\_, /som 990-PF

Return of Private Foundation
or Section 4347(a)(1) Trust Treated as Private Foundation
Do not enter social security numbers on this form as it may be made public (1)



Department of the Treasury

		_ <u>``</u> —		Reveilue Service 1	J GO to WWW II'S	govn onns	13077 TOT TRIST				oni, or	en to I abno mopestion	
Į.				ilendar year 2018 or	tax year beginning		·	, 2018,	and end		<del></del>	, 20	
£ .	Name of foundation THE FAGLE SKY FOUNDATION INC							A	Employer identifi				
THE EAGLE SKY FOUNDATION, INC.						-	73-1526080	)					
Number and street (or P O box number if mail is not delivered to street addres					ress)		Room/suite	е , В	Telephone numbe	er (see instructions)			
-		-	153	01 RED COACH R	OAD						(405) 94	3-1411	
		Ci	ty or t	own, state or province, cou	untry, and ZIP or foreign post	al code							
										c			
			F.DM	OND, OK 73013							pending, check here	<b>/</b> 🗀 ·	
							Initial return	of a former n	ublic cha	rity -	,		
		85,	Çne	ck all that apply	Final return		Amended res		ublic clia	ם אייי	1 Foreign organizat		
		2019 e		}	X Address change	$\vdash$					2 Foreign organizat 85% test check h		
		<b>~</b> –					Name chang			<del>,  </del>	computation .	▶ └	
		,—4 L		eck type of organizati	_				$O^{\prime}$	<b>5</b> ∣∈	If private foundation	status was terminated	
		⊥ی		Section 4947(a)(1) none			er taxable pr				under section 507(b)	(1)(A), check here .	
	1	اليي		market value of a		_	ethod X C	ash [] Acc	rual	F	If the foundation is	in a 60-month termination	
•	1			of year (from Part II		ther (spe					under section 507(b)	(1)(B), check here . 🕨 X	
		<b>_</b> _	16)	<b>▶</b> \$ 67,46	3,489. (Part I,	column (d	) must be on ca	sh basis )					
		ШE	art		ue and Expenses (The	(a) Re	evenue and	(h) Not initia		(-)	Advicted not	<ul><li>(d) Disbursements for charitable</li></ul>	
		Z		total of amounts in co	olumns (b), (c), and (d)	expe	enses per	(b) Net inve		. (C)	Adjusted net income	purposes	
1				column (a) (see instru			oooks					(cash basis only)	
		SCANN	1	Contributions, gifts, grants, et	c , received (attach schedule) .		180,707.	3.000000000000000000000000000000000000		WANT.	HEST STREET		
ĺ		Ø	2.	Check I If the for	undation is not required to ch. B	Total Control	N.3325	经总额	TAREA TO	學系統	t saltario	RECEIPTED TO	
	0		3		emporary cash investments.		9,084.		9,084.		9,084.		
	2	_	4	•	t from securities		822,134.	67	5,857.		675,857.	1000 1000 1000	
	2		5.2	Gross rents			86,166.	-	8,077.		86,166.		
	_			Net rental income or (loss	3	200 TO 100 TO 100	NAME OF THE PARTY	AND THE		11 MARY	WAS SERVED		
		a		Net gain or (loss) from sa		-1	,349,115.		25.45.50	******	(\$\frac{1}{2}\) (\$\frac{1}{2}\	PHE STATE OF THE	
		enn	b	Gross sales price for all	22,561,656.		issianaesi:	XX.10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00 10.00		7/2/2014			
		eve	_	assets on line 6a		£1260*124	A POR CANDAGO	TO PAYED ON THE SALE	0.		W-1,957244879	ALTERNATION AND AND AND AND AND AND AND AND AND AN	
		æ	7	, <del>-</del>	ne (from Part IV, line 2) .	5200	NAME OF THE PARTY	MONTH	Y2574688	NEWSCOOK STREET	SANDO SAGASAS, TUNISTRATARA		
			8	Net short-term capital	=	24 F. F. F.		7 March 1997	6,21,7567				
			10 a	Income modifications Gross sales less returns	41.089.	\$200 MARKET		374 4 62 ) Fe 13	1860 N. S. S.	LONG TO		CTTCUHERWAYEE	
		,		and allowances	20 522	188 6 2 5 5 5 C		100 Care 100	3,1965, 1384 14. 24. C. 25.	4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4. 4			
	•		1	Less Cost of goods sold		. 3478 4458 45.	20,567.	28 44 1 100 100 100 100 100 100 100 100 10	12 12 12 13 13 13 13 13 13 13 13 13 13 13 13 13	180/1876 1889 -	20,567.	DESCRIPTION CONTRACTOR OF THE PROPERTY OF THE	
		-			attach schedule)		311,596.	20/24-20 1 1 2 2 2 2 3 2 2 3 2 3 2 3 2 3 2 3 2 3	10 mm of 2 12 12 12		312,822.		
		(	1-1	-Other income (attach : Tiotal-Additines/1thic	schedule) ATCH 2	<b></b>	81,139.	69	3,018.		1,104,496.		
		· - !	12				01,133.	0,7	3,010.		1,104,450.	CATTERN OF THE THE PARTY OF	
		S	130	-Compensation of officers,	, directors trustees, etc	1	,469,648.		. '		90,589.	1,379,059.	
>	· ·	Se		Othenemployee နှံချိန်ပြ	es and wages	<del></del>	502,676.				8,750.	493,926.	
•	`	. e	185	Pension plans, employ	<u>/ee benefits : </u>						8,730.		
£1/2	•	Expe	16 a	Legal fees (attach scho	edule) ATCH 3		13,153.	1	0,875.		13,404.	13,153.	
	7	a		Accounting fees (attac	ch_schedule)ATCH 4	<u> </u>	28,073.	1			13,404.	14,669.	
n) [2		Ę.	C	Other professional fee	s (attach schedule).[5]		130.		130.		1 005		
<14 <sup>7</sup>	1 6 DEC: 0 3 2019	Administrativ	17	Interest			1,035.				1,035.	116 605	
	0	is:	18	Taxes (attach schedule	e) (see instructions)[6].	<u> </u>	116,685.		64.		12.25	116,621.	
	60	Ξį	19.	Depreciation (attach s	schedule) and depletion.	2	,125,579.				13,255.		
	<u>ت</u>	Þ	20 -	Occupancy			460,501.				70,231.	390,270.	
	ن	γp	21	Travel, conferences, a	nd meetings ,		170,192.				8,814.	161,378.	
	ليز	an	21 22	Printing and publication	ons								
		þ	23		h schedule) ATCH .7		754,003.				327,379.	426,624.	
	46	Œ.	24	Total operating and a	administrative expenses								
	N	ē		· · · · · · · ·	23	5	,641,675.	1	1,069.		533,457.	2,995,700.	
	S	ဝီ	23 24 25	=	rants paid		2,500.			<b>沙沙沙</b>	<b>建筑设置</b>	2,500.	
	M		26		ements Add_lines_24_and,25_	5	,644,175.	1	1,069.		533,457.	2,998,200.	
	2		27	Subtract line 26 from					CHEST	15 C	Karanga Ara		
	53				xpenses and disbursements	`-5	,563,036.						
	- T		l		ne (if negative, enter -0-)		X34.6X23.6X2	68	1,949.			78 7 3 4 5 7 A	
	. E		}	Adjusted net income		7. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	N. SOE LEVI		y 1. Ziji		571,039.	4074 TP-884-285	
		JSA F			t Notice, see instructions	j., , , , , , , , , , , , , , , , , , ,	THE PERSON NAMED IN COLUMN	The second of the second secon	www.rv.serr.chimedic	·		Form <b>990-PF</b> (2018)	

