## **Return of Private Foundation**

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

▶ Do not enter social security numbers on this form as it may be made public.

OWR No	154	5-0047
200	1	0

Department of the Treasury Internal Revenue Service ► Go to www.irs.gov/Form990PF for instructions and the latest information.

	For	calen	dar year 2019 or tax year beginning		, 2019, an			, 20	
	Name of foundation					A Employe	r identification numb	er	
	PERKINS FAMILY FOUNDATIONN						81-0545377		
	Number and street (or PO box number if mail is not delivered to street address)				Room/suite	B Telephon	e number (see instruct	•	
			KNOLL LANE				406-862-7307	<u> </u>	
			, state or province, country, and ZIP or foreign postal code			C If exempt	ion application is pend	ling, check here ►	
			H MT 59937					_	
	G	Check			oublic char	ity <b>D 1</b> . Foreigi	n organizations, check	here	
			☐ Final return ☐ Amended i ☐ Address change ☐ Name chai				organizations meetin		
		Ola a al	<u> </u>		N		here and attach comp		
			type of organization				foundation status was 07(b)(1)(A), check here		
			narket value of all assets at   J   Accounting method			<del>.  </del>		_	
A3			f year (from Part II, col. (c),	Casii i		1 11 11 11 10 10 10	ndation is in a 60-mont stion 507(b)(1)(B), chec	th termination k here	
11/			(Part I, column (d), must be (Part I), column (d), must be	e on cash bası	s )			_	
51		art I	Analysis of Revenue and Expenses (The total of	(a) Revenue		.1		(d) Disbursements	
<i>U</i> 9			amounts in columns (b), (c), and (d) may not necessarily equal	èxpenses p		Net investment income	(c) Adjusted net income	for charitable purposes	
- 1			the amounts in column (a) (see instructions))	books				(cash basis only)	
		1	Contributions, gifts, grants, etc , received (attach schedule)	4	12266				
		2	Check ► ☐ if the foundation is not required to attach Sch B						
SC		3	Interest on savings and temporary ( ments						
Ž		4	Dividends and interest from securit .		985	985			
4		5a	Gross rents .					<u> </u>	
面	4.	b	Net rental income or (loss)		1030				
O	ΩE	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a		1030				
₹	Revenue	b 7	Capital gain net income (from Part IV, line 2)			1030			
SCANNED JAN 2	Be	8	Net short-term capital gain						
	_	9	Income modifications	L				<del>                                     </del>	
Ö		10a	Gross sales less returns and allowances						
2022		b	Less Cost of goods sold						
22		С	Gross profit or (loss) (attach schedule)						
77		11	Other income (attach schedule) .						
1 APR 13'21		12	Total. Add lines 1 through 11 .		14281	2015			
	S	13	Compensation of officers, directors, trustees, etc						
8	Expenses	14	Other employee salaries and wages						
-	ē	15	Pension plans, employee benefits						
	Ä	16a b	Legal fees (attach schedule) .  Accounting fees (attach schedule) .		1/5	1 /5			
22	Ve	C	Other professional fees (attach schedule) .		- ''	1,75			
0	ati	17	Interest	o <u></u>					
~	str	18	Taxes (attach schedule) (see instructions)	R	ECEIV	ED			
~	Ē	19	Depreciation (attach schedule) and depletion .			72			
23	卢	20	Occupancy	12 (N	TV 22	2020			
-4	Ϋ́	21	Travel, conferences, and meetings		OV E	2020			
0	auc	22 .	Printing and publications						
	Operating and Administrative	23	Other expenses (attach schedule)	L 0	GDEN	, UT	<u>-</u>		
	atir	24	Total operating and administrative expenses.	<u> </u>					
	er	0-	Add lines 13 through 23		175	175		1900	
	o	25	Contributions, gifts, grants paid		1900 2075	175	· · · · · · · · · · · · · · · · · · ·	1900	
		26 27	Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12.		2073	1/3		1700	
1.		21 a	Excess of revenue over expenses and disbursements		12206				
R		a b	Net investment income (if negative, enter -0-)			1840		†	
Ũ			Adjusted not income (if positive enter -0-)		_			<del>                                     </del>	

Cat No 11289X

For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2019)

