

294910090260 **Return of Private Foundation** or Section 4947(a)(1) Trust Treated as Private Foundation

2019

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

For calendar year 2019 or tax year beginning , 2019, and ending Employer identification number 26-1223638 THE H L BROWN JR FAMILY FOUNDATION R Telephone number (see instructions) P.O. BOX 2237 432-683-5216 MIDLAND, TX 79702-2237 If exemption application is pending, check here... G Check all that apply Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return 2 Foreign organizations meeting the 85% test, check Address change Name change here and attach computation X Section 501(c)(3) exempt private foundation OL Check type of organization: If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at end of year Accounting method Cash (from Part II, column (c), line 16) X Other (specify) GAAP If the foundation is in a 60-month termination under section 507(b)(1)(B), check here **>** \$ (Part I, column (d), must be on cash basis) 27,664,691. Analysis of Revenue and Part I (d) Disbursements (c) Adjusted net (a) Revenue and (b) Net investment Expenses (The total of amounts in columns (b), (c), and (d) may not for charitable expenses per books income purposes necessarily equal the amounts in (cash basis only) column (a) (see instructions)) Contributions, gifts, grants, etc., received (attach schedule) 2,302,383 2 if the foundation is not required to attach Sch E Interest on savings and temporary cash investment Dividends and interest from securities 585,703 585,703 b Net rental income ECE or (loss) 446,430 6 a Net gain or (i Revenue 446,430 367,290 9 Income modifications DEN, 10 a Gross sales les OGDEN, returns and allowances b Less Cost of C Gross profit or (loss) (attach schedule) Other income (attach schedule) 48,828 48,828 See Statement 1 Total Add lines 1 through 11 383,344 080,961 367,290 96,000 120,000 24,000 13 Compensation of officers, directors, trustees, etc Operating and Administrative Expenses Other employee salaries and wages. 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) See St 2 **b** Accounting fees (attach sch) 75,000 c Other professional fees (attach sch) See St 136,670. 136,670 SCANNED APR 1 3 2021 See Stm 4 7,344 27,189 19,845 18 Taxes (attach schedule)(see instrs) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 610 23 Other expenses (attach schedule) 24 Total operating and administrative 103,344. 359,469 180,515 expenses. Add lines 13 through 23 Part XV Contributions, gifts, grants paid 215,000 215,000 Total expenses and disbursements 0 1,318,344. Add lines 24 and 25 1,574,469 180,515 Subtract line 26 from line 12: a Excess of revenue over expenses 1,808,875 and disbursements 900,446. b Net investment income (if negative, enter 0) 367,290 C Adjusted net income (if negative, enter -0-)

BAA For Paperwork Reduction Act Notice, see instructions.

TEEA0301L 08/22/19

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D	NIL S	Balamas Chasta	Attached schedules and amounts in the description	Beginning of year	End o	it year
r,an	स्माञ्च	Balance Sheets	column 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	22,884.	44,478.	44,478.
	٠2	Savings and tempora	ary cash investments	4,159,351.	601,497.	601,497.
	3	Accounts receivable	•	ANT ROLL TO THE PERSON	新疆域。加强。特别的	医黑蛇科的名词形
	Less allowance for doubtful accounts 4 Pledges receivable					
			REPORT CONTRACTOR		CHAIL ASSOCIATED	
		Less allowance for	doubtful accounts			
	5	Grants receivable				
	6		cers, directors, trustees, and other ch schedule) (see instructions)			
	7	Other notes and loans rece		SECTION STONE	创作的证明	Martin Francisco
	•	Less, allowance for	· · ·	AND	Service - Servic	7.3/11.20 312(24.13.13.14.14)
	8	Inventories for sale	or use		,	
	9	Prepaid expenses ai			•	
Assets	10 a	• •	and state government			
SS	l	b Investments — corporate	stock (attach schedule)			
⋖	(c Investments — corporate	bonds (attach schedule)			-
	11	Investments - land,		MALO EMPLOY	THE THE PARTY OF T	RATING SALADARIA
•		equipment basis			新加州的	30. 在着图面1983的46
		Less accumulated deprec (attach schedule)	-			
	12	Investments – mort	. .			
•	13	Investments – other	·	19,170,992.	26,984,734.	26,984,734.
	14	Land, buildings, and		明 清明 五百二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十	雅强了。2017年	DAME ENGLY
		Less accumulated deprec (attach schedule)				
			be ► See Statement 5)	848.	33,982.	33,982.
	16	Total assets (to be a see the instructions	completed by all filers — Also, see page 1, item I)	23,354,075.	27,664,691.	27,664,691.
	17	Accounts payable ar			,	THE THE PARTY
	18	Grants payable				是一种。15.19的品牌和
X	19	Deferred revenue				The second
Ξ	20	Loans from officers, direc	tors, trustees, & other disqualified persons		80,000.	是是是是自己的
豆	21	Mortgages and other note:	s payable (attach schedule)			14. 14. 14. 14. 14. 14. 14. 14. 14. 14.
Liabilities	22	Other liabilities (des	cribe ► See Statement 6)	62,152.	10,756.	正行主题的问题图
) ,	23	Total liabilities (add	l lines 17 through 22)	62,152.	90,756.	[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]
**************************************		Foundations that fo	llow FASB ASC 958, check here ►			L. The American
ğ		and complete lines	24, 25, 29, and 30.			
Net Assets or Fund Balanc	24	Net assets without d	lonor restrictions			A STATE OF THE STA
Ð	25	Net assets with done	or restrictions			
Fun		Foundations that do and complete lines	not follow FASB ASC 958, check here X			
P	26	•	orincipal, or current funds	23,291,923.	27,573,935.	
윰	27	Paid-in or capital surplus	, or land, bldg , and equipment fund			·清明·安阳二十年本十
SS	28	Retained earnings, accum	ulated income, endowment, or other funds			了心态。显然外别时期
ي د پ	29	Total net assets or	fund balances (see instructions)	23,291,923.	27,573,935.	THE STREET
2	30	Total liabilities and (see instructions)	net assets/fund balances	23,354,075.	27,664,691.	E SEE SEE TH
Par	till	Analysis of Chan	iges in Net Assets or Fund Balanc	ces		
1	Tota	al net assets or fund b	alances at beginning of year — Part II, cold on prior year's return)	umn (a), line 29 (must a	agree with	23,291,923.
2		er amount from Part I,		,	2	1,808,875.
3			nne 2 (itemize) ► See Statement 7		3	2,473,137.
4		lines 1, 2, and 3	, 500 500000000000000000000000000000000			27,573,935.
5		eases not included in line 2	(ıtemıze) ►		5	
6			alances at end of year (line 4 minus line 5	5) – Part II, column (b),		27,573,935.