JSA For Paperwork Reduction Act Notice, see instructions
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PAGE 1

(c) Fair Market Value

Page 2

157,434.

843,289.

5,645.

End of year

(b) Book Value

157,434

843,289.

5,645.

Part II

Beginning of year

(a) Book Value

357,980.

859,736.

2,524.

Attached schedules and amounts in the

amounts only (See instructions )

Balance Sheets description column should be for end-of-year

Receivables due from officers, directors, trustees, and other

Cash - non-interest-bearing . . . . . . . .

Less allowance for doubtful accounts

Less allowance for doubtful accounts ▶ Grants receivable. . . . . . . . . . . . . . . .

Accounts receivable ▶

Pledges receivable ▶

Savings and temporary cash investments . . . .

		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
ssets		Less allowance for doubtful accounts ▶			
	8	Inventories for sale or use	510,961.		560,277
	9	Prepaid expenses and deferred charges	159,359.	159,359.	159,359
Ä	10a	Investments - U S and state government obligations (attach schedule), ,			
		Investments - corporate stock (attach schedule) ATCH 8	42,845,890.	47,974,061.	23,724,071
		Investments - corporate bonds (attach schedule) ATCH 9	9,157,325.		
	11	Investments - land, buildings, and equipment basis Less accumulated depreciation (attach schedule)	erra eller i sera err ii militariii eran ni	AND THE STREET BY	्रास्त्र र स्थलकार अवस्थल
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule) ATCH 10	2,850,089.		
	14	Land, buildings, and equipment basis			
		Less accumulated depreciation (attach schedule)	42,507,546.		41,685,505
	15	Other assets (describe ► ATCH 11 )	349,453.	327,909.	327,909
	16	Total assets (to be completed by all filers - see the			
_		ınstructions Also, see page 1, item I)	99,600,863.		67,463,489
	17	Accounts payable and accrued expenses	744.	50.	
	18	Grants payable			
Liabilities	19	Deferred revenue	2,087.	9,210.	
≣	20	Loans from officers, directors, trustees, and other disqualified persons			i
ab	21	Mortgages and other notes payable (attach schedule)			
	22	Other liabilities (describe >)			]
_	23	Total liabilities (add lines 17 through 22)	2,831.	9,260.	
ses		Foundations that follow SFAS 117, check here and complete lines 24 through 26, and lines 30 and 31			<b>\$</b>
an	24	Unrestricted			
3al	25	Temporarily restricted			
þ	26	Permanently restricted			
ssets or Fund Balances		Foundations that do not follow SFAS 117, check here ► X and complete lines 27 through 31			[
Ö	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg , and equipment fund			l
SSI	29	Retained earnings, accumulated income, endowment, or other funds	99,598,032.	91,704,219.	ı
Ť.	30	Total net assets or fund balances (see instructions)	99,598,032.	91,704,219.	t
Š	30 31	Total liabilities and net assets/fund balances (see	-		
		ınstructions)	99,600,863.	91,713,479.	1
G	art l	Analysis of Changes in Net Assets or Fund Bala	nces		
1	Tot	al net assets or fund balances at beginning of year - Part	II, column (a), line 30 (	must agree with	

Form 990-PF (2018)

99,598,032.

-5,563,036.

94,034,996.

2,330,777.

91,704,219.