Part II		Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	f year
		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash—non-interest-bearing	120	100	100
	2	Savings and temporary cash investments	39,939	52165	52509
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less allowance for doubtful accounts ▶			
	5 Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule) ▶			
		Less allowance for doubtful accounts ▶			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
As	10a	Investments – U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule) .			
	С	Investments—corporate bonds (attach schedule) .			
	11	Investments—land, buildings, and equipment basis ▶			
		Less: accumulated depreciation (attach schedule) ▶			
	12	Investments-mortgage loans			
	13	Investments – other (attach schedule)			
	14	Land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers—see the			
		ınstructions Also, see page 1, item l)	40,059	52265	52609
	17	Accounts payable and accrued expenses			
Ş	18	Grants payable			
itie	19	Deferred revenue		<u> </u>	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Lia	21	Mortgages and other notes payable (attach schedule)			1
	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)			
Balances		Foundations that follow FASB ASC 958, check here			
ЭĽ	0.4	and complete lines 24, 25, 29, and 30.			
ala	24	Net assets without donor restrictions		·	
	25	<u> </u>			<u> </u>
'n		Foundations that do not follow FASB ASC 958, check here ► ☐ and complete lines 26 through 30.			,
rЕ	26	Capital stock, trust principal, or current funds	1,000	1000	
3 0	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
ets	28	Retained earnings, accumulated income, endowment, or other funds	39,059	51265	
Net Assets or Fund	29	Total net assets or fund balances (see instructions)	40,059	52265	
tρ	30	Total liabilities and net assets/fund balances (see			
Ň		instructions)	40,059	52265	
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			
		I net assets or fund balances at beginning of year-Part II, colui	mn (a), line 29 (mus	t agree with	
		of-year figure reported on prior year's return)		1	40,059
2		r amount from Part I, line 27a	2_	12206	
3		3			
4		lines 1, 2, and 3		4	52265
5	Decr	eases not included in line 2 (itemize)   I net assets or fund balances at end of year (line 4 minus line 5)—F		5	50015
6	Tota	I net assets or fund balances at end of year (line 4 minus line 5)—I	art II, column (b), lir	ne 29 . <b>6</b>	52265

Part	V Capital Gains and	d Losses for Tax on Investn	nent Income			
		nd(s) of property sold (for example, real e ise, or common stock, 200 shs MLC Co	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )	
1a CAPITAL GAIN DISTRIBUTION P				VARIOUS	VARIOUS	
<u></u> b	BLACKROCK BOND FUND	<del></del>	Р	8/30/19	12/4/19	
<u>_</u>	BLACKROCK FUND		<del>-</del>	Р	5/31/18	12/4/19
d	BLOCKROCK GLOBAL		-	P	3/10/08	12/4/19
e						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis		n or (loss) f) minus (g))
а	1069					1069
b	23			23		0
С	604			612		-8
d	1400			1431		-31
е						
	Complete only for assets sho	owing gain in column (h) and owned	by the foundation	on 12/31/69	(I) Gains (Col	(h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any	col (k), but no	less than -0-) <b>or</b> rom col (h))
a						<del></del>
b						····
<u>C</u>						
d						
e						
2	Capital gain net income o		also enter in Pa , enter -0- in Pai		2	1030
3	If gain, also enter in Part	n or (loss) as defined in sections I, line 8, column (c). See instru 			3	
Part		ler Section 4940(e) for Redu	uced Tax on N	let Investment		
		ivate foundations subject to the				
	ion 4940(d)(2) applies, leav		.,			
	s," the foundation doesn't o	section 4942 tax on the distribution and section 4940(e). Do	not complete t	his part	· 	☐ Yes ☐ No
_ 1		ount in each column for each ye	ar; see the instru	uctions before m	akıng any entries.	
Cale	(a) Base period years indar year (or tax year beginning in	(b) Adjusted qualifying distribution	s Net value o	(c) f noncharitable-use a		(d) ribution ratio divided by col (c))
	2018					
	2017					
	2016					
	2015					
	2014					
2	Total of line 1, column (d)				2	
3		for the 5-year base period—divoundation has been in existence			r by 3	
4	Enter the not value of non	charitable-use assets for 2019 f	rom Part X, line	5	4	
5	Multiply line 4 by line 3				. 5	
6	Enter 1% of net investme	nt income (1% of Part I, line 27b	o)		6	
7	Add lines 5 and 6				. 7	
8	Enter qualifying distribution	ons from Part XII, line 4 attention	n Dart VII line 4 li		. 8	% tay rata Saa tha
	Part VI instructions.	ater trian line /, check the box ii	n ran vi, iiie 10	, and complete	iliai pari usiliy a 1	/ lax rate See the

