

Form **990-PF**Department of the Treasury
Internal Revenue Service**Return of Private Foundation**

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

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

Go to www.irs.gov/Form990PF for instructions and the latest information.

OMB No. 1545-0047

2022

Open to Public Inspection

For calendar year 2022 or tax year beginning , and ending

Name of foundation OP & WE EDWARDS FOUNDATION INC		A Employer identification number 13-6100965
Number and street (or P.O. box number if mail is not delivered to street address) PO BOX 2445	Room/suite	B Telephone number 406-446-1077
City or town, state or province, country, and ZIP or foreign postal code RED LODGE, MT 59068-2445		C If exemption application is pending, check here ... ☐
G Check all that apply: ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ Name change		D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐
H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ... ☐
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 25,462,602.	J Accounting method: ☐ Cash ☒ Accrual ☐ Other (specify) _____ (Part I, column (d), must be on cash basis.)	
F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ... ☐		

Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received	480,000.		N/A	
	2 Check ☐ if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments	14,084.	14,084.		STATEMENT 1
	4 Dividends and interest from securities	161,286.	161,286.		STATEMENT 2
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10	-145,673.			
	b Gross sales price for all assets on line 6a	8,878.			
	7 Capital gain net income (from Part IV, line 2)		0.		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less: Cost of goods sold ...					
c Gross profit or (loss)					
11 Other income	5,483,406.	337,286.		STATEMENT 3	
12 Total. Add lines 1 through 11	5,993,103.	512,656.			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc.	0.	0.		0.
	14 Other employee salaries and wages	52,403.	26,202.		26,201.
	15 Pension plans, employee benefits	7,912.	3,956.		3,956.
	16a Legal fees				
	b Accounting fees	STMT 4	15,366.	7,683.	7,683.
	c Other professional fees				
	17 Interest				
	18 Taxes	STMT 5	34,577.	10,646.	10,645.
	19 Depreciation and depletion	353,366.	340.		
	20 Occupancy	8,545.	4,273.		4,272.
	21 Travel, conferences, and meetings	10,745.	5,373.		5,372.
	22 Printing and publications				
	23 Other expenses	STMT 6	-434,862.	-447,762.	12,900.
	24 Total operating and administrative expenses. Add lines 13 through 23	48,052.	-389,289.		71,029.
	25 Contributions, gifts, grants paid	1,400,274.			1,400,274.
26 Total expenses and disbursements. Add lines 24 and 25	1,448,326.	-389,289.		1,471,303.	
27 Subtract line 26 from line 12:					
a Excess of revenue over expenses and disbursements ...	4,544,777.				
b Net investment income (if negative, enter -0-)		901,945.			
c Adjusted net income (if negative, enter -0-)			N/A		

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.		
		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	2,151,015.	4,898,582.	4,898,582.
	3 Accounts receivable			
	Less: allowance for doubtful accounts			
	4 Pledges receivable			
	Less: allowance for doubtful accounts			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable			
	Less: allowance for doubtful accounts			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges		4,663.	4,663.
	10a Investments - U.S. and state government obligations			
	b Investments - corporate stock STMT 7	2,970,851.	2,946,892.	918,424.
	c Investments - corporate bonds			
	11 Investments - land, buildings, and equipment: basis			
Liabilities	Less: accumulated depreciation			
	12 Investments - mortgage loans			
	13 Investments - other STMT 8	14,732,769.	16,507,538.	19,099,852.
	14 Land, buildings, and equipment: basis 30,125.			
	Less: accumulated depreciation STMT 9 29,644.	821.	481.	481.
	15 Other assets (describe STATEMENT 10)	501,188.	540,600.	540,600.
	16 Total assets (to be completed by all filers - see the instructions. Also, see page 1, item I)	20,356,644.	24,898,756.	25,462,602.
	17 Accounts payable and accrued expenses	12,633.	9,968.	
	18 Grants payable			
	19 Deferred revenue			
Net Assets or Fund Balances	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe)			
	23 Total liabilities (add lines 17 through 22)	12,633.	9,968.	
	Foundations that follow FASB ASC 958, check here ☐ and complete lines 24, 25, 29, and 30.			
	24 Net assets without donor restrictions			
	25 Net assets with donor restrictions			
	Foundations that do not follow FASB ASC 958, check here ☒ and complete lines 26 through 30.			
	26 Capital stock, trust principal, or current funds	9,412,000.	8,866,595.	
	27 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
	28 Retained earnings, accumulated income, endowment, or other funds ...	10,932,011.	16,022,193.	
	29 Total net assets or fund balances	20,344,011.	24,888,788.	
	30 Total liabilities and net assets/fund balances	20,356,644.	24,898,756.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return)	1	20,344,011.
2 Enter amount from Part I, line 27a	2	4,544,777.
3 Other increases not included in line 2 (itemize)	3	0.
4 Add lines 1, 2, and 3	4	24,888,788.
5 Decreases not included in line 2 (itemize)	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	24,888,788.