2

3

4

5

6

2 Enter amount from Part I, line 27a...........

3 Other increases not included in line 2 (itemize) ▶

4 Add lines 1, 2, and 3 . . . . . . . . . . . . . . . . .

5 Decreases not included in line 2 (itemize) ▶

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

ATCH 12

Page 3

(a) List and de	s and Losses for lax on Investible the kind(s) of property sold (for brick warehouse, or common stock, 200	example, real estate,	(b) How acquired P - Purchase D - Donation		(d) Date sold (mo , day, yr )
1a SEE PART IV SCHE	D DOMESTO				
b					
С					
d				<u></u>	
е				<u> </u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo ((e) plus (f) minu	
<u>a</u>					
b					
С					
d					
Complete only for coasts a	house some solume (h) and owe	d by the foundation on 12/21/60			
Complete only for assets s	showing gain in column (h) and owned			Gains (Col (h) ga	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any	COI	(k), but not less to Losses (from co	
а		<u> </u>	-		
<u>b</u>				<del>.</del>	
C .		<u> </u>	-		
<u>d</u>			<u> </u>		
<u>e</u>					
2 Capital gain net income	or (net canital loss)	gain, also enter in Part I, line 7	2	_ 1	349,115.
3 Net short-term capital o	ا الله الله الله الله الله الله الله ال	loss), enter -0- in Part I, line 7	<del>                                     </del>	1,	345,115.
		structions If (loss), enter -0- in			
			3	_	880,388.
Part V Qualification l	Under Section 4940(e) for Re	educed Tax on Net Investment I	ncome		
		butable amount of any year in the b	ase perio	d?	Yes X No
	n't qualify under section 4940(e)	<del></del>		<b></b>	
1 Enter the appropriate a		ear, see the instructions before maki	ng any er I	itries (d)	
Base penod years	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra	
Calendar year (or tax year beginning in) 2017	7,597,866.	35,097,420.		(col (b) divided by	0.216479
2016	6,773,102.	42,437,371.			0.159602
2015	11,877,291.	63,027,203.			0.188447
2014	12,611,710.	71,910,541.			0.175381
2013	5,000,494.	73,191,650.			0.068321
2 Total of line 1, column (	(d)		2		0.808230
		de the total on line 2 by 5 0, or by			
<u> </u>		of less than 5 years	3		0.161646
4 Enter the net value of n	oncharitable-use assets for 2018	from Part X, line 5	4	26,	732,971.
5 Multiply line 4 by line 3.			5	4,	321,278.
6 Enter 1% of net investm	nent income (1% of Part I, line 27b)	)	6	_	6,819.
			7	4,	328,097.
			8	4,	301,738.
If line 8 is equal to or of Part VI instructions	greater than line 7, check the box	x in Part VI, line 1b, and complete		using a 1% tax	rate See th

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instrι	ıction	s)
1a	Exempt operating foundations described in section 4940(d)(2), check here			
	Date of ruling or determination letter (attach copy of letter if necessary - see instructions)			
b	Domestic_foundations that meet the section 4940(e) requirements in Part V, check	`		0.
	here and enter 1% of Part I, line 27b			
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of		*	
	Part I, line 12, col (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			
3	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			0.
6	Credits/Payments			,
а	2018 estimated tax payments and 2017 overpayment credited to 2018 6a 13, 901.			1
b	Exempt foreign organizations - tax withheld at source			
.c	Tax paid with application for extension of time to file (Form 8868) 6c			•
d	Backup withholding erroneously withheld			0.01
7	Total credits and payments Add lines 6a through 6d		13,	901.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			<del></del> -
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		13 (	901.
10 11	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid ▶ 10  Enter the amount of line 10 to be Credited to 2019 estimated tax ▶ 0 - Refunded ▶ 11		13,	
	t VII-A Statements Regarding Activities		10,	701.
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	T	Yes	No
Id	participate or intervene in any political campaign?	1a	res	No X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the			
	instructions for the definition	1ь		x
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			١,
С	Did the foundation file Form 1120-POL for this year?	1 c		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			1
	(1) On the foundation $\blacktriangleright$ \$ 0 .			;
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers $\blacktriangleright$ \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities -			
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		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X	
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	Х	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T			t i
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	$\frac{\Lambda}{X}$	<del></del>
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		<del></del>
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.   CO, MO, OK,			1 1
<b>L</b> .				1
a	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	8b	<u>-</u> -	'
۵	(or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation	00		<del>                                     </del>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV If "Yes,"			(
	complete Part XIV	9	Х	
10				<del></del> ,
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		Х
			n DE	

Page **5** 

Par	t VII-A Statements Regarding Activities (continued)			
		100	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11	X_	
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement See instructions	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address  WWW.EAGLESKY.COM			_
14	The books are in care of ▶ JOSEPH D MCKEAN, JR Telephone no ▶ 405-943	-1411	L	_
	Located at ▶15301 RED COACH ROAD EDMOND, OK ZIP+4 ▶ 73013			1 1
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		V	- I
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16	983 <b>18</b> 2	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of	10 (m)		
Dat	the foreign country ► tVII-B Statements Regarding Activities for Which Form 4720 May Be Required	3488	BIT VOE	********
Га	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies	100 m	Yes	No
1.5	During the year, did the foundation (either directly or indirectly)	SE 138	XXXX	71.436
ıa	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			4
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for			
	the benefit or use of a disqualified person)?	24		
	(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)		1.00	
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	0252	223	30
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b	%~\\ %	X
	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1c		X
•	were not corrected before the first day of the tax year beginning in 2018?	MAG	in the part	
2	operating foundation defined in section 4942(j)(3) or 4942(j)(5))	Provide A		
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and		344	1
Ī	6e, Part XIII) for tax year(s) beginning before 2018?			
	If "Yes," list the years			10.5
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		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b></b>	\$		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?		3	
b	If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the	3b	9525	692
4	foundation had excess business holdings in 2018)	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	-		
,	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?	4b	2004444.78	X

	90-PF (2018		Y FOUNDATION,				26080	- 1	Page
Par	t VIİ-B	Statements Regarding Activitie	s for Which Form	4720 May Be Red	juired (cont	tinued)			
5a	-	year, did the foundation pay or incur any a						Yes	N <sub>1</sub>
		on propaganda, or otherwise attempt to in				X No			
		nce the outcome of any specific public	•	• • • • • • • • • • • • • • • • • • • •	_				
	directi	y or indirectly, any voter registration drive?				X No			
	(3) Provid	e a grant to an individual for travel, study, o	or other similar purposes	'	. Yes	X No			
	(4) Provid	e a grant to an organization other than	a charitable, etc., org	ganization described	n _	_			
		n 4945(d)(4)(A)? See instructions				X No			
	(5) Provid	e for any purpose other than religious,	charitable, scientific,	literary, or education	al				
		ses, or for the prevention of cruelty to childr				X No			
b	If any an	swer is "Yes" to 5a(1)-(5), did any of t	he transactions fail to	qualify under the e	xceptions de	scribed in			
	Regulation	s section 53 4945 or in a current notice reg	garding disaster assistan	ice? See instructions.			5b		_
	Organizati	ons relying on a current notice regarding di	saster assistance, check	here		▶L	_		
С	If the ans	swer is "Yes" to question 5a(4), does t	he foundation claim e	exemption from the	ax				
	because it	maintained expenditure responsibility for the	ne grant?		. Yes	No	1		
	If "Yes," a	ttach the statement required by Regulation	s section 53 4945-5(d)				İ		
6a	Did the fo	bundation, during the year, receive any	funds, directly or indir	ectly, to pay premiu	ms		1		
		nal benefit contract?			[]	X No		l	
b		undation, during the year, pay premiums, o					6b		2
	If "Yes" to	6b, file Form 8870	,						П
7a		e during the tax year, was the foundation a	a party to a prohibited ta	x shelter transaction?	Yes	X No			
b	•	d the foundation receive any proceeds or		•	- —	_	7b		
8	-	idation subject to the section 4960 tax on	•				1		T
•		ion or excess parachute payment(s) during			. Yes	X No		ľ	
Par		Information About Officers, Direc					oyees,		
		and Contractors							
1	LIST all on	ficers, directors, trustees, and found	(b) Title, and average	(c) Compensation	(d) Contribu		(-) F		
		(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee ben and deferred cor	efit plans	(e) Expense other all	owance	uni, es
				,					
TCF	1 13		_	0.		0.			(
			-						
			-		-				
			-						
		<del>" - '''''</del>							
			-						
2	Compens	ation of five highest-paid employed	es (other than thos	se included on lin	e 1 - see i	instruction	ns). If n	one,	ent
	"NONE "				(d) Contribu	tions to			
(a)	Name and a	ddress of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee I	penefit	(e) Expens	e acco	unt,
			devoted to position		compens		Other an	Owarice	50
		· ·							
TCE	1 14			301,133.	84	1,044.			(
		·	_		1				
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	<del></del>		-						
		<del></del> .		-	_				—
		·	-						
				<u> </u>	l				2
									,
otal	number o	fother employees paid over \$50,000.		<del> </del>	· · · · · · ·	>	Form <b>99</b> 0		_