Part		<u>instrı</u>	uctio	1S)	
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☑ and enter "N/A" on line 1.				
	Date of ruling or determination letter 06/13/02 (attach copy of letter if necessary—see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			N/A	
	here ► □ and enter 1% of Part I, line 27b			]	
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of				
•	Part I, line 12, col. (b)				
2	(4)(7)				
3	, tod into Tana 2 T T T T T T T T T T T T T T T T T T		-		
4	- Control				
5	Tax based on more desirable more many and more more many and more more many and more more more more many and more more more more more more more more	<del></del>			
6	Credits/Payments:  2019 estimated tax payments and 2018 overpayment credited to 2019   6a				
a					
b	Zionipi foreign enganizatione tax minimize an object of			]	
Ç	Tax paid with application for extension of time to file (Form 8868) 6c			- (	
_d	Backup withholding erroneously withheld				
7	Total ordano and paymonto ridd imod od timodgir od				
8	Zinor any perianty for anadipayment of sectional and entering in the section and enter				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				
10					
11 Part	L. I.				
		T	Yes	No	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	1.03	<del></del>	
_	• • •	"	-		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		~	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			1	
	published or distributed by the foundation in connection with the activities	<u> </u>			
С	Did the foundation file Form 1120-POL for this year?	1c			
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.				
	(1) On the foundation ▶ \$ (2) On foundation managers ▶ \$			1	
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed				
_	on foundation managers ▶ \$			<u> </u>	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.			<del></del>	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles				
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3			
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a			
. b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by <i>General Instruction T</i>	5		$\dot{\overline{}}$	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			1	
	By language in the governing instrument, or				
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that				
	conflict with the state law remain in the governing instrument?	6	-		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	1		
8a	Enter the states to which the foundation reports or with which it is registered. See instructions				
	MONTANA				
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G?</i> If "No," attach explanation .	8b	~		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or		ļ		_
	4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes,"				1)
	complete Part XIV	9			2
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10			

Part	/II-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 neaning of section 512(b)(13)? If "Yes," attach schedule See instructions	the 11		,
12	old the foundation make a distribution to a donor advised fund over which the foundation or a disqualiful terson had advisory privileges? If "Yes," attach statement See instructions	ied   12		-
13	old the foundation comply with the public inspection requirements for its annual returns and exemption application	on? <b>13</b>		
	Vebsite address ► N/A			
14	he books are in care of ▶ GREG PERKINS Telephone no ▶	406-862-		
	ocated at ► 112 PARK KNOLL LANE WHITEFISH MT ZIP+4 ►	5993		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—check here and enter the amount of tax-exempt interest received or accrued during the year			<b>▶</b> ⊔
16	at any time during calendar year 2019, did the foundation have an interest in or a signature or other autho over a bank, securities, or other financial account in a foreign country?	rity . <b>16</b>	Yes	No
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name	of		
Dog.	the foreign country			!
Part	Statements Regarding Activities for Which Form 4720 May Be Required		Voc	No
٠.	ile Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No 1
1a	Ouring the year, did the foundation (either directly or indirectly)	Na		1
	<ol> <li>Engage in the sale or exchange, or leasing of property with a disqualified person?</li> <li>Yes</li> <li>Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a</li> </ol>	No		
		No	'	
		No		
	-, ·································	No		
	5) Transfer any income or assets to a disqualified person (or make any of either available for			
		No		
	6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after		i '	1
		No		
b	any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described	ın		
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	·1b		
	,			
С	old the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, t			
_	vere not corrected before the first day of the tax year beginning in 2019?	1c		
2	axes on failure to distribute income (section 4942) (does not apply for years the foundation was a priviperating foundation defined in section 4942(j)(3) or 4942(j)(5))	ate		
а	at the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines			
		No		
	"Yes," list the years ▶ 20, 20, 20, 20			
b	are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a			
	relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			
		2b	ļ	
С	the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here 20 , 20 , 20 , 20			
За	Old the foundation hold more than a 2% direct or indirect interest in any business enterprise			
-	•	No		
h	"Yes," did it have excess business holdings in 2019 as a result of (1) any purchase by the foundation	or		
J	lisqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse			
	ne 10-, 15-, or 20-year first phase holding period? (Use Form 4720, Schedule C, to determine if			
	oundation had excess business holdings in 2019)	3b		
4a	old the foundation invest during the year any amount in a manner that would jeopardize its charitable purpose	s? <b>4a</b>		
b	old the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize	ıts		
	haritable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 20 <sup>-</sup>	197 <b>4b</b>		-