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ı, aı		O3363 TOT TAX OIT INVESTIGATION		(b) How acc		(4) 5 ((d) 0
					quired nase ation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a	MS PUBLICLY TRADED	SECURITIES		P		Various	Various
	MS PUBLICLY TRADED			P		Various	Various
	Capital gain divide						
d							
е							
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other b plus expense of s			(h) Gain or ((e) plus (f) m	
a	20,991,593.		20 6	24,303.			367,290.
<u>b</u>				41,681.			2,998.
c				11,001.			
d		·					
e						·	
		a source column (b) and award by the	foundation on 12/21/60				
		g gain in column (h) and owned by the			n	(1) Gains (Col. ain minus col (k), b	
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i over col. (j), if any			an -0-) or Losses (fr	om col (h))
а							367,290.
b							2,998.
c							76,142.
d			0				
е				,			
2	Capital gain net income or (ne		enter in Part I, line 7 er -0- in Part I, line 7	_	2		446,430.
· 3	Net short-term capital gain or i	(loss) as defined in sections 1222(5	 and (6)	` -			
•	If gain, also enter in Part I, line	e 8, column (c) See instructions If		<u>_</u>	3		267 200
	in Part I, line 8	Cardian 4040(a) fan Dadasa	ATay an Nat Invest		l _		367,290.
		r Section 4940(e) for Reduce oundations subject to the section 4940			ome		
•	ction 4940(d)(2) applies, leave t		(-,	,		14, 11	
		ction 4942 tax on the distributable a	• •	base perio	d۶	Yes	No
If 'Ye	es,' the foundation doesn't quali	fy under section 4940(e) Do not co	mplete this part				
1	Enter the appropriate amount in	each column for each year, see the in	structions before making ar	ny entries			
	(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use a	ssets		(d) Distribution (col (b) divided	
	2018				<u> </u>	_	
	2017						
	2016						
	2015		•				
	2013	-					
	2014						
2	Total of line 1, column (d)				2		
3	Average distribution ratio for the number of years the foundatio	5-year base period — divide the total on has been in existence if less than	on line 2 by 5 0, or by the 5 years		3		
4	Enter the net value of nonchar	ritable-use assets for 2019 from Par	t X, line 5		4		
5	Multiply line 4 by line 3				5		.==
6	Enter 1% of net investment in	come (1% of Part I, line 27b)			6		
7	Add lines 5 and 6.				7		
8	Enter qualifying distributions for	rom Part XII, line 4			8		
			1b, and complete that par				

 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?

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

8 a Enter the states to which the foundation reports or with which it is registered. See instructions TX

b If the answer is 'Yes' to line 7, has the for	undation furnished a copy o	f Form 990-PF to the Attorney Genera
(or designate) of each state as required b	y General Instruction G ² If 'I	No,' attach explanation

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See the instructions for Part XIV If 'Yes,' complete Part XIV

10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their name
	and addresses

10 X Form 990-PF (2019)

6

8b X

9

Χ

X

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<u>ra</u>	art. VII-A. Statements Regarding Activities (continued)				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' attach schedule See instructions		11	Yes	No X
12	2 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		X
13	B Did the foundation comply with the public inspection requirements for its annual returns and exemption applicat	ion?	13	X	
	Website address ► N/A				
14		432-68	3-5	216	
		01-3401	<u>l</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here		N/A	•	
	and enter the amount of tax-exempt interest received or accrued during the year	5			N/A
16	At any time during calendar year 2019, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	[16	Yes	No X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' enter the name of the foreign country.		:	,	, 6.
Pa	art-VII-B, Statements Regarding Activities for Which Form 4720 May Be Required				<u>, , , , , , , , , , , , , , , , , , , </u>
	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		•	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	XNo	.		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disgualified person?	XNo			'. '
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	X No		,	, ,
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	X No	٠, ا	ŢŅ.	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes	XNo	•	<i>ii</i> .	
	Tes		' [- i	. [
	(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	XNo		.,.	
	b If any answer is 'Yes' to 1a(1)—(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	-	1 b	N.	/A
	Organizations relying on a current notice regarding disaster assistance, check here			, ,	1
	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?	<u> </u>	1 c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).	I	٠,	; w '	3 B
	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?	X No	,,,,,		
	If 'Yes,' list the years ► 20 , 20 , 20		,	, ,	
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions.)		, 2b	N	/A
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ▶ 20 , 20 , 20 , 20			,	
_		ľ	' '		, ,
3	3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes	X No	' '		' . <u> </u>
	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)		3 b	N	/A
4	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4 a		X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2019?		, 4 b	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	, ? X
BAA	A	For	m 99	0-PF (2019)