and Contractors (continued)	yees,
3 Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	"
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
	100
Total number of others receiving over \$50,000 for professional services	
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of	
organizations and other beneficianes served, conferences convened, research papers produced, etc	Expenses
1 DURING 2018, EAGLE SKY HAD ITS THIRD CAMPING SEASON WITH	
MORE THAN 4,000 CAMPERS AND GUESTS ATTENDING KIDS CAMPS,	
TEEN CAMPS, RETREATS, AND NUMEROUS OTHER EVENTS, INCLUDING	4,301,853.
2 COMMUNITY COLLEGES, MISSOURI HIGHWAY PATROL YOUTH ACADEMY,	
AND VARIOUS OTHER ORGANIZATIONS. THIS IS AN INCREASE OF MORE	
THAN 300%. THE ROCK CHAPEL WAS EXPANDED AND SEVERAL	
3 ADDITIONAL MEETING ROOMS WERE ADDED. WORK CONTINUED ON THE	
DEVELOPMENT OF THE EAST CAMP WITH THE COMPLETION OF FOUR	
QUADS AND TWO MEETING FACILITIES. AN EXPERIENCED, HIGHLY	
4 QUALIFIED EXECUTIVE DIRECTOR WAS ADDED TO THE SENIOR STAFF.	
CONSTRUCTION COSTS \$1,303,538, CAMP OPERATIONS \$2,998,315.	
Part IX-B Summary of Program-Related Investments (see instructions)	
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 NONE	
2	
All other program-related investments. See instructions	
3	
NONE	
Total. Add lines 1 through 3	

Page 8

Pa	rt X-	Minimum Investment Return (All domestic foundations must complete this part. Fore see instructions.)	ign fo	oundations,
1		market value of assets not used (or held for use) directly in carrying out charitable, etc., boses		
а	Ave	rage monthly fair market value of securities	1a	25,763,416.
		rage of monthly cash balances	1b	1,376,656.
С	Fair	market value of all other assets (see instructions)	1c	
d		al (add lines 1a, b, and c)	1d	27,140,072.
е	Red	uction claimed for blockage or other factors reported on lines 1a and		
	1c (	attach detailed explanation) 1e		
2		uisition indebtedness applicable to line 1 assets	2	
3	Sub	stract line 2 from line 1d	3	27,140,072.
4	Cas	h deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see		
	ınstı	ructions)	4	407,101.
5	Net	value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	26,732,971.
6	Min	ımum ınvestment return Enter 5% of line 5	6	1,336,649.
Pa	rt XI	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating four and certain foreign organizations, check here ► X and do not complete this part)	ndatio	ns
1	Mını	Imum investment return from Part X, line 6	1	
2 a	Tax	on investment income for 2018 from Part VI, line 5 2a		
b	Inco	ome tax for 2018 (This does not include the tax from Part VI) 2b		
С		lines 2a and 2b	2c	
3		ributable amount before adjustments Subtract line 2c from line 1	3	
4		overies of amounts treated as qualifying distributions	4	
5		lines 3 and 4	5	
6		luction from distributable amount (see instructions)	6/	
7	Dist	tributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,	7	
Pa		Qualifying Distributions (see Instructions)	<i>.</i>	
1	Amo	ounts paid (including administrative expenses) to accomplish charitable, etc., purposes		<del></del>
a		enses, contributions, gifts, etc total from Part I, column (d), line 26	1a	2,998,200.
b		gram-related investments - total from Part IX-B		
2		punts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	15	
-		poses,	2	1,303,538.
3		punts set aside for specific charitable projects that satisfy the		, , , , , , , , , , , , , , , , , , , ,
a		ability test (prior IRS approval required)	3a	
b		th distribution test (attach the required schedule)	3b	
4		lifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	4,301,738.
5		ndations that qualify under section 4940(e) for the reduced rate of tax on net investment income	_	
-		er 1% of Part I, line 27b See instructions.	5	0.
6		usted qualifying distributions Subtract line 5 from line 4	6	4,301,738.
J	•	e The amount on line 6 will be used in Part V, column (b), in subsequent years when ca		-, ,
	1100	qualifies for the section 4940(e) reduction of tax in those years	uid l	mg whether the roundation