Form 990-PF (2022)

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a CL&F	P		
b CL&F	P		
c CL&F	P		
d COOPERATIVE ASST FUND	P		
e CAPITAL GAINS DIVIDENDS			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))
a		1,829.	-1,829.
b		93,248.	-93,248.
c		50,854.	-50,854.
d		8,620.	-8,620.
e 8,878.			8,878.

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.

(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	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))
a			-1,829.
b			-93,248.
c			-50,854.
d			-8,620.
e			8,878.

2 Capital gain net income or (net capital loss)	If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	-145,673.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8		3	N/A

Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions)		1	12,537.
b All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) 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-)		2	0.
3 Add lines 1 and 2		3	12,537.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5	12,537.
6 Credits/Payments:			
a 2022 estimated tax payments and 2021 overpayment credited to 2022	6a 17,200.		
b Exempt foreign organizations - tax withheld at source	6b 0.		
c Tax paid with application for extension of time to file (Form 8868)	6c 0.		
d Backup withholding erroneously withheld	6d 0.		
7 Total credits and payments. Add lines 6a through 6d		7	17,200.
8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached		8	0.
9 Tax due. If the total of lines 5 and 8 is more than 7, enter amount owed		9	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10	4,663.
11 Enter the amount of line 10 to be: Credited to 2023 estimated tax 4,663. Refunded		11	0.

Form 990-PF (2022)

Part VI-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition 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.		X
c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. \$ <u>0.</u> (2) On foundation managers. \$ <u>0.</u>		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. \$ <u>0.</u>		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		X
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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	X	
b If "Yes," has it filed a tax return on Form 990-T for this year?	X	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		X
If "Yes," attach the statement required by <i>General Instruction T</i> .		
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	X	
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 XIV	X	
8a Enter the states to which the foundation reports or with which it is registered. See instructions. <u>NY</u>		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation	X	
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 2022 or the tax year beginning in 2022? See the instructions for Part XIII. If "Yes," complete Part XIII		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X
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		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		X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	X	
Website address <u>OPWEEDWARDS.ORG</u>		
14 The books are in care of <u>THE ORGANIZATION</u> Telephone no. <u>406-425-5243</u> Located at <u>PO BOX 2445, RED LODGE, MT</u> ZIP+4 <u>59068-2445</u>		
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		N/A
16 At any time during calendar year 2022, 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?		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country		

Form **990-PF** (2022)

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year, did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?		X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?		X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	X	
(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)?		X
(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.)		X
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		X
c Organizations relying on a current notice regarding disaster assistance, check here ☐		
d 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 2022?		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)):		
a At the end of tax year 2022, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2022?		X
If "Yes," list the years _____, _____, _____, _____		
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.)		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. _____, _____, _____, _____		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	X	
b If "Yes," did it have excess business holdings in 2022 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 2022.)		X
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		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 2022?		X

Form 990-PF (2022)

Part VI-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year, did the foundation pay or incur any amount to:

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

	Yes	No
5a(1)		X

(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?

5a(2)		X
-------	--	---

(3) Provide a grant to an individual for travel, study, or other similar purposes?

