathbf{x}}$
	HAW NOU DEEN TEHIOVED ITOM JEOPATUY DEPOTE THE HIST DAY OF THE LAX YEAR DEGITINING III 2015'	1 40		41

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Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be Ro	equired _{(contin}	ued)			
5a During the year, did the foundation pay or incur any amount to:				Yes	s No	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	[es 🗓 No			
(2) Influence the outcome of any specific public election (see section 4955); of					ł	
any voter registration drive?			es X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes	າ		es X No			
• •			23 [22] 110		•	
(4) Provide a grant to an organization other than a charitable, etc., organization	ii described iii sectioni		s X No		ļ	
4945(d)(4)(A)? See instructions	·	ES [A] 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?	Yo	es X No				
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	n Regulations			_		
section 53.4945 or in a current notice regarding disaster assistance? See instri	uctions		N/A	5b		
Organizations relying on a current notice regarding disaster assistance, check l	nere			ļ		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it maintail	ned				
expenditure responsibility for the grant?			es No		1 1	
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	nav nremiums on					
a personal benefit contract?	pay promisino on		es X No			
·	parconal hanofit contract?	11		6b	- X	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p if "Yes" to 6b, file Form 8870.	ICI SUNAI DENENI CUMIACI.		F	-	↑	
,	. t t		👽 " l		i	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6	es X No		 	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			N/A	7b	 	
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	51,000,000 in remuneration or					
excess parachute payment(s) during the year?			es X No			
Part VIII Information About Officers, Directors, Trusto	es, Foundation Man	agers, Highly				
Paid Employees, and Contractors						
1 List all officers, directors, trustees, and foundation managers and t		1	(4) 0			
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred compensation	(e) Ex	opense ot, other	
(a) Name and address	to position	enter -0-)	compensation	allow	ances	
DOUGLAS BROWN	DIRECTOR & PR	ESIDENT				
980 6TH ST						
BOULDER, CO 80302	2.00	0.	0.		0.	
ABBY BROWN	DIRECTOR & VI	CE PRESIDI	ENT			
980 6TH ST	1					
BOULDER, CO 80302	1.00	0.	0.		0.	
BONNIE BROWN	TREASURER					
980 6TH ST	TREITEGRA	·				
BOULDER, CO 80302	1.00	0.	0.		0.	
BOULDER, CO 80302	1.00	•	0.		<u> </u>	
	-					
	luded on line 4\ 12 :	 				
2 Compensation of five highest-paid employees (other than those inc		inter "NUNE."	(d) Contributions to	In Fr	nonco	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	(e) EX	pense it, other	
	devoted to position	(=) = =	compensation	allow	ances	
N/A						
	0.00	0.	. 0.		0.	
	1	}				
	j					
	1					
Tetal number of other employees and over CEO 000	l					
Total number of other employees paid over \$50,000						

All other program-related investments. See instructions.

3

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0.

Total. Add lines 1 through 3

DOUGLAS & ABBY BROWN FAMILY FOUNDATION

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndation	s, see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
•	Average monthly fair market value of securities	1a	179729.
	Average of monthly cash balances	1h	98861.
	Fair market value of all other assets	1c	502917.
_	Total (add lines 1a, b, and c)	1d	781507.
	Reduction claimed for blockage or other factors reported on lines 1a and		
Ī	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	781507.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	11723.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	769784.
6	Minimum investment return. Enter 5% of line 5	6	38489.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an	d certa	
	foreign organizations, check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	38489.
2a	Tax on investment income for 2019 from Part VI, line 5		
b	Income tax for 2019 (This does not include the tax from Part VI.)]	
C	Add lines 2a and 2b	2c	3305.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	35184.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	35184.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	35184.
P	art XII Qualifying Distributions (see instructions)	,	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		22000
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	33800.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
þ	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	33800.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	33800.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years	ualifies	for the section

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DOUGLAS & ABBY BROWN FAMILY FOUNDATION

Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) 2018 2019 Years prior to 2018 Corpus 1 - Distributable amount for 2019 from Part XI. 35184. line 7 2 Undistributed income, if any, as of the end of 2019 0. a Enter amount for 2018 only b Total for prior years: 0 3 Excess distributions carryover, if any, to 2019: 16858. a From 2014 5473. **b** From 2015 13334. c From 2016 16161. d From 2017 4185 e From 2018 56011 f Total of lines 3a through e 4 Qualifying distributions for 2019 from 33800. Part XII, line 4. ► \$ 0. a Applied to 2018, but not more than line 2a b Applied to undistributed income of prior 0. years (Election required - see instructions) c Treated as distributions out of corpus 0. (Election required - see instructions) 33800. d Applied to 2019 distributable amount 0. e Remaining amount distributed out of corpus Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a)) 1384. 1384. Enter the net total of each column as indicated below: 54627. a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract 0. 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 0 . assessed d Subtract line 6c from line 6b. Taxable 0. amount - see instructions e Undistributed income for 2018 Subtract line 0. 4a from line 2a. Taxable amount - see instr. f Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must 0. be distributed in 2020 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election 0. may be required - see instructions) 8 Excess distributions carryover from 2014 15474 not applied on line 5 or line 7 9 Excess distributions carryover to 2020. 39153. Subtract lines 7 and 8 from line 6a 10 Analysis of line 9: 5473. a Excess from 2015 13334. b Excess from 2016 16161 c Excess from 2017 4185. d Excess from 2018 e Excess from 2019

Form 990-PF (2019) DOUGLAS	& ABBY BRO	WN FAMILY FO	OUNDATION	20-60	61006 Páge 10
Rart XIV Private Operating Fo			A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for			▶ ∟_		
b Check box to indicate whether the found		g foundation described in)42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	/b) 2010	Prior 3 years	(4) 2016	(a) Tatal
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
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			ļ,	4	
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)			İ		
(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	1				
Part XV Supplementary Info	rmation (Complet	te this part only it	the foundation	had \$5,000 or mor	e in assets
at any time during the	he year-see instru	uctions.)			
1 Information Regarding Foundatio	n Managers:				
a List any managers of the foundation who		than 2% of the total contr	ibutions received by the	foundation before the clos	e of any tax
year (but only if they have contributed in			·		·
SEE STATEMENT 11					
b List any managers of the foundation who	o own 10% or more of the	e stock of a corporation (or an equally large porti	on of the ownership of a pa	rtnership or
other entity) of which the foundation has	s a 10% or greater interes	it.	, , ,	, ,	•
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pro	ograms:		
Check here ► X if the foundation o				not accept unsolicited requi	ests for funds. If
the foundation makes gifts, grants, etc.,					
a The name, address, and telephone numb				_	
a The hame, address, and telephone ham	or or ornar address or an	o porcon to amon applica			
b The form in which applications should b	e submitted and informat	ion and materials they sh	ould include:		
b The form in which applications should b	o ocomittoo and miorinat	.o and materials they sh			
c Any submission deadlines:					
Chair Submission Soudines.					
d Any restrictions or limitations on awards	s, such as by geographica	il areas, charitable fields,	kınds of institutions, or	other factors:	
-	·				

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Part XV Supplementary Information				
3 Grants and Contributions Paid During the		Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
Paid during the year				
ROCKY MOUNTAIN CHASSIDIC CENTER	NONE	PUBLIC CHARITY	PROVIDE GENERAL FUNDS	
1871 FOLSOM ST			TO THE PAYEE	
BOULDER, CO 80302			CHARITABLE	
			ORGANIZATION	1800
CYCLE FOR SURVIVAL-MEMORIAL SLOAN	NONE	PUBLIC CHARITY	PROVIDE GENERAL FUNDS	
KETTERING		1	TO THE PAYEE	
885 SECOND AVE			CHARITABLE	
NEW YORK, NY 10017		<u></u>	ORGANIZATION	1000
WAR WARM MENDAGE	MONE	DIIDI TO CUADITAV	PROVIDE GENERAL FUNDS	
HAR HASHEM TEMPLE 3950 BASELINE RD	NONE	PUBLIC CHARITY	TO THE PAYEE	
BOULDER, CO 80303			CHARITABLE	
200222M, 60 00000			ORGANIZATION	1800
GOUCHER COLLEGE	NONE	PUBLIC CHARITY	PROVIDE GENERAL FUNDS	
1021 DULANEY VALLEY RD			TO THE PAYEE CHARITABLE	
BALTIMORE, MD 21204			ORGANIZATION	1000
		-		
FOUNTAIN VALLEY SCHOOL	NONE	PUBLIC CHARITY	PROVIDE GENERAL FUNDS	
10055 SLATER AVE			TO THE PAYEE	
FOUNTAIN VALLEY, CA 92708			CHARITABLE ORGANIZATION	7200
Total SEE CO	ONTINUATION SHEE	T(S)	▶ 3a	33800
b Approved for future payment	•••••			
- Approved tel latare per mem				
NONE				
				•
		<u> </u>		
Total			▶ 3b	0 m 990-PF (2019