### THE EAGLE SKY FOUNDATION; INC.

	990-PF (2018)		<del></del>		Page S
Pa	rt XIII Undistributed Income (see instr		<del></del>	T	
1	Distributable amount for 2018 from Part XI,	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 20,18
	line 7				
	Undistributed income, if any, as of the end of 2018				
	Enter amount for 2017 only				
	Total for pnor years 20,20,20				<del> </del>
	Excess distributions carryover, if any, to 2018				
	From 2013				
	From 2014				
С	From 2015				
d	From 2016				1
	From 2017				
f	Total of lines 3a through e				
4	Qualifying distributions for 2018 from Part XII,				
	line 4 ▶ \$				
а	Applied to 2017, but not more than line 2a		/	f	<u> </u>
b	Applied to undistributed income of prior years (Election required - see instructions)				
С	Treated as distributions out of corpus (Election required - see instructions)				
ď	Applied to 2018 distributable amount				
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2018				
	(If an amount appears in column (d), the same amount must be shown in column (a) )				ĺ
6	Enter the net total of each column as indicated below:				
_					
	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b	Prior years' undistributed income Subtract				İ
	Inne 4b from line 2b				
٠	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed	<del></del>			
d	Subtract line 6c from line 6b Taxable				
۵	amount - see instructions			<del> </del>	
	4a from line 2a Taxable amount - see				
	instructions				
f	Undistributed income for 2018 Subtract lines				
	4d and 5 from line 1 This amount must be				
	distributed in 2019				
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)	<del> </del>			
8	Excess distributions carryover from 2013 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2019				
	Subtract lines 7 and 8 from line 6a				
	Analysis of line 9				
а	Excess from 2014				
	Excess from 2015	· '			
,	Excess from 2016	!			
	Excess from 2017				1
е	Excess from 2018				<u> </u>
					Form 990-PF (2018)

				•		-
Form	990-PF (2018)	THE EAGLE S	KY FOUNDATION,	INC.	. 73-3	L526080 Page <b>10</b>
Pa	rt XIV Private Ope	erating Foundations (	see instructions and	Part VII-A, questio	n 9)	
1 a		received a ruling or dete				
	foundation, and the ruling	g is effective for 2018, ente	r the date of the ruling		.▶	
ь	Check box to indicate v	whether the foundation is	a private operating fou	ndation described in	section X 4942(j)	(3) or 4942(J)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		
	justed net income from Part	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
	I or the minimum investment	(=) = 0.10	(5) 25 11	(0, 20 / 0	. (-)	<del></del>
	return from Part X for each	571,154.	1,165,212.	2,121,869.	2,764,996.	6,623,231.
	year listed	485,481.	990,430.	1,803,589.	2,350,247.	5,629,747.
D	85% of line 2a		330,1001		2,000,000	
С	Qualifying distributions from Part XII line 4 for each year listed .	4,301,738.	7,607,439.	6,799,628.	11,895,274.	30,604,079.
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of					
•	exempt activities Subtract line 2d from line 2c	4,301,738.	7,607,439.	6,799,628.	11,895,274.	30,604,079.
3	Complete 3a b or c for the alternative test relied upon	,				1
а	"Assets alternative test - enter					†
	(1) Value of all assets					
	(2) Value of assets qualifying under section	,				
b	4942(j)(3)(B)(i) Endowment" alternative test-					
	enter 2/3 of minimum invest-					
	ment return shown in Part X,	891,099.	1,169,914.	1,414,579.	2,100,907.	5,576,499.
	line 6 for each year listed 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)	-				
	public and 5 or more					
	exempt organizations as provided in section 4942					
	(j)(3)(B)(III)					
	(3) Largest amount of sup- port from an exempt					
	organization					
	(4) Gross investment income.					
Pa		ntary Information (Co		nly if the foundat	tion had \$5,000 or	more in assets at
	<del>-</del>	uring the year - see in	<u> </u>			
		g Foundation Managers				
а		the foundation who have				ed by the foundation
	before the close of any	tax year (but only if they	nave contributed mo	re than \$5,000) (Se	e section 507(d)(2) )	
	JOSEPH D. M	· · · · · · · · · · · · · · · · · · ·				
b		the foundation who ow				large portion of the
	ownership of a partner	ship or other entity) of w	hich the foundation ha	as a 10% or greater i	nterest	
	NONE					
2	Information Regarding	g Contribution, Grant, G	ift, Loan, Scholarship,	etc., Programs:		
	Check here ▶ X If the	he foundation only ma	ikes contributions to	preselected charit	able organizations a	nd does not accep
	unsolicited requests for	or funds If the foundation	on makes gifts, grants	s, etc., to individuals	s or organizations un	der other conditions
	complete items 2a, b, c	c, and d. See instructions				
а	The name, address, a	nd telephone number or	email address of the	person to whom appl	ications should be addi	ressed
b	The form in which appl	lications should be subm	itted and information	and materials they s	hould include	
С	Any submission deadli	nes				
d	Any restrictions or his factors	mitations on awards, s	such as by geograph	nical areas, charitat	ole fields, kinds of i	nstitutions, or other

Page **11** 

3 Grants and Contributions Paid Dur	If recipient is an individual	Foundation	ruture rayment	<del></del>
3 Grants and Contributions Paid Dur Recipient Name and address (home or business)	show any relationship to any foundation manager	status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year				
ATCH 15				
			†	
		}		
			<u> </u>	2,500
Total	<u>.</u>	<u></u>	▶ 3a'	2,300
<b>b</b> Approved for future payment				
		1	I	
		1		