Form 990-PF (2019) THE H L BROWN JR I	AMILY FOUNDATI	ON		122363	38	P	age 6
Part VII-B [®] Statements Regarding Activiti	 ,	4720 May Be Req	uired (continued	<u>d)</u>	, ,		
5 a During the year, did the foundation pay or incur a	•			<u></u>	<u> </u>	Yes	No
(1) Carry on propaganda, or otherwise attemp	ot to influence legislation	n (section 4945(e))?	Yes	X No	`		,
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section ation drive?	4955); or to carry	Yes	X No	: .	-	
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes	X No			,
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	a charitable, etc., organi	zation described	Yes	X No	.	. · · · · ·	, ·
(5) Provide for any purpose other than religio educational purposes, or for the preventio	us, charitable, scientific n of cruelty to children	, literary, or or animals?	Yes	X No			;
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53 4945 or in a d See instructions	the transactions fail to current notice regarding d	qualify under the exceplisaster assistance?	ptions		5 b	N	/A
Organizations relying on a current notice rega	rding disaster assistand	ce, check here	•		;		- "
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respondif 'Yes,' attach the statement required by Regional Processing Statement (Note of the Control of the Con	sibility for the grant?		N/A Yes	No			
•						1	4 1
6 a Did the foundation, during the year, receive ar on a personal benefit contract?			∐Yes	XNo	, ,		, 4
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870.	lums, alrectly or mairec	lly, on a personal bene	iii contract*		6 b	- '	X
7a At any time during the tax year, was the found	dation a party to a probi	ibited tax shelter transa	action? Yes	XNo	'		3, 1
b If 'Yes,' did the foundation receive any procee			L.	N/A	7 b		
8 is the foundation subject to the section 4960 tax of	-			11/11			,
or excess parachute payment(s) during the ye	-		Yes	X No		•	14
Part VIII Information About Officers, Dand Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Pai	d Emp	oyees	5,	
1 List all officers, directors, trustees, and found	dation managers and th	neir compensation. See	instructions.				
	(b) Title, and average	(c) Compensation	(d) Contributions	10 /			
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee bene plans and deferr compensation	fit (e)	Expens other a	e acc llowar	ount, rces
HUBERT L. BROWN III	Executive Dir	60,000.		0.			0.
300 W. LOUISIANA AVE	15.00	,					
MIDLAND, TX 79701-3401						_	
ANNABELLE B. FOWLKES	Executive Dir	60,000.		0.			0.
300 W. LOUISIANA AVE	15.00						
MIDLAND, TX 79701-3401						_	
Q. PETER COURTNEY III	Director	0.		0.			0.
300 W. LOUISIANA AVE	0						
MIDLAND, TX 79701-3401				_			
				ľ			,
2 Compensation of five highest-paid employees (of	ther than those included	pn line 1 – see instructio	ns). If none, enter 'NO	NE;			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions i employee bene plans and deferr	fit (e)	Expens other a	e acc llowar	ount, nces
None		· · · · · · · · · · · · · · · · · · ·	compensation	-			
MOILE							
				ļ			
				_			
				}			
Total number of other employees paid over \$50,000)			•			Λ

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	990-PF (2019) THE H L BROWN JR FAMILY FOUNDATION		23638 Page 7
Par	t VIII Information About Officers, Directors, Trustees, Fou	ndation wanagers, nignly Paid	Employees,
	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
NI		(b) Type of Service	(c) Compensation
<u>No</u> r	le		
		1	
			
		1	
		<u> </u>	
Tota	number of others receiving over \$50,000 for professional services		0
Par	t'IX-A: Summary of Direct Charitable Activities		
			
List th organi	e foundation's four largest direct charitable activities during the tax year. Include relevant statist zations and other beneficiaries served, conferences convened, research papers produced, etc	ical information such as the number of	Expenses
1	N/A		
	<u></u>		-
			-
2			
			_
3			_
			_
			
4			
		~	-
Pa.	t-IX-B. Summary of Program-Related Investments (see instr	uctions)	
	ribe the two largest program-related investments made by the foundation during		Amount
1			
	<u>N/A</u>		=
			-
2			
			7
All	other program-related investments. See instructions	<u> </u>	
2			1

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Total. Add lines 1 through 3