5a(3)		X
-------	--	---

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions

5a(4)	X	
-------	---	--

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

5a(5)		X
-------	--	---

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions

5b	X	
----	---	--

c Organizations relying on a current notice regarding disaster assistance, check here ☐**d** If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

5d		X
----	--	---

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

6a		X
----	--	---

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b		X
----	--	---

If "Yes" to 6b, file Form 8870.

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

7a		X
----	--	---

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b		
----	--	--

8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?

8		X
---	--	---

Part VII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 11		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(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 to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SARA URBANIK PO BOX 2445, RED LODGE, MT 59068	EXECUTIVE DIRECTOR 40.00	53,487.	0.	0.

Total number of other employees paid over \$50,000

0

Form 990-PF (2022)

3 Five highest-paid independent contractors for professional services. If none, enter "NONE."

Total number of others receiving over \$50,000 for professional services	0
---	---

Part VIII-B	Summary of Program-Related Investments
--------------------	---

Total. Add lines 1 through 3	67,000.
---	---------

2022.05000 OP & WE EDWARDS FOUNDATIO 134285.1

Part IX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, 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	1a	999,516.
b	Average of monthly cash balances	1b	2,418,537.
c	Fair market value of all other assets (see instructions)	1c	19,101,947.
d	Total (add lines 1a, b, and c)	1d	22,520,000.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	22,520,000.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions)	4	337,800.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3	5	22,182,200.
6	Minimum investment return. Enter 5% (0.05) of line 5	6	1,109,110.

Part X 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	Minimum investment return from Part IX, line 6	1	1,109,110.
2a	Tax on investment income for 2022 from Part V, line 5	2a	12,537.
b	Income tax for 2022. (This does not include the tax from Part V.)	2b	
c	Add lines 2a and 2b	2c	12,537.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,096,573.
4	Recoveries of amounts treated as qualifying distributions	4	27,588.
5	Add lines 3 and 4	5	1,124,161.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1	7	1,124,161.

Part XI 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	1a	1,471,303.
b	Program-related investments - total from Part VIII-B	1b	67,000.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, line 4	4	1,538,303.

Form 990-PF (2022)

Part XII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2021	(c) 2021	(d) 2022
1 Distributable amount for 2022 from Part X, line 7				1,124,161.
2 Undistributed income, if any, as of the end of 2022:				
a Enter amount for 2021 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2022:				
a From 2017 136,639.				
b From 2018 1,014,281.				
c From 2019 983,673.				
d From 2020 714,598.				
e From 2021 511,296.				
f Total of lines 3a through e	3,360,487.			
4 Qualifying distributions for 2022 from Part XI, line 4: \$ 1,538,303.				
a Applied to 2021, but not more than line 2a ...			0.	
b Applied to undistributed income of prior years (Election required - see instructions) ...		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2022 distributable amount				1,124,161.
e Remaining amount distributed out of corpus	414,142.			
5 Excess distributions carryover applied to 2022 (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:	3,774,629.			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount - see instructions		0.		
e Undistributed income for 2021. Subtract line 4a from line 2a. Taxable amount - see instr. ...			0.	
f Undistributed income for 2022. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2023				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 2017 not applied on line 5 or line 7	136,639.			
9 Excess distributions carryover to 2023. Subtract lines 7 and 8 from line 6a	3,637,990.			
10 Analysis of line 9:				
a Excess from 2018 ... 1,014,281.				
b Excess from 2019 ... 983,673.				
c Excess from 2020 ... 714,598.				
d Excess from 2021 ... 511,296.				
e Excess from 2022 ... 414,142.				