Part	VII-B Statements Regarding Activities	s for W	/hich Form	4720	May Be P	equire	d (contii	nued)			
5a	During the year, did the foundation pay or incur	any am	ount to							Yes	No
	(1) Carry on propaganda, or otherwise attempt to			on (sect	ion 4945(e	))? .	🗌 Yes	☑ No			
	(2) Influence the outcome of any specific public election (see section 4955); or to carry on,										
	directly or indirectly, any voter registration di	ıve?					☐ Yes	✓ No			j
	(3) Provide a grant to an individual for travel, stu	ıdy, or d	other similar i	ourpose	es? .		☐ Yes	✓ No			
	(4) Provide a grant to an organization other than					ribed in			1		
	section 4945(d)(4)(A)? See instructions .						☐ Yes	☑ No			
	(5) Provide for any purpose other than religious	, charit	able, scientif	c, litera	ary, or educ	cational					
	purposes, or for the prevention of cruelty to	childrer	or animals?				☐Yes	☑ No	ŀ		
b	If any answer is "Yes" to 5a(1)-(5), did any of the	ne trans	actions fail t	o qualif	y under th	е ехсер	tions des	cribed			]
	in Regulations section 53 4945 or in a current no	otice reg	garding disas	ter ass	stance? So	ee instri	uctions	•	5b		
	Organizations relying on a current notice regardi	ng disa	ister assistan	ce, che	ck here						
С	If the answer is "Yes" to question 5a(4), does to			exem	otion from	the tax					
	because it maintained expenditure responsibility	for the	grant?	•			☐ Yes	☐ No			1
	If "Yes," attach the statement required by Regula	ations s	section 53 49	45-5(d)							- {
6a	Did the foundation, during the year, receive any	funds,	directly or in-	directly	, to pay pre	emiums					]
	on a personal benefit contract?				•		Yes	☑ No			]
b	Did the foundation, during the year, pay premiur	ns, dıre	ctly or indire	ctly, on	a personal	benefit	contract	?.	6b		
	If "Yes" to 6b, file Form 8870						_	_			ì
7a	At any time during the tax year, was the foundation								-		
b	If "Yes," did the foundation receive any proceed		•				ansaction	า? .	7b		
8	Is the foundation subject to the section 4960 ta										ı
	remuneration or excess parachute payment(s) d						Yes	✓ No			
Part	VIII Information About Officers, Direct	tors, 1	rustees, F	ounda	tion Man	agers,	Highly F	Paid E	mploy	ees,	
	and Contractors					. 1	· · · · · · · · · · · · · · · · · · ·				
1	List all officers, directors, trustees, and found								•		
	(a) Name and address	hou devot	e, and average rs per week ed to position	(If r	mpensation ot paid, ter -0-)	emplo	Contributions yee benefit erred compe	plans	(e) Expe	nse acc allowan	ces
GREG	& KAREN PERKINS	TRUST	EE 1		0						
	RK KNOLL LANE WHITEFISH MT 59937										
	E TURNER	TRUST	EE, 0		0						
	BOWERMAN DR KALISPELL, MT 59901	TDUCT	FE 0								
	& SARAH PERKINS	TRUST	EE, U		0						
5484 V	ANDADIUM ST NEW RAMSEY MN 55303										
	Compensation of five highest-paid employed	- /- 41-	41 41						.\ I6		
2	"NONE."	es (0tii	er man mo	se mon	Jueu on n	ile i — s	see msu	uctions	s <i>j</i> . II III	Jile, e	iiiei
			1				(d) Contribu	itions to			
	a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v	verage reek	(c) Compe	nsation	employee plans and o	benefit	(e) Expe	nse acc	
	, , , , , , , , , , , , , , , , , , , ,		devoted to po	osition	, , ,		compens		Outer	allowalli	JE3
NONE											
·			ļ								
				_							
									-		
						{					
									•		
Total	number of other employees paid over \$50,000	, .	,					<b>•</b>			