BAA

1 a

1 b

2

3 a 3 b

4

5

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations Part X see instructions.) 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: a Average monthly fair market value of securities 1 a 23,800,988. 1 b 956,800 b Average of monthly cash balances c Fair market value of all other assets (see instructions) 1 c 1 d 24,757,788. d Total (add lines la, b, and c) e Reduction claimed for blockage or other factors reported on lines 1a and 1 e 0 1c (attach detailed explanation) 2 2 Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d 24, 757 Cash deemed held for charitable activities Enter 1-1/2% of line 3 4 (for greater amount, see instructions) 371,367. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 24,386,421 6 1,219,321 Minimum investment return. Enter 5% of line 5 PartXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations

and certain foreign organizations, check here▶ and do not complete this part.) 1 1,219,321. Minimum investment return from Part X, line 6 2a Tax on investment income for 2019 from Part VI, line 5 2 a 18,009 2 b b Income tax for 2019 (This does not include the tax from Part VI.) c Add lines 2a and 2b 2 c 18,009. 3 Distributable amount before adjustments Subtract line 2c from line 1 3 1,201,312. 4 4 Recoveries of amounts treated as qualifying distributions. 5 1,201,312. Add lines 3 and 4 6 Deduction from distributable amount (see instructions) 7 7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 1,201,312.

PartiXIII Qualifying Distributions (see instructions)

- 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes
- a Expenses, contributions, gifts, etc total from Part I, column (d), line 26
- **b** Program-related investments total from Part IX-B
- 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes
- 3 Amounts set aside for specific charitable projects that satisfy the
- a Suitability test (prior IRS approval required)
- **b** Cash distribution test (attach the required schedule)
- Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4
- 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
- 6 Adjusted qualifying distributions. Subtract line 5 from line 4

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

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1,318,344.

1,318,344.

1,318,344.

Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI, line 7				1,201,312.
2 Undistributed income, if any, as of the end of 2019	,		1	1,201,012.
a Enter amount for 2018 only	,	L	0.	
b Total for prior years 20 , 20 , 20		0.		, , , , , , , , , , , , , , , , , , ,
3 Excess distributions carryover, if any, to 2019		, , ,		
a From 2014 128, 038.	J.		*	
b From 2015 174,739.				
c From 2016 175, 017.				
d From 2017 183, 287.	•			
e From 2018 212,273.				•
f Total of lines 3a through e	873,354.			
4 Qualifying distributions for 2019 from Part	073,334.	· · · · · · · · · · · · · · · · · · ·		
XII, line 4. ► \$ 1,318,344.				
a Applied to 2018, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required – see instructions)	1	0.		
 Treated as distributions out of corpus (Election required — see instructions) 	0.	, .		
d Applied to 2019 distributable amount				1,201,312.
e Remaining amount distributed out of corpus	117,032.			, , , , , , , , , , , , , , , , , , , ,
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the				
same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				•
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	990,386.		,	
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed		0.		<u>'</u>
income for which a notice of deficiency has				
been issued, or on which the section 4942(a) tax has been previously assessed		0.		ı
		0.		
d Subtract line 6c from line 6b Taxable amount – see instructions		0.1		•
e Undistributed income for 2018 Subtract line 4a from line 2a. Taxable amount — see instructions	1		0.1))
	,			
f Undistributed income for 2019 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2020				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)	0.			
8 Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions)	128,038.			~
9 Excess distributions carryover to 2020. Subtract lines 7 and 8 from line 6a	862,348.			
10 Analysis of line 9	302,010.			······································
a Excess from 2015 174,739.				
b Excess from 2016 175, 017.	1			
c Excess from 2017 183, 287.	1			
d Excess from 2018 212, 273.	1			
e Excess from 2019 117, 032.	1 0			•
117,032.	<u> </u>	<u> </u>		

Form 990-PF (2019) THE H L BROWN JR Part XIV: Private Operating Foundation			t VII-A question	26-122363	8 Page 10 N/A /
1 a If the foundation has received a ruling or determined is effective for 2019, enter the date of the	ermination letter that				/.
b Check box to indicate whother the foundar	•	erating foundation o	described in section	1912(j)(3) or	A912(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
income from Part I or the minimum investment return from Part X for each year listed	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(E) 10tal
b 85% of line 2a		***			
 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	_				
 Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c 					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter					
(1) Value of all assets					_
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6, for each year listed					
c 'Support' alternative test — enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Supplementary Information	ie year – see in	part only if the structions.)	foundation had	\$5,000 or more	· in
a List any managers of the foundation who hav close of any tax year (but only if they hav None	e contributed more the contributed more	nan 2% of the total c than \$5,000) (See	ontributions received section 507(d)(2))	by the foundation bef	ore the
					 -
 List any managers of the foundation who owr a partnership or other entity) of which the None 	10% or more of the foundation has a 1	stock of a corporation O% or greater inter	on (or an equally large est	e portion of the owner	snip of
		····			
2 Information Regarding Contribution, Grant, Check here ☐ If the foundation only mare requests for funds. If the foundation make	akes contributions to	preselected charitab			
2a, b, c, and d See instructions	r omoil address - f. ii	o norcon to where ==	anliantione charity to	addrases	
a The name, address, and telephone number o	r email address of th	e person to wnom ap	oplications should be	addressed	
See Statement 8					
b The form in which applications should be	submitted and infor	mation and materia	als they should inclu	de	
See Statement for Line 2a					
c Any submission deadlines					
See Statement for Line 2a					
d Any restrictions or limitations on awards,	such as by geograp	hical areas, charita	able fields, kinds of i	nstitutions, or other	factors
See Statement for Line 2a					
BAA	TE	EA0310L 08/22/19		F	orm 990-PF (2019)