Part XIII Private Operating Foundations (see instructions and Part VI-A, question 9)

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2022, enter the date of the ruling

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed

Tax year (a) 2022	Prior 3 years			(e) Total
	(b) 2021	(c) 2020	(d) 2019	
b 85% (0.85) of line 2a				
c Qualifying distributions from Part XI, line 4, for each year listed				
d Amounts included in line 2c not used directly for active conduct of exempt activities				
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c				
3 Complete 3a, b, or c for the alternative test relied upon:				
a "Assets" alternative test - enter:				
(1) Value of all assets				
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)				
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part IX, 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				

Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

JO ANN EDER

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc., to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or email address of the person to whom applications should be addressed:

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

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

Part XIV Supplementary Information (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
AMERICAN BIBLE SOCIETY 101 NORTH INDEPENDENCE MALL EAST PHILADELPHIA, PA 19106	NONE		PHILANTHROPIC PURPOSE	6,300.
ASBURY UNIVERSITY 1 MACKLEM DRIVE WILMORE, KY 40390	NONE		PHILANTHROPIC PURPOSE	62,600.
BEARTOOTH HUMANE ALLIANCE PO BOX 2333 RED LODGE, MT 59068	NONE		PHILANTHROPIC PURPOSE	5,000.
BEARTOOTH RECREATIONAL TRAILS ASSOCIATION PO BOX 1872 RED LODGE, MT 59068	NONE		PHILANTHROPIC PURPOSE	5,000.
BIG SKY YOUTH EMPOWERMENT 225 E MENDENHALL ST BOZEMAN, MT 59715	NONE		PHILANTHROPIC PURPOSE	10,000.
Total SEE CONTINUATION SHEET(S)			3a	1,400,274.
b Approved for future payment				
NONE				
Total			3b	0.

Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

		Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)(3) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		
a	Transfers from the reporting foundation to a noncharitable exempt organization of:		
	(1) Cash	1a(1)	X
	(2) Other assets	1a(2)	X
b	Other transactions:		
	(1) Sales of assets to a noncharitable exempt organization	1b(1)	X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)	X
	(3) Rental of facilities, equipment, or other assets	1b(3)	X
	(4) Reimbursement arrangements	1b(4)	X
	(5) Loans or loan guarantees	1b(5)	X
	(6) Performance of services or membership or fundraising solicitations	1b(6)	X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c	X
d	If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.		

[illegible]

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No

b If "Yes," complete the following schedule.		
(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		May the IRS discuss this return with the preparer shown below? See instr. ☒ Yes ☐ No
	Signature of officer or trustee	PRESIDENT Date Title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
	KENDRA MORAN	KENDRA MORAN	11/13/23		P00814196
	Firm's name KCOE ISOM, LLP				Firm's EIN 48-0567703
	Firm's address 402 N BROADWAY, 4TH FLOOR BILLINGS, MT 59101				Phone no. 406-245-5136

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
BOY SCOUTS OF AMERICA - BLACK SWAMP AREA COUNCIL 2100 BROAD AVE. FINDLAY, OH 45856	NONE		PHILANTHROPIC PURPOSE	6,300.
BOYS & GIRLS CLUB OF CARBON COUNTY 24 9TH STREET, WEST PO BOX 11 RED LODGE, MT 59068	NONE		PHILANTHROPIC PURPOSE	35,000.
BOYS & GIRLS CLUB OF THE NORTHERN CHEYENNE NATION PO BOX 309 LAME DEER, MT 59043	NONE		PHILANTHROPIC PURPOSE	65,000.
BOYS AND GIRLS CLUB OF LODGE GRASS PO BOX 454 LODGE GRASS, MT 59050	NONE		PHILANTHROPIC PURPOSE	10,000.
CODE GIRLS UNITED PO BOX 8272 KALISPELL, MT 59904	NONE		PHILANTHROPIC PURPOSE	10,000.
COMMUNITY LEADERSHIP DEVELOPMENT INC. 24 SOUTH 29TH STREET BILLINGS, MT 59101	NONE		PHILANTHROPIC PURPOSE	5,000.
DSVS PO BOX 314 RED LODGE, MT 59068	NONE		PHILANTHROPIC PURPOSE	35,000.
FLORENCE CRITTENTON HOME & SERVICES 901 N HARRIS ST HELENA, MT 59601	NONE		PHILANTHROPIC PURPOSE	30,000.
FRIENDSHIP HOUSE 3123 8TH AVE. SOUTH BILLINGS, MT 59101	NONE		PHILANTHROPIC PURPOSE	30,000.
HAVEN 132 POND ROW BOZEMAN, MT 59718	NONE		PHILANTHROPIC PURPOSE	3,500.
Total from continuation sheets				1,311,374.