Part XV. Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to contribution Amount status of any foundation manager Name and address (home or business) recipient or substantial contributor PUBLIC CHARITY PROVIDE GENERAL FUNDS YALE UNIVERSITY NONE TO THE PAYEE PO BOX 2038 NEW HAVEN, CT 06521 CHARITABLE DRGANIZATION 18000. PUBLIC CHARITY PROVIDE GENERAL FUNDS NONE XAVIER MISSION TO THE PAYEE 55 WEST 15TH ST NEW YORK, NY 10011 CHARITABLE 500. ORGANIZATION NONE PUBLIC CHARITY PROVIDE GENERAL FUNDS ASPEN VALLEY HOSPITAL FOUNDATION 401 CASTLE CREEK RD TO THE PAYEE CHARITABLE ASPEN, CO 81611 DRGANIZATION 2500. 21000. Total from continuation sheets

DOUGLAS & ABBY BROWN FAMILY FOUNDATION

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ed by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a	ged.		 		
b					·
c			i i		
d					
e			i i		
1					
g Fees and contracts from government agencies				-	
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	56.	
Dividends and interest from securities			14	33771.	
5 Net rental income or (loss) from real estate:			1 - 1		
a Debt-financed property					
b Not debt-financed property			††		
6 Net rental income or (loss) from personal			t	-	
property					
7 Other investment income			14	-306.	
8 Gain or (loss) from sales of assets other			 		
than inventory			18	134227.	
9 Net income or (loss) from special events			 		
O Gross profit or (loss) from sales of inventory					
1 Other revenue:				-	
			1		
·	1				
d	1				
d e	1	0.		167748.	0
d e 2 Subtotal. Add columns (b), (d), and (e)	1	0.		167748.	4 6 5 5 4 6
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e)		0.			
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculatio	ins)			13	4 6 5 5 4 6
d	ins)			13	4 6 5 5 4 6
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculatio	ies to the Accor	nplishment of Exc	empt F	13 Purposes	167748
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculatio Part XVI-B Relationship of Activiti	ins) ies to the Accor	mplishment of Exe	empt F	13 Purposes	167748
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for whice	ins) ies to the Accor	mplishment of Exe	empt F	13 Purposes	167748
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) Gee worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for whice	ins) ies to the Accor	mplishment of Exe	empt F	13 Purposes	167748
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e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for whice	ins) ies to the Accor	mplishment of Exe	empt F	13 Purposes	167748
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for whice	ins) ies to the Accor	mplishment of Exe	empt F	13 Purposes	167748
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for whice	ins) ies to the Accor	mplishment of Exe	empt F	13 Purposes	167748
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e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for whice	ins) ies to the Accor	mplishment of Exe	empt F	13 Purposes	167748
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for whice	ins) ies to the Accor	mplishment of Exe	empt F	13 Purposes	167748
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for whice	ins) ies to the Accor	mplishment of Exe	empt F	13 Purposes	167748
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for whice	ins) ies to the Accor	mplishment of Exe	empt F	13 Purposes	167748
e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculation Part XVI-B Relationship of Activiti Line No. Explain below how each activity for whice	ins) ies to the Accor	mplishment of Exe	empt F	13 Purposes	167748
d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculatio Part XVI-B Relationship of Activiti Line No. Explain below how each activity for whice	ins) ies to the Accor	mplishment of Exe	empt F	13 Purposes	167748