Page 11

3 Grants and Contributions Paid During the Year or Approved for Future Payment										
Recipient		Foundation status of recipient		Amount						
Name and address (home or business)	or substantial contributor	recipient								
a Paid during the year	Ì	ļ		}						
See Statement 9										
		}								
	}	1								
•										
				}						
		1								
		1								
	<u> </u>									
Total	,	,	► 3a	1,215,000.						
b Approved for future payment										
		1	}							
	j]						
Total		<u> </u>	► 3b							

nter gross amounts unless otherwise indicated	Unrelate	ed business income	Excluded	1 by section 512, 513, or 514	(e)	
•	(a) (b) Business Amount code		(c) Exclu- sion	(d) Amount	Related or exempt function income (See instructions.)	
1 Program service revenue:		,	code		,	
a			+		<u></u>	
b	_	<u> </u>	_		. <u> </u>	
d				<u></u>		
e			-			
ſ			1			
g Fees and contracts from government agencies				_		
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments						
4 Dividends and interest from securities					585,703	
5 Net rental income or (loss) from real estate.	1 30	* * * * * * * * * * * * * * * * * * * *	•	**	1.4	
a Debt-financed property			_			
b Not debt-financed property						
6 Net rental income or (loss) from personal property 7 Other investment income		<u> </u>			40.000	
					48,828	
8 Gain or (loss) from sales of assets other than inventory9 Net income or (loss) from special events			-		440,430	
10 Gross profit or (loss) from sales of inventory			 			
11 Other revenue.	# 31m, rm	अपुक्रमण किन्ध में जिल्हें के	H 1 " 1 3/"	7.6	2 8 2 19 19 19 19 19 19 19 19 19 19 19 19 19	
a	* `		 		`	
b	- 					
С		-	<u> </u>	-		
	<u> </u>					
d		l				
d e						
e	•				1,080,961	
e Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e)				13	1,080,961 1,080,961	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula	itions)		- A D			
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. *Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	
Subtotal. Add columns (b), (d), and (e) 13 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calcula Part XVI-B. Relationship of Activities to the Line No. **Explain below how each activity for which accomplishment of the foundation's exem	itions)		<u> </u>	oses	1,080,961	

Part:XVIII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

									Yes No
de:	d the organiza scribed in sec ating to politi	ction 501(c)	ly or indirectly er) (other than sec ations?	ngage in any of t tion 501(c)(3) or	the following wit ganizations) or	h any oth in section	er organizatior 527,	1	Tes No
a Tra	ansfers from	the reportir	ng foundation to	a noncharitable	exempt organiza	ation of			
\- /	Cash								1 a (1) X
	Other asset								1 a (2) X
	her transaction								
(- /			oncharitable exer	. •					1 b (1) X
` '			om a noncharital		nization				1 b (2) X
(-)			upment, or other	assets					1 b (3) X
\ - <i>/</i>	Reimbursen	•	•						1 b (4) X
` '	Loans or loa	•							1 b (5) X
			es or membershi						1 b (6) X 1 c X
¢ Sn	aring of facili	ities, equipi	ment, mailing lis	ts, other assets,	or paid employ	ees			I C X
d If t the an	the answer to goods, other transaction	any of the assets, or s or sharing	above is 'Yes,' dervices given by the arrangement, sh	complete the foll he reporting found now in column (d	lowing schedule dation If the four I) the value of th	. Column idation rec ne goods,	(b) should alw eived less than other assets, o	ays show the fair market va or services re	e fair market value of alue in eceived
(a) Line	<u> </u>	ount involved		f noncharitable exem			-		ns, and sharing arrangements
N/A					• •				· · · · · · · · · · · · · · · · · · ·
								•	
									A Marian
									·
									·-···
					··· ···				
de	scribed in se	ction 501(c	indirectly affiliated) (other than sec	with, or related to tion 501(c)(3)) o	o, one or more ta or in section 527	ix-exempt	organizations		Yes X No
TI			wing schedule ation	(h) Tugo	of organization	Т	(6)	Description	of relationship
NI / N	(a) Name	or organiza	allon	(b) Type	oi organization	-	(0)	Description	
N/A									_
-							<u></u> .		- ·
									
							••		
	Under penalties o	of periury. I dec	lare that I have exam	ined this return, includ	ling accompanying so	hedules and	statements, and to	the best of my k	nowledge and belief, it is true,
	correct, and comp	plete Declarat	ion of preparer (other	than taxpayer) is base	ed on all information	of which prep	arer has any know	ledge	
Sign	· IN	V(K)							May the IRS discuss this return with the
Here	- 1/10	1/1//			11/16/202		kecutive 1	Direc	preparer shown below? See instructions
	Signature of off				Date '	Title			X Yes No
	Print/Ty	pe preparer's	name	Preparer's s	signature		Date	Check	X of PTIN
Paid	WILI	LIAM L.	TERRY, CPA	A TKILL	lant-/ler	ry	11/16/202	self employ	P01394821
Prepai	rer Firm's r	name	H.L. Brown	Operating	, LLC	1	/ /	Firm's EIN	
Use O		address 🟲	300 W. Lou			-			
			Midland, T	X 79701				Phone no	(432) 683-5216
BAA									Form 990-PF (2019)