JSA 8E1491 1 000

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Part XVI-A Analysis of Income-Prod			_		
Enter gross amounts unless otherwise indicated	Unrela	ated business income	Excluded by	section 512, 513, or 514	(e) Related or exempt
Program service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a CAMP TUITION			<u> </u>		502,492.
b				***	
c		<u>-</u> -			
d		, , , , , , , , , , , , , , , , , , ,			<del>-</del>
e					
f	<del>-</del> -	<u> </u>			
g Fees and contracts from government agencies			-		
· ·					
2 Membership dues and assessments			14	9,084.	
3 Interest on savings and temporary cash investments -			14	822,134.	
4 Dividends and interest from securities			<del></del>		<del></del>
5 Net rental income or (loss) from real estate					
<ul><li>a Debt-financed property</li></ul>				_	
	531110	78,089.	17	8,077.	
6 Net rental income or (loss) from personal property				·	
7 Other investment income			18	3,868,616.	
8 Gain or (loss) from sales of assets other than inventory		-			
9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory			03	20,567.	•
11 Other revenue a				·	<del> </del>
b ATCH 16		228,179.		-419,075.	
с					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		306,268.		4,309,403.	502,492.
13 Total. Add line 12, columns (b), (d), and (e)					5,118,163.
(See worksheet in line 13 instructions to verify calci					
Part XVI-B Relationship of Activitie		ccomplishment of Ex	cempt Pur	oses	
Line No Explain below how each activit	y for which	n income is reported in	o column (	a) of Part Y\/LA contribu	ited importantly to the
accomplishment of the foundation	ni s exemp	t purposes (other than t	by providing	fullus for such purposes	s) (See instructions )
1 THE ORGANIZATION OPER	ATES A	CHRISTIAN CAMPIN	G PROGRA	M. CAMP	
TUITION IS THE REVENU	E ASSOC	ATED WITH THE O	PERATION	OF THE	
CAMPING PROGRAM.		,			
					· · · · · · · · · · · · · · · · · · ·
· · ·				<del>'</del>	
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Par	XVII	Information R Exempt Organ		ansfers to and T	ransactio	ns and F	Relations	hips With Nonc	harii	able	
1	Did th	ne organization direct		engage in any of the	e following	with any o	ther organ	nization described		Yes	No
		ection 501(c) (other	-		_	-	•				
	organ	izations?						!			
		fers from the reportin									
		ash									Х
	(2) O	ther assets							1a(2)		Х
b	Other	transactions									ĺ
	(1) Sa	ales of assets to a no	ncharitable exer	npt organization					1b(1)		X
		urchases of assets fro									X
	(3) R	ental of facilities, equi	pment, or other	assets		• • • • • •			1b(3)		X
		eimbursement arrangi									X
		oans or loan guarantee									X
		erformance of service									X
		ng of facilities, equipm								ĻI	X
		answer to any of th									
		of the goods, other in any transaction or									
				<del></del>							
(a) Lii	ne no	(b) Amount involved N/A	(c) Name of n	oncharitable exempt orga	nization	N/A	tion of transf	ers, transactions, and shar	ing arra	ingemei	nts
		N/A				14/ A					
			<u> </u>	·							
		<u> </u>				<del></del>					
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								· · · · · · · · · · · · · · · · · · ·			
2a	ls the	foundation directly of	or indirectly aff	iliated with, or rela	ted to, one	or more t	ax-exempt	organizations			
		ibed in section 501(c)	_					-	T Y	es X	No
		s," complete the follow	•	, ,				_			-
		(a) Name of organization	1	(b) Type of or	ganization		(	c) Description of relations	hip		
_					···			·· <del>·····</del> ·······		···	
	Unde	er penalties of perjury, I decla	re that I have examin	ned this return, including ac appayer) is based on all inform	companying sch	edules and state	ements, and to	o the best of my knowledg	e and b	elief, it	is true
Sign	N	() Ol A A		11 11 11	16	//	2	May the IRS	decre	s this	cetum
		mark Y	11/1900	1-11	<u> </u>	VIN	wan	with the pre			
Here	Syd	plature of officer or trustee		Date		Title		See instructions	; <u>X</u>	Yes	No
	$\perp\!\!/\!\!/$	<u> </u>									
- Paid		Print/Type preparer's nar	me	Preparer's signature	4,1		Date	CHECK C	MIT		
		BRIAN D TODD		Buan D	hold (	PA	11/11/19	<del></del>		2260	1
	arer		D, LLP	"065.4-				Firm's EIN ► 44-01	602	50	
Jse	Only			IS #200/PO BOX	1190						
		SP	RINGFIELD,	MO		6580	6-2523	Phone no. 417 86	5-87	/01	

### Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury

### Schedule of Contributors

OMB No 1545-0047

2018

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information

Internal Revenue Service Employer identification number Name of the organization THE EAGLE SKY FOUNDATION, INC. 73-1526080 Organization type (check one) Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), 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 

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

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

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

Employer identification number 73-1526080

Part I	Contributors (see instructions) Use duplicate copies	of Part I if additional space is ne	eded
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1_	JHS 2000 TRUST 7201 AURELIA RD	\$50,000.	Person X Payroll Noncash
	OKLAHOMA CITY, OK 73121	_	(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	KENNETH R GOODIN FAMILY TRUST	_	Person X
	14800 DALEA DRIVE	\$\$	Payroll Noncash
	OKLAHOMA CITY, OK 73142	_	(Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	MICHAEL D BISHOP, MD P.O. BOX 3148 BLOOMINGTON, IN 47402	\$ 10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	JOSEPH D. MCKEAN, M.D.  2601 MEADOW VIEW ROAD  EDMOND, OK 73013	\$100,000.	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5_	DON CORRELL  PO BOX 95329  OKLAHOMA CITY, OK 73143	\$5,000.	Person  Payroll  Noncash  (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

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73-1526080

Part II	Noncash Property (see instructions) Use duplicate copies of	Part II if additional space is ne	eded
(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
		- - - - - \$	
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		- - - - - \$	
			<u> </u>

JSA

Employer identification number 73-1526080

Part III	Exclusively religious, charitable, etc.	, contributions to o	rganizations desc	ribed in section 501(c)(7), (8), or					
	(10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and								
	the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc.								
	contributions of \$1,000 or less for th	ee instructions ) ►\$							
	Use duplicate copies of Part III if addit								
(a) No	41.5	4-3.11-	-1						
from Part I	(b) Purpose of gift	(c) Use	or giπ	(d) Description of how gift is held					
		-							
		(e) Transf	er of aift						
		(-,	<b>.</b>						
	Transferee's name, address, a	nd ZIP + 4	Relatio	nship of transferor to transferee					
	, , , , , , , , , , , , , , , , , , , ,								
		<del></del>	<del></del>						
			<del></del>						
			<del> </del>						
(a) No									
from	(b) Purpose of gift	(c) Use	of gift (d) Description of how gift is he						
Part I	<del> </del>	<del>-</del>							
			<del></del>						
	(e) Transfer of gift								
	Transferee's name, address, a	Polatio	nchin of transferor to transferor						
	Transferee's flame, address, an	IIU ZIF + 4	Relationship of transferor to transferee						
(a) No									
from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
Part I									
			<del></del>						
	(e) Transfer of gift								
	Towns for the control of the control								
	Transferee's name, address, at	na ZIP + 4	Relationship of transferor to transferee						
(a) Na									
(a) No from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
Part I									
		(e) Transf							
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee						
	1								

FORM 990-PF - PART IV

CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

	II IIAL OAI	IND AIND LO	SSES FUI	TAX UNI	INVESTI	VIII P	ENT INCOM	
Kınd of F	roperty		Desci	ription		or	Date acquired	Date sold
Gross sale	Depreciation	Cost or	FMV	Adj basis	Excess of	니	Gain	
price less expenses of sale	allowed/ allowable	other basis	as of 12/31/69	as of 12/31/69	FMV over adı basıs	1	or (loss)	
12476663.	allowable	VARIOUS CMO			auj vasis		-231,493.	
9,929,617.		VARIOUS CMO 10398377.	SECURITIES	- LT			-468,760.	
155,258.		VARIOUS CMO 804,153.	SECURITIES	- ST			-648,895.	
118.		VARIOUS CMO 85.	SECURITIES	- LT			33.	
OTAL GAIN(L	oss)						1349115.	
	-							
	;							

.2018 FORM 990-PF THE EAGLE SKY FOUNDATION, INC.