FairVA	Exempt Organ	-	siers to a	iiu iransaciions ai	nu neiations	inps with Nonci	liaritable		
1 Did the	e organization directly or indi		of the following	on with any other organization	on described in sec	ction 501(c)		Yes	No
	than section 501(c)(3) organ					0.0.0			
	ers from the reporting found						İ		
(1) Ca				ya			1a(1)		X
	ther assets						1a(2)		Х
• •	transactions:								
(1) Sa	ales of assets to a noncharita	ble exempt organizat	ion				1b(1)		X
(2) Purchases of assets from a noncharitable exempt organization									Х
	ental of facilities, equipment,						1b(3)		Х
(4) Re	eimbursement arrangements						15(4)		Х
(5) Lo	oans or loan guarantees						1b(5)		Х
(6) Pe	erformance of services or me	mbership or fundrais	sing solicitatio	ons			1b(6)		Х
c Sharin	ig of facilities, equipment, ma	uling lists, other asse	its, or paid em	ployees			1c		X
d If the a	answer to any of the above is	"Yes," complete the t	following sche	edule Column (b) should al	ways show the fair	market value of the go	ods, other ass	ets,	
or serv	vices given by the reporting fo	oundation. If the four	idation receiv	ed less than fair market valu	ie in any transactio	on or sharing arrangem	ent, show in		
columi	n (d) the value of the goods,								
(a) Line no	(b) Amount involved	(c) Name of		e exempt organization	(d) Descripti	on of transfers, transactions	, and sharing arra	angemen	its
			N/A						
	 								
									
					_				
					 -				
	<u></u>			=		-			
	.								
					-				
									
ın sect	foundation directly or indirection 501(c) (other than section, complete the following sch	n 501(c)(3)) or ın se edule.	=		zations described		Yes	X	No
	(a) Name of org	janization		(b) Type of organization		(c) Description of rela	itionship		
	N/A								
									
					.				
		-					 		
Lue	nder penalties of perjury, I declare t	hat I have examined this	return including	accompanying schedules and st	atements and to the h	nest of my knowledge			
Sign Here	and perialities of perially, it decides to detect and compared to the perialities of the	plete Declaration of pre			tion of which preparer	has any knowledge	May the IRS of return with the shown below?	prepare 7 See ins	er
	Print/Type preparer's na		Preparer's s		Date	Check If F	PTIN		
	Time Type preparer 5 fla		i i opaici 3 3	ignatur v		self- employed			
Paid									
Prepare	Firm's name		·			Firm's EIN			
Use On		-				, , , , , ,			
	Firm's address ▶								
						Phone no.			
		<u> </u>		<u>.</u>			Form 990)-PF	(2019)

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2019

Employer identification number

DOUGLAS & ABBY BROWN FAMILY FOUNDATION 20-6061006 Organization type (check one) Section: Filers of: Form 990 or 990-F7 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2019)

Name of organization

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DOUGLAS & ABBY BROWN FAMILY FOUNDATION

20-6061006

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space is needed.					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
1	ALLEN KOHL CHARITABLE FOUNDATION 11812 SAN VICENTE BLVD, STE 510 LOS ANGELES, CA 90049	\$50000 .	Person X Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)			

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20-6061006

Part II No	oncash Property (see instructions) Use duplicate copies of Pa	art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_			
			<u> </u>
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
- -			
_		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_ _		<u> </u>	
		 \$	
(a) No. from	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_			
(a) No. From	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		\$	

lame of orga	anization			Employer identification number
OUGLAS	S & ABBY BROWN FAMILY FO	DUNDATION		20-6061006
Part III	Exclusively religious, charitable, etc., contribution from any one contributor. Complete columns (a) the	prough (e) and the following line entr	v For organizations	
	completing Part III, enter the total of exclusively religious, cha Use duplicate copies of Part III if additional sp	tritable, etc., contributions of \$1,000 or le	ess for the year (Enterthis info onc	se } ▶\$
(a) No. from	1		(-0.5	
Part I	(b) Purpose of gift	(c) Use of gift	(a) Desc	cription of how gift is held
-			<u> </u>	· · · · · · · · · · · · · · · · · · ·
-				
		(e) Transfer of gift		
	Transferee's name, address, and	ZIP + 4	Relationship of tra	nsferor to transferee
-				
-				
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
Part I				
-				
-		· -		
<u> </u>		(e) Transfer of gift	L	
-	Transferee's name, address, and	ZIP + 4	Relationship of tra	nsferor to transferee
-				-
(a) No.				
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
-				
-				
L				
		(e) Transfer of gift		
	Transferee's name, address, and	ZIP + 4	Relationship of tra	nsferor to transferee
[-				
-				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
Part I				
-				
-		<u> </u>		
		(e) Transfer of gift		
			_	
	Transferee's name, address, and	ZIP + 4	Relationship of tra	nsferor to transferee
-				
-				