Schedule B

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

Department of the Treasury Internal Revenue Service

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

THE H L BROWN JR FA		26-1223638
Organization type (check one		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	חמ
Form 990-PF	527 political organization	
	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	ered by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a Special Rule and a Spec	pecial Rule See instructions.
General Rule		
	ling Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contribution.	
Special Rules		
under sections 509(a) received from any o	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% (1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line on contributor, during the year, total contributions of the greater of (1) \$5,000; line 1h; or (ii) Form 990-EZ, line 1 Complete Parts I and II	e 13, 16a, or 16b, and that
during the year, tota	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that rece al contributions of more than \$1,000 exclusively for religious, charitable, scient prevention of cruelty to children or animals. Complete Parts I, II, and III.	
during the year, cor \$1,000. If this box is charitable, etc., pur	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that recentributions exclusively for religious, charitable, etc., purposes, but no such contist checked, enter here the total contributions that were received during the year pose. Don't complete any of the parts unless the General Rule applies to this considerable, etc., contributions totaling \$5,000 or more during the	ributions totaled more than r for an <i>exclusively</i> religious, organization because
990-PF), but it must answer '	isn't covered by the General Rule and/or the Special Rules doesn't file Schedi No' on Part IV, line 2, of its Form 990, or check the box on line H of its Form 9 doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990	990-EZ or on its Form 990-PF,

_	_	~
1	Page	Z
1	5-	_

Name of organization

THE H L BROWN JR FAMILY FOUNDATION

Employer identification number

2	ĸ	_	1	2	2	3	6	3	1
ız	O		1	Z.	Z.		u		п

Part I ₃	Contributors (see instructions) Use duplicate copies of Part I if additional s	space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	HL BROWN JR CHAR. LEAD ANNUITY TR	-	Person X Payroll
	300 W LOUISIANA AVE	_\\$2 <u>,302,383</u> .	Noncash
	MIDLAND, TX 79701-3401	_	(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		- \$	Payroll
		_	(Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		_ s	Payroll
			(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		- \$	Payroll
		_	(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		_ \$	Payroll
		_ '	(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
		-	Payroll
	<u></u>	_ -	Noncash
	<u></u>	-	(Complete Part II for noncash contributions)
BAA	TEEA0702L 08/09/19	Schedule B (Form 99	0, 990-EZ, or 990-PF) (2019)

Employer identification number

Name of organization

THE H L BROWN JR FAMILY FOUNDATION

Rartilina Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed

26-1223638

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
	N/A	\$	
(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
		\$	
BAA	Scho	edule B (Form 990, 990-E	Z, or 990-PF) (2019

	3 (Form 990, 990-EZ, or 990-PF) (2019)			11 Page 4			
Name of organ	nization L BROWN JR FAMILY FOUNDATION			Employer identification number 26–1223638			
	Exclusively religious, charitable, et						
`	or (10) that total more than \$1,000 for the following line entry. For organizations of contributions of \$1,000 or less for the year. Use duplicate copies of Part III if additional	ne year from any one contrib completing Part III, enter the tota (Enter this information once. So	outor. Completed of <i>exclusive</i>	te columns (a) through (e) and ely religious, charitable, etc.,			
(a)	(b)	(c)		(d)			
(a) No. from Part I	Purpose of gift	Use of gift		(d) Description of how gift is held			
	N/A						
, -			-				
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Rela	ationship of transferor to transferee			
}							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
	_ 						
	(e)						
	Transfèr of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee						
	Transferee's frame, addres	5, allu Zir + 4	Kela	dionship of transferor to transferee			
	-		-				
(a)	. //১	(a)		(4)			
(a) No. from	· (b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
Part I							
				\			
			- -				
		(e) Transfer of gift					
	Transferee's name, addres		Rela	tionship of transferor to transferee			
			r 				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held			
,							
			_				
	<u> </u>			 -			
		(e)					
		(e) Transfer of gift	~ ·				
	Transferee's name, addres	s, and ZIP + 4	Rela	tionship of transferor to transferee			

019	Federal Statements	Page '
, ,	THE H L BROWN JR FAMILY FOUNDATION	26-122363
Statement 1 Form 990-PF, Part I, Line 11 Other Income		
	(a) (b) Net Revenue Investment <u>per Books Income</u>	(c) Adjusted Net Income
Other Investment Income	Total \$ 48,828. \$ 48,828. \$ 28. \$	0.
Statement 2 Form 990-PF, Part I, Line 16b Accounting Fees		
	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income	(d) Charitable <u>Purposes</u>
TAX PREP FEES	Total $\frac{\$}{\$}$ 75,000. $\frac{\$}{5}$ 0. $\frac{\$}{5}$ 0.	\$ 0.
Statement 3 Form 990-PF, Part I, Line 16c Other Professional Fees		
	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 136,670. \$ 136,670. Total \$ 136,670. \$ 136,670. \$ 0.	-
Statement 4 Form 990-PF, Part I, Line 18	10tal <u>v 130,070.</u> <u>v 130,070.</u> <u>v 0.</u>	<u> </u>
Taxes	(a) (b) Net (c) Expenses Investment Adjusted	(d) Charitable
FEDERAL EXCISE TAX EXPERING PAYROLL TAX EXPENSE	<u>per Books</u> <u>Income</u> <u>Net Income</u>	\$ 7,344

2019

Federal Statements

Page 2

THE H L BROWN JR FAMILY FOUNDATION

26-1223638

Statement 5 Form 990-PF, Part II, Line 15 Other Assets

ACCRUED INTEREST RECEIVABLE

Fair Market Book Value Value 33,982. 33,982. \$

Statement 6 Form 990-PF, Part II, Line 22 Other Liabilities

PAYROLL TAXES EXCISE TAX PAYABLE Rounding

2,746. 8,009. 1.