3	and Contractors (continued)  Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	,,
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON		<del></del>
		***************************************
	I number of others receiving over \$50,000 for professional services	
Pa	t IX-A Summary of Direct Charitable Activities	
	st the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	THE FOUNDATION SUPPORTS THE EDUCATIONAL ADVANCEMENT OF YOUTH THROUGH DONATIONS AND	
	SCHOLARSHIPS TO VARIOUS CHARITABLE ORGANIZATIONS. THE FOUNDATION DONATED TO CHARITY	1,900
	ORGANIZATIONS TO HELP EDUCATE CHILDREN IN 2019	
2		
3		
	***	
4		
В.	LIVE COMPANY Deleted Investment (see materials)	
	t IX-B Summary of Program-Related Investments (see instructions)	Amount
	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	
1		
2		
2		
	other program-related investments. See instructions	
Al		
	l la companya di managantan di managantan di managantan di managantan di managantan di managantan di managanta	
АI <b>3</b>		

Part	X Minimum Investment Return (All domestic foundations must complete this part. Fore	ign founda	tions,
	see instructions.)	<del></del>	
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	38333
a	Average of monthly cash balances	1b	100
b	Fair market value of all other assets (see instructions)	1c	0
c	Total (add lines 1a, b, and c)	1d	38433
d e	Reduction claimed for blockage or other factors reported on lines 1a and	Tu	30433
e	1c (attach detailed explanation)		
0	Acquisition indebtedness applicable to line 1 assets	2	
2 3	Subtract line 2 from line 1d	3	38433
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see	-	
*	instructions)	4	576
-	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	37857
5 6	Minimum investment return. Enter 5% of line 5	6	1893
		1. • 1	
Part	and certain foreign organizations, check here ► and do not complete this part.)	iouridation.	5
1	Minimum investment return from Part X, line 6	1	1893
2а	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	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1893
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1893
6	Deduction from distributable amount (see instructions)	6	
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5 Enter here and on Part XIII,		
•	line 1	7	1893
Part	XII Qualifying Distributions (see Instructions)	<u> </u>	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		·
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	1900
b	Program-related investments—total from Part IX-B	1b	•
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1900
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		
	Enter 1% of Part I, line 27b See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1900
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	a whether t	he foundation
	qualifies for the section 4940(e) reduction of tax in those years	J	

Part	XIII Undistributed Income (see instruction	ons)			
		(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1	Distributable amount for 2019 from Part XI, line 7				1893
2	Undistributed income, if any, as of the end of 2019				
а	Enter amount for 2018 only			1,532	
b	Total for prior years 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2019	'	[		
а	From 2014	-			
þ	From 2015 .	-			
C	From 2016	-		1	
d	From 2017	-			
e	From 2018  Total of lines 3a through e			4 m4 g 46g-up-	
f 1	Qualifying distributions for 2019 from Part XII,	1	f		
4	line 4 ▶ \$	· [		1532	
a	Applied to 2018, but not more than line 2a			1332	
b	Applied to undistributed income of prior years (Election required—see instructions) .				
С	Treated as distributions out of corpus (Election required—see instructions)		No.	120000000000000000000000000000000000000	
d	Applied to 2019 distributable amount .				361
е	Remaining amount distributed out of corpus		<u> </u>		
5	Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a).)	1			
6	Enter the net total of each column as indicated below:	***************************************			J 300000000 (M000000
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income Subtract line 4b from line 2b				
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d	Subtract line 6c from line 6b Taxable amount—see instructions				
е	Undistributed income for 2018. Subtract line 4a from line 2a. Taxable amount—see instructions				
f	Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020				1532
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)				entrephysioconstantial southern see s.
8	Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)				47703713 77 77 77
9	Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9.				
а	Excess from 2015	<u> </u>  -			
b	Excess from 2016 .	_{			
C	Excess from 2017 .	<b>-</b> ∤			
d	Excess from 2018	-}			
e	Excess from 2019	1 '	1	I	