73-1526080

ATTACHMENT 1

FORM 990-PF, PART I - GROSS SALES LESS RETURNS AND ALLOWANCES

DESCRIPTION

AMOUNT

CAMP GENERAL STORE

41,089.

TOTAL

41,089.

## FORM 990PF, PART I - OTHER INCOME

DESCRIPTION MANAGEMENT FEES	CAMP TUITION	CLEANING. MAINTENANCE, OTHER	LIVESTOCK SALES	OTHER INCOME	PTP K-1 UBI	LOSS ON EQUIPMENT	GOLF CART RENTAL
DESC	CAMP	CLEA	LIVE	OTHE	PTP	LOSS	GOLF

TOTALS

REVENUE AND	EXPENSES PER BOOKS	502,492.	53,350.	23,579.	40,749.	-1,226.	-477,255.	4,440.

ADJUSTED  NET  INCOME 165,467. 502,492. 53,350. 23,579. 40,749.	312,822.
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ATTACHMENT 3

THE EAGLE SKY FOUNDATION, INC.

FEES	
LEGAL	
1	
Н	
PART	
990PF,	
FORM	

		BFVFNIT			
		AND	NET	ADJUSTED	
		EXPENSES	INVESTMENT	NET	CHARITABLE
DESCRIPTION		PER BOOKS	INCOME	INCOME	PURPOSES
LEGAL FETS		13,153.			13,153,
	TOTALS	13, 153.			13, 153.

73-1526080

# FORM 990PF, PART I - ACCOUNTING FEES

CHARITABLE PURPOSES	14,669.	14,669.
ADJUSTED NET INCOME	13,404.	13,404.
NET INVESTMENT INCOME	10,875.	10,875.
REVENUE AND EXPENSES PER BOOKS	28,073.	28,073.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

ATTACHMENT

THE EAGLE SXY FOUNDATION, INC.

### - OTHER PROFESSIONAL FEES PART I FORM 990PF,

NET INVESTMENT INCOME	130.	130.
REVENUE AND EXPENSES PER BOOKS	130.	130.
DESCRIPTION	INVESTMENT MANAGEMENT FEES	TOTALS

THE EAGLE SKY FOUNDATION, INC.

	REVENUE AND	NET
DESCRIPTION	EXPENSES PER BOOKS	INVESTMENT
PROPERTY TAXES FOREIGN TAXES SALES TAXES	113,387. 64. 3,234.	64.

64.

116,685.

TOTALS

ATTACHMENT

73-1526080

### - OTHER EXPENSES PART I FORM 990PF,

CHARITABLE PURPOSES	39,905.		13,231.	164,589.	13,638.		736.		$\circ$	5,143.	$\infty$			450.		426,624.
ADJUSTED NET INCOME	30,722.	45,368. 8,761.			.665	25,030.	119.	39,044.	10,437.		22,063.	124,874.	11,056.		9,240.	327,379.
REVENUE AND EXPENSES PER BOOKS	0,62	45,368. 8,761.	$\sim$	164,589.	14,303.	25,030.	855.	39,044.	192,517.	5,143.	28,916.	124,874.	$\circ$	450.	9,240.	754,003.
DESCRIPTION	ADVERTISING	CAMP ACTIVITIES CONTRACT LABOR	INFORMATION TECHNOLOGY	INSURANCE	LICENSES, DUES, SUBSCRIPTIONS	LIVESTOCK EXPENSES	MEALS & ENTERTAINMENT	MANAGEMENT FEE	OFFICE	RECRUITING	REPAIRS & MAINTENANCE	SUPPLIES AND OTHER	TRAINING	SAFETY PROGRAM FEES	GOLF CART EXPENSE	TOTALS

73-1526080

ATE STOCK	
II - CORPOR	
PART	
990PF,	
FORM	

ENDING <u>FMV</u>	23,724,071.	23,724,071.
ENDING BOOK VALUE	47,974,061.	47,974,061.
BEGINNING BOOK VALUE	42,845,890.	42,845,890.
		TOTALS
DESCRIPTION	SEE ATTACHED STATEMENT	

ATTACHMENT 9

FORM 990PF, PART II - CORPORATE BONDS

DESCRIPTION

BEGINNING BOOK VALUE

SEE ATTACHED STATEMENT

9,157,325.

TOTALS

9,157,325.

ATTACHMENT 9 PAGE 27

FORM 990PF, PART II - OTHER INVESTMENTS

DESCRIPTION

BEGINNING BOOK VALUE

SEE ATTACHED STATEMENT

2,850,089.

TOTALS

2,850,089.

ATTACHMENT 10 PAGE 28

ASSETS
- OTHER
ΙΪ
PART
990PF,
FORM

ENDING <u>FMV</u>	46,340. 267,152. 11,175. 1,843. 1,399.
ENDING BOOK VALUE	46,340. 267,152. 11,175. 1,843. 1,399.
BEGINNING BOOK VALUE	46,340. 267,152. 33,175. 1,870. 916.
	NES TOTALS
No.	MINING CLAIMS MATER RIGHTS DEPOSIT - BOARD OF MINES DWNERS RESERVE OTHER ASSETS
DESCRIPTION	MINING CLAIMS WATER RIGHTS DEPOSIT - BOARI OWNERS RESERVE OTHER ASSETS

.2018 FORM 990-PF THE EAGLE SKY FOUNDATION, INC.