Total \$ 10,756.

Statement 7 Form 990-PF, Part III, Line 3 Other Increases

PRIOR PERIOD ADJUSTMENT Net Unrealized Gains or Losses on Investments

19,286. 453,851. 2,473,137. Total \$

Statement 8 Form 990-PF, Part XV, Line 2a-d **Application Submission Information**

Name of Grant Program:

Name:

HUBERT L. BROWN III

Care Of:

Street Address:

City, State, Zip Code:

300 W. LOUISIANA AVE MIDLAND, TX 79701-3401

Telephone:

E-Mail Address:

Form and Content:

NO SPECIFIC APPLICATION FORM REQUIRED. INCLUDE INFORMATION ABOUT YOUR ORGANIZATION AND HOW THE GRANT WILL

BENEFIT YOUR ORGANIZATION.

Submission Deadlines:

NONE

Restrictions on Awards:

NONE GENERALLY, BUT MAY HAVE SPECIFIC USES ON A GRANT BY

GRANT BASIS.

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THE H L BROWN JR FAMILY FOUNDATION

26-1223638

Statement 9		
Form 990-PF,	Part XV,	Line 3a
Recipient Paid	d During	the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
THE BUCKLEY SCHOOL 113 EAST 73RD STREET NEW YORK NY 10121	NONE	PUBLIC CH	FOR ANNUAL FUND	\$ 50,000.
ST. PAUL'S SCHOOL 325 PLEASANT STREET CONCORD NH 03301	NONE	PUBLIC CH	FOR ANNUAL FUND	5,000.
MIDLAND CHILDREN'S REHABILITATION CENTER 802 VENTURA MIDLAND TX 79705	NONE	PUBLIC CH	FOR REHAB OPERATIONS	10,000.
MOUNT SINAI MEDICAL CENTER ONE GUSTAVE L. LEVY PLACE, BOX 1049 NEW YORK NY 10029	NONE	PUBLIC CH	FOR ICAHN SCHOOL OF MEDICINE	125,000.
NANTUCKET HISTORICAL ASSOCIATION 15 BROAD STREET NANTUCKET MA 02554	NONE	PUBLIC CH	FOR OUR PLACE CAMPAIGN	25,000.
SCHOOL YEAR ABROAD 120 WATER STREET, SUITE 310 NORTH ANDOVER MA 01845	NONE	PUBLIC CH	FOR ANNUAL FUND	50,000.
THE SPENCE SCHOOL 22 EAST 91ST STREET NEW YORK NY 10128	NONE	PUBLIC CH	FOR ANNUAL FUND	25,000.
TRINITY SCHOOL OF MIDLAND 3500 WEST WADLEY AVENUE MIDLAND TX 79707	NONE	PUBLIC CH	FOR PRE-SCHOOL RENOVATION PROJECT	100,000.
NANTUCKET CONSERVATION FOUNDATION PO BOX 13 NANTUCKET MA 02554	NONE	PUBLIC CH	FOR GENERAL OPERATIONS	10,000.
BOY'S CLUB OF NEW YORK, INC. 287 EAST 10TH STREET NEW YORK NY 10009	NONE	PUBLIC CH	FOR GENERAL OPERATIONS	5,000.
MUSEUM OF THE CITY OF NEW YORK 1220 FIFTH AVENUE NEW YORK NY 10029	NONE	PUBLIC CH	FOR GENERAL OPERATIONS	10,000.

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THE H L BROWN JR FAMILY FOUNDATION

26-1223638

Statement 9 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
NANTUCKET COMMUNITY SAILING PO BOX 2424 NANTUCKET MA 02584			FOR GENERAL OPERATIONS	\$ 7,000.
THE BYNUM SCHOOL CAPITAL CAMPAIGN PO BOX 80175 MIDLAND TX 79708	NONE	PUBLIC CH	FOR CAPITAL CAMPAIGN	50,000.
HIGH SKY CHILDREN'S RANCH 8701 WEST COUNTY ROAD 60 MIDLAND TX 79707	NONE	PUBLIC CH	FOR CENTER'S OPERATIONS	50,000.
NEW YORK PRESBYTERIAN FUND INC 525 EAST 68TH STREET, BOX 123 NEW YORK NY 10065	NONE	PUBLIC CH	FOR PLATES FOR PEDIATRICS	10,000.
NANTUCKET YACHT CLUB FOUNDATION PO BOX 667 NANTUCKET MA 02554	NONE	PUBLIC CH	FOR GENERAL OPERATIONS	10,000.
TEXAS CHRISTIAN UNIVERSITY P. O. BOX 298530 FORT WORTH TX 76129	NONE	PUBLIC CH	FOR NEELY SCHOOL OF BUSINESS	20,000.
ST. JAMES CHURCH 865 MADISON AVENUE NEW YORK NY 10021	NONE	PUBLIC CH	FOR GENERAL OPERATIONS	5,000.
NANTUCKET COTTAGE HOSPITAL 57 PROSPECT STREET, UNIT 1 NANTUCKET MA 02554	NONE	PUBLIC CH	FOR GENERAL OPERATIONS	50,000.
CHILD MIND INSTITUTE 445 PARK AVENUE NEW YORK NY 10022	NONE	PUBLIC CH	FOR GENERAL OPERATIONS	5,500.
STANFORD UNIVERSITY 326 GALVEZ STREET STANFORD CA 94305	NONE	PUBLIC CH	FOR CHEM-H DIRECTORS FUND	10,000.
THE UT FOUNDATION PO BOX 7399 AUSTIN TX 78713	NONE	PUBLIC CH	FOR THE H L BROWN JR FAMILY FOUNDATION GRADUATE ENDOWMENT FUND	50,000.