Form 99	90-PF (2019)					Page 10
Part	XIV Private Operating Founda	tions (see instru	ictions and Part	VII-A, question 9	9)	
1a	If the foundation has received a ruling	g or determination	letter that it is a	private operating		
	foundation, and the ruling is effective for	r 2019, enter the d	ate of the ruling			<u></u>
b	Check box to indicate whether the fou		operating founda		ection 🔲 4942(j)	(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2019	(b) 2018	(c) 2017	(d) 2016	
	each year listed				<u> </u>	<u> </u>
	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 .		/		<del> </del>	
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, repts, payments on					
	securities / loans (section					
	512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt					
	orgánizations as provided in					
	section 4942(j)(3)(B)(iii)					-
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income .					
Part		on (Complete th	is part only if the	he foundation h	ad \$5.000 or m	ore in assets at
	any time during the year-	• •	•		<b>,</b>	
1	Information Regarding Foundation					
а	List any managers of the foundation		uted more than 2%	6 of the total cont	ributions received	by the foundation
	before the close of any tax year (but o	only if they have co	ontributed more th	an \$5,000) (See s	ection 507(d)(2).)	
	& KAREN PERKINS					
b	List any managers of the foundation					arge portion of the
	ownership of a partnership or other e	ntity) of which the	foundation has a	10% or greater int	erest	
NONE	<del></del>					
2	Information Regarding Contribution					
	Check here ▶ ☐ If the foundation unsolicited requests for funds. If the f					
	complete items 2a, b, c, and d See in		girts, grante, etc.,	to maividuals or c	rganizations andc	otrici conditions,
	The name, address, and telephone nu		dress of the nerso	n to whom applica	ations should be a	ddressed
	PERKINS 112 PARK KNOLL LANE WHIT		diess of the perso	ii to whom applice	ations should be a	aaressea
b	The form in which applications should	d be submitted and	d information and	materials they sho	ould include.	
	EN LETTER EXPLAINING ACTIVITY AND					
С	Any submission deadlines	<u>. ,</u>				
	MBER 1 OF EACH YEAR				<u></u>	
d	Any restrictions or limitations on av	vards, such as b	y geographical ar	eas, charitable fi	elds, kinds of ins	stitutions, or other
	factors					

NONE

Part XV Supplem	entary Information (cont	inued)			
	ntributions Paid During t			ture Payment	
	cipient	If recipient is an individual, show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
		or substantial contributor	recipient		
a Paid during the ye	ess (home or business) ear ( 263 CHAMPLAIN MN 55316	or substantial contributor	501(C)(3)	EDUCATION	1900
Total .		• • • • • • • • • • • • • • • • • • • •		•	3a 1900
b Approved for futu	re payment				
		<del></del>		L	

Pai	τ χνι	Analysis of Income-Producing Ac					
Ente	r gros:	s amounts unless otherwise indicated	Unrelated bu (a) Business code	(b) Amount	(c) Exclusion code	on 512, 513, or 514 (d) Amount	Related or exemply function income
1	Progr	ram service revenue:	business code	Amount	Exclusion code	Amount	(See instructions)
•	a				<del>                                     </del>		
	ъ –						
	_				<del> </del>	· ·	
	°. –		<u> </u>		· '		
	d _						
	e _						<u> </u>
	f _					_	
	g Fe	ees and contracts from government agencies					
2	Mem	bership dues and assessments					
3	Intere	st on savings and temporary cash investments					
4		ends and interest from securities	·				
5		ental income or (loss) from real estate.					
•		ebt-financed property					
		ot debt-financed property					
		· · · · · · · · · · · · · · · · · · ·					
6		ental income or (loss) from personal property					
7		r investment income			ļ		
8		or (loss) from sales of assets other than inventory					
9		ncome or (loss) from special events					_
10	Gross	s profit or (loss) from sales of inventory					
11	Other	revenue: a					
	b						
	c _						
	d _						
	e —	·	-				
12	_	otal Add columns (b), (d), and (e)					
					<u> </u>		L
13	Total	LAdd line 12 columns (b) (d) and (e)				13	
			 s.)		•	13	
(See	works	sheet in line 13 instructions to verify calculation	s.)		ot Purnoses	13	
(See <b>Pa</b> i	works t XVI	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			montantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI	sheet in line 13 instructions to verify calculation	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the
See Par Lin	works t XVI e No.	<ul> <li>sheet in line 13 instructions to verify calculation</li> <li>Relationship of Activities to the A</li> </ul>	s.) .ccomplishm	ent of Exemp			mportantly to the