73-1526080

ATTACHMENT 12

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

AMOUNT DESCRIPTION

2,330,777. UNREALIZED GAIN

2,330,777. TOTAL

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73-1526080	ATTACHMENT 13	EXPENSE ACCT AND OTHER ALLOWANCES		.0	· 0	.0	.0	.0
•	ATTACH	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	Ö	· 0	.0	.0	.0	O
		COMPENSATION	.0	Ċ	Ċ	·	Ċ	O
2018 FORM 990-PF	OFFICERS, DIRECTORS, AND TRUSTEES	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	CEO/CHAIRMAN 16.00	DIRECTOR 2.00	VICE-CHAIRMAN 8.00	DIRECTOR 2.00	DIRECTOR 8.00	DIRECTOR 8.00
THE EAGLE SKY FOUNDATION, INC.	FORM 990PF, PART VIII - LIST OF OFFICERS,	NAME AND ADDRESS	JOSEPH D. MCKEAN, JR. 15301 RED COACH ROAD EDMOND, OK 73013	BROOKS BOCK 15301 RED COACH ROAD EDMOND, OK 73013	KENNETH R. GOODIN 15301 RED COACH ROAD EDMOND, OK 73013	PAMELA BOCK 15301 RED COACH ROAD EDMOND, OK 73013	MICHAEL BISHOP 15301 RED COACH ROAD EDMOND, OK 73013	VENORA BISFOP 15301 RED COACH ROAD EDMOND, OK 73013

ATTACHMENT 13 (CONT'D)

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES		
FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AN	ID TRUSTEES	
FORM 990PE, PART VIII - LIST OF OFFICERS, DI	RECTORS, AN	
FORM 990PF, PART VIII - LIST OF (	DFFICERS, DI	
FORM 990PF, PART VIII -	LIST OF	
FORM 990PF, F	ART VIII -	
	FORM 990PF, I	

•	•		
EXPENSE ACCT AND OTHER ALLOWANCES	Ö	Ö	0
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	.0	0
COMPENSATION	.0	.0	0.
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	DIRECTOR/SECRETARY 8.00	DIRECTOR 2.00	GRAND TOTALS
NAME AND ADDRESS	JOHN H STUEMKY 15301 RED COACH ROAD EDMOND, OK 73013	JOSHUA T. ROWLAND 15301 RED COACH ROAD EDMOND, OK 73013	

- COMPENSATION OF THE FIVE HIGHEST PAID EMPLOYEES

PART VIII

990PF,

330FF, FARI VIII - COMPENSAIION OF INE	THE FIVE HIGHEST PAID EMPLOIDES	WELOT EES	ATTACHMENT	T 14
NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER . ALLOWANCES
GLENN BROWN 15301 RED COACH ROAD EDMOND, OK 73013	CONSTRUCTION MGR 40.00	108,000.	17,321.	Ġ
WILLIAM ALFORD 15301 RED COACH ROAD EDMOND, OK 73013	FOOD SERVICES DIR 40.00	57,000.	30,483.	.0
MCRGEN MOORE 15301 RED COACH ROAD ECMOND, OK 73013	MECHANIC 40.00	51,000.	12,308.	
DAVID HORNING 15301 RED COACH ROAD EDMOND, OK 73013	PROPERTY MANAGER 40.00	38,400.	16,740.	. 0
SETH MCGIE 15301 RED COACH ROAD EDMOND, OK 73013	MAINTENANCE EMPLOYEE 40.00	46,733.	7,192.	.0
	TOTAL COMPENSATION	301,133.	84,044.	0

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ATTACHMENT 15

2,500

TOTAL CONTRIBUTIONS PAID

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME FND ADDRESS	AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
SONDRA ELLIS MOORE MEMORIAL SCHOLARSHIP RR 4 BOX 4515 PIEDMONT, MO 63957	NONE PC	SCHOLARSHIP	1,000
LCCE/TREE OF SHARING 102 S TEJON ST #530 COLORADO SPRINGS, CO 80903	NONE PC	COMMUNITY SUPPORT	100
LEADVILLE LION'S CLUB 1843 SILVER EAGLE CIR LEADV-LLE, CO 80'61	NONE NC	COMMUNITY SUPPORT	75
NATIONAL FIRE SAFETY PO BO> 378 MICHIGAN CENTER, MI 49254-0378	NONE PC	COMMUNITY SUPPORT	75
LEADVILLE/LAKE CC CHAMBER 809 HARRISON AVE P O BOX 861 LEADVILLE, CO 80461	NONE P.C	COMMUNITY SUPPORT	250
PIEDMONT AREA CHAMBER OF COMMERCE 215 S MAIN STREET P O BOX 101 PIEDMONT, MO 63957	NONE PC	COMMUNITY SUPPORT	1,000

FORM 990-PF, PART XVI-A - ANALYSIS OF OTHER REVENUE

				ATTACHMENT 16	16
DESCRIPTION	BUSINESS CODE	AMOUNT	EXCLUSION CODE	AMOUNT	RELATED OR EXEMPT FUNCTION INCOME
MANAGEMENT FEES	531110	165,467.			•
CLEANING, MAINTENANCE, OTHER	531110	53,350.			
LIVESTOCK SALES			01	23,579.	
MISCELLANEOUS	531110	10,588.	01	30,161.	
EXCISE TAX REFUNDS			01		
PTP K-1 UBI	523000	-1,226.			
LOSS ON SALE OF ASSETS			18	-477,255.	
GOLF CART RENTAL			0.1	4,440.	
TOTALS	1 11	228,179.	. "	-419,075.	

The Eagle Sky Foundation, Inc. Form 990-PF, Part VII-A, Line 11 List of Controlled Entities 12/31/2018

Grand West Village Resort, LLC (Single Member LLC of Eagle Sky Foundation, Inc.)

Eagle Sky of the Ozarks, LLC (Single Member LLC of Eagle Sky Foundation, Inc.)

Eagle Sky of the Rockies, LLC (Single Member LLC of Eagle Sky Foundation, Inc.)

Eagle Sky of Kenya, LLC (Single Member LLC of Eagle Sky Foundation, Inc.)

Any activity that occurred within each entity shown above has been reported within the Eagle Sky Foundation, Inc 990-PF.