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THE	H L BROWN JR FAMILY FOUNDATION			26-1223638	
Statement 9 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year					
_ Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant		Amount
BUCKNER FOUNDATION 425 WEST PECAN AVE MIDLAND TX 79705	NONE	PUBLIC CH	FOR GENERAL OPERATIONS	\$	10,000
JAZZ AT LINCOLN CENTER 3 COLUMBUS CIRCLE, 12TH FLOOR NEW YORK NY 10019	NONE	PUBLIC CH	FOR GENERAL OPERATIONS		5,000
THE UNIVERSITY OF TEXAS AT AUSTIN 301 EAST DEAN KEETON STREET, C2104 AUSTIN TX 78712	NONE	PUBLIC CH	FOR ENERGY ENGINEERING BLDG		100,000
MIDLAND MEMORIAL FOUNDATION 400 ROSALIND REDFERN GROVER PKWY MIDLAND TX 79701	NONE	PUBLIC CH	FOR NICU		100,000
MUSEUM OF THE SOUTHWEST 1705 WEST MISSOURI AVENUE MIDLAND TX 79701	NONE	PUBLIC CH	FOR GENERAL OPERATIONS		50,000
SAFE PLACE OF THE PERMIAN BASIN PO BOX 11331 MIDLAND TX 79702	NONE	PUBLIC CH	FOR GENERAL OPERATIONS		50,000
TRINITY SCHOOL 3500 WEST WADLEY MIDLAND TX 79707	NONE	PUBLIC CH	FOR LEADERSHIP FUND		5,000
THE WHARTON SCHOOL OF THE UNIV PENNSYLAN 344 VANCE HALL, 3733 SPRUCE ST PHILADELPHIA PA 19104	NONE	PUBLIC CH	FOR HLB ENDOWMENT FUND		30,000
THE BYNUM SCHOOL PO BOX 80175 MIDLAND TX 79708	NONE	PUBLIC CH	FOR GENERAL OPERATIONS		10,000
FORT WORTH COUNTRY DAY SCHOOL 4200 COUNTRY DAY LANE FORT WORTH TX 76109	NONE	PUBLIC CH	FOR GENERAL OPERATIONS		5,000.

NONE PUBLIC CH FOR GENERAL OPERATIONS

5,000.

FOUNTAIN HOUSE 425 WEST 47TH STREET NEW YORK NY 10036

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THE H L BROWN JR FAMILY FOUNDATION

26-1223638

Statement 9 (continued) Form 990-PF, Part XV, Line 3a Recipient Paid During the Year

Name and Address	Donee Relationship	Found- ation Status	Purpose of Grant	Amount
THE FUQUA SCHOOL OF BUSINESS 100 FUQUA DRIVE, BOX 90120 DURHAM NC 27708	NONE	PUBLIC CH	FOR GENERAL OPERATIONS	\$ 10,000.
JOHNS HOPKINS UNIVERSITY 3400 NORTH CHARLES ST, WYMAN 500W BALTIMORE MD 21218	NONE	PUBLIC CH	FOR THE H L BROWN JR FAMILY ENDOWED FUND	25,000.
NANTUCKET HISTORICAL ASSOCIATION 15 BROAD STREET NANTUCKET MA 02554	NONE	PUBLIC CH	FOR PURCHASE OF THE HELLMAN COLLECTION	50,000.
NAVAL POSTGRADUATE SCHOOL PO BOX 8626 MONTEREY CA 93943	NONE	PUBLIC CH	FOR GENERAL OPERATIONS	10,000.
PRIMARILY PRIMATES PO BOX 207 SAN ANTONIO TX 78291	NONE	PUBLIC CH	FOR GENERAL OPERATIONS	2,500.
SANKATY HEAD FOUNDATION PO BOX 875 SIACONSET MA 02564	NONE	PUBLIC CH	FOR GENERAL OPERATIONS	5,000.
SHRINER'S HOSPITAL FOR CHILDREN 6977 MAIN STREET HOUSTON TX 77030	NONE	PUBLIC CH	FOR GENERAL OPERATIONS	2,500.
THE SOCIETY OF MEMORIAL SLOAN-KETTERING 1233 YORK DRIVE, SUITE B101 NEW YORK NY 10065	NONE	PUBLIC CH	FOR GENERAL OPERATIONS	2,500.
THE SPENCE SCHOOL 22 EAST 91ST STREET NEW YORK NY 10128	NONE	PUBLIC CH	FOR SPENCE 412 BUILDING INITIATIVE	50,000.
YOUNG LIFE ALLEN 550 SOUTH WATTERS DRIVE, SUITE 264 ALLEN TX 75013	NONE	PUBLIC CH	FOR GENERAL OPERATIONS	5,000.

Total \$ 1,215,000.