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
HOME RESOURCE 1515 WYOMING STREET MISSOULA, MT 59801	NONE		PHILANTHROPIC PURPOSE	7,900.
HOPA MOUNTAIN 234 E. BABCOCK, SUITE E BOZEMAN, MT 59715	NONE		PHILANTHROPIC PURPOSE	60,000.
LEIPSIC LOCAL SCHOOL DISTRICT 232 OAK ST. LEIPSIC, OH 45856	NONE		PHILANTHROPIC PURPOSE	31,300.
LEIPSIC UNITED METHODIST CHURCH 127 WEST MAIN ST. LEIPSIC, OH 45856	NONE		PHILANTHROPIC PURPOSE	93,900.
LET'S GROW KIDS 19 MARBLE AVENUE, SUITE 4 BURLINGTON, VT 05401	NONE		PHILANTHROPIC PURPOSE	30,000.
LIFE ENRICHING COMMUNITIES FOUNDATION 9840 MONTGOMERY ROAD CINCINNATI, OH 45242	NONE		PHILANTHROPIC PURPOSE	62,600.
LITTLE EXPLORERS PRESCHOOL PO BOX 1753 RED LODGE, MT 59068	NONE		PHILANTHROPIC PURPOSE	3,600.
LOWELL OBSERVATORY 1400 W MARS HILL RD FLAGSTAFF, AZ 86001	NONE		PHILANTHROPIC PURPOSE	20,000.
MEALS ON WHEELS OF SW OH & N KY FORMERLY WESLEY COMMUNITY SERVICES 2091 RADCLIFF DRIVE CINCINNATI, OH 45204	NONE		PHILANTHROPIC PURPOSE	62,600.
MINDFUL PHILANTHROPY 120 S 21ST STREET #503 PHILADELPHIA, PA 19103	NONE		PHILANTHROPIC PURPOSE	10,000.
Total from continuation sheets				

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
MONTANA AFTER SCHOOL ALLIANCE 4055 VALLEY COMMONS DRIVE UNIT G BOZEMAN, MT 59718	NONE		PHILANTHROPIC PURPOSE	5,000.
MONTANA ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN PO BOX 601 KALISPELL, MT 59903	NONE		PHILANTHROPIC PURPOSE	20,000.
MONTANA AUDUBON PO BOX 595 HELENA, MT 59624	NONE		PHILANTHROPIC PURPOSE	2,500.
MONTANA CHILD CARE RESOURCE AND REFERRAL NETWORK P.O. BOX 808 LOLO, MT 59847	NONE		PHILANTHROPIC PURPOSE	27,500.
MONTANA NONPROFIT ASSOCIATION P.O. BOX 1744 HELENA, MT 59624	NONE		PHILANTHROPIC PURPOSE	18,000.
MONTANA PEDIATRICS 310 SUNNYVIEW LANE KALISPELL, MT 59901	NONE		PHILANTHROPIC PURPOSE	15,000.
MONTANA RENEWABLE ENERGY ASSOCIATION PO BOX 673 MISSOULA, MT 59806	NONE		PHILANTHROPIC PURPOSE	5,000.
MOUNTAIN HOME MONTANA 2606 SOUTH AVE. WEST MISSOULA, MT 59804	NONE		PHILANTHROPIC PURPOSE	20,000.
MUSIC PRESERVES FOUNDATION 24071 TIBURON DANA POINT, CA 92629	NONE		PHILANTHROPIC PURPOSE	5,000.
P.E.C.E.S. PO BOX 647 PUNTA SANTIAGO, PR 00741	NONE		PHILANTHROPIC PURPOSE	50,000.
Total from continuation sheets				

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
PACIFIC GARDEN MISSION 1458 S. CANAL ST CHICAGO, IL 60607	NONE		PHILANTHROPIC PURPOSE	6,300.
PEACEFUL GUARDIANS PROJECT 3588 MAIN STREET STONE RIDGE, NY 12484	NONE		PHILANTHROPIC PURPOSE	5,000.
RED LODGE AREA COMMUNITY FOUNDATION PO