•		`												
Part	XVII	Informatio Organizati	n Regarding Tr	ansfers to	and Tran	saction	s and F	lelationsh	ips Wi	ith No	nchar	ritable	Exe	mpt
						<u> </u>						<del>     </del>	Yes	No
1			directly or indirect other than section										103	
		anizations?				,			_					İ
а	Tran	nsfers from the rep	porting foundation	n to a nonch	naritable exe	mpt org	anızatıon	of:				l l		
		Cash										1a(1)		
		Other assets .					_			_		1a(2)		
b	٠,	er transactions.					•			-		<u> </u>		
-			a noncharitable e	exempt orga	anization							1b(1)		
			ets from a noncha									1b(2)		
			, equipment, or of						•		•	1b(3)	-	
		Reimbursement a							•		•	1b(4)		
		Loans or loan gua	-						•		•	1b(5)		
		_	ervices or membe						•	•		1b(6)		
_			quipment, mailing	-	-			•	•			1c		
٦			of the above is "					Column (h)	should	 Lahway	e chov	-	air m	
d			ther assets, or se											
			on or sharing arra											
(a) Line		(b) Amount involved			empt organizati	<del></del>		ption of transf						
(a) Lin	110	(b) Amount involved	(c) Nume of the	monantable ex	cript organizati	-	(d) Desci	iption of transi	ers, traine	Jactions,	4110 3114	ing and	ingenie	
									<u>.</u>					
			ļ											
			<u> </u>											
			ļ											
_														
2a			ectly or indirectly								tions			
			501(c) (other than		(c)(3)) or in s	section 5	277 .		•	•		☐ Ye	s 🗌	No
b	If "Y	es," complete the	e following schedu	ule										
•		(a) Name of organ	iization		(b) Type of org	anızatıon	_		(c) Desc	cription c	f relation	nship		
-														
			<u> </u>		_									
			declare that I have exan							est of my	knowled	ge and b	elief, it	is true,
Sign	con	rect, and complete Decl	aration of preparer (other	r than taxpayer)	, .		f which prep	arer has any kno	owledge		lay the IF	S discu	ss this i	eturn
Here	1 1	Harmy J	echin		10/25/2021	) 7	RUSTER	_		w	ith the pr	eparer sl	hown be	elow?
	· ·	nature of fficer or trus	stee		Date	Title	-,,	_	·	— [s	ee instruc	tions [	_Yes[	No
	1 - 3	Print/Type preparer		Preparer	's algoature	Λ		Date ,			F	PTIN		
Paid		DENIHADEDMAN		All a		ton		10/20/		Check [ self-emp		Pon	99838	6
Prep				I AND TEA	GUE PS	N-ON-	<i></i>	11 -100/1	7	<u>-</u>		911632		
Use (	Only Firm's name DECORIA MAICHEL AND TEAGUE PS Firm's EIN  Firm's oddress > 7307 N DIVISION ST STE 222 SPOKANE WA 99208							9 535						

## 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

PERKINS FAMILY FOUNDATION					81-0545377		
Organization type (check one).							
Filers o	rs of: Section:						
Form 99	90 ui 990-EZ	☐ 501(c)(					
		4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
		527 political	organization				
Form 99	90-PF						
		☐ 4947(a)(1) no	nexempt charitable tr	ust treated as a private fo	undation		
		501(c)(3) taxa	ble private foundatio	n			
	•				tule and a Special Rule. See		
Genera	l Rule						
V		r property) from ar	•		contributions totaling \$5,000 instructions for determining a		
Special	Rules						
	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3% 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						

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

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990,

Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2019) Name of organization Employer identification number

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	GREG & KAREN PERKINS  112 PARK KNOLL LANE  WHITEFISH MT 59937	\$ 12266	Person Payroll Omnocash (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				
(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				

Employer identification number

Part II	Noncash Property (see instructions). Use duplicate copies of Part 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				
1	100 SHARES INVESCO	\$12266	11/20/19				
(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				
		\$					