FORM 990-PF INTER	EST ON SAVINO	S AND T	EMPOR	ARY	CASH	IN	VESTMENTS	S	TATEMENT 1
SOURCE		RE	(A) EVENUE R BOOKS		NET	IN	(B) VESTMENT COME		(C) ADJUSTED NET INCOME
WELLS FARGO CLEARIN	G SERVICES		,	51.			51. 5.		
TOTAL TO PART I, L	INE 3			56.			56.	_	
FORM 990-PF	DIVIDENDS	AND INT	EREST	FRO	M SEC	UR	ITIES	S	TATEMENT 2
SOURCE	GROSS AMOUNT	CAPIT GAIN DIVIDE	IS	RE	(A) VENUE BOOK	C	(B) NET INVES MENT INCO	ST-	
KOHL FOUNDATION PARTNERS - DIV KOHL FOUNDATION	372.		0.		37	72.	3.	72.	
PARTNERS - INT LOAN OAK FUND LLC	2741.		0.		274			41.	
- DIV WELLS FARGO CLEARING SERVICES	27829. 2829.		0.		2782 282		278: 28:	29.	
TO PART I, LINE 4	33771.		0.		3377	11.	337	71.	
700W 000 DE		OMITED	TNGO		<u>-</u>				TATEMENT 3
FORM 990-PF		OTRER	INCO	16				<u>.</u>	IAIEMENI 3
DESCRIPTION			REV	(A) /ENU BOO			(B) ET INVEST- ENT INCOM		(C) ADJUSTED NET INCOME
KOHL FOUNDATION PAR	RTNERS				-306.	-	-306	— - 5.	
TOTAL TO FORM 990-F	PF, PART I, I	LINE 11			-306.		-306	5.	

FORM 990-PF	TAXES		STATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
REGISTRATION FEES FEDERAL TAXES	60. 2690.			0.
TO FORM 990-PF, PG 1, LN 18	2750.	0.		0.
EORM 990 DE	OWNED E	YDFNCEC		
EORM 000 DE	OMUED E	YDENCEC	c	
FORM 990-PF	OTHER E	(B)	(C)	TATEMENT 5
FORM 990-PF DESCRIPTION		(B) NET INVEST-	(C) ADJUSTED	(D) CHARITABLE
DESCRIPTION KOHL FOUNDATION PARTNERS EXPENSES	(A) EXPENSES	(B) NET INVEST- MENT INCOME	(C) ADJUSTED	(D) CHARITABLE
DESCRIPTION KOHL FOUNDATION PARTNERS	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED	(D) CHARITABLE PURPOSES

FORM 990-PF	OTHER INCREASES IN NET ASSETS OR FUND BALANCES	STATEMENT 6
DESCRIPTION		AMOUNT
NONDEDUCTIBLE	EXPENSE & TAX EX INC PER KOHL PARTNERS	278.
TOTAL TO FORM	990-PF, PART III, LINE 3	278.
FORM 990-PF	OTHER DECREASES IN NET ASSETS OR FUND BALANCE	S STATEMENT 7
DESCRIPTION		AMOUNT
UNREALIZED GAI	NS ON INVESTMENTS CARRIED AT FMV	77041.

BOOK VALUE	FAIR MARKET VALUE
121993.	121993.
121993.	121993.
=	121993.

FORM 990-PF	OTHER INVESTMENTS		STATEMENT 9
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
LOAN OAK FUND	COST	500000.	500000.
TOTAL TO FORM 990-PF, PART II,	LINE 13	500000.	500000.

FORM 990-PF	OTHER ASSETS	STATEMENT 10	
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
LOAN OAK FUND - INTEREST RECEIVABLE	0.	2917.	2917.
TO FORM 990-PF, PART II, LINE 15	0.	2917.	2917.

FORM 990-PF	PART XV - LINE 1A	STATEMENT 11
	LIST OF FOUNDATION MANAGERS	

NAME OF MANAGER

DOUGLAS BROWN ABBY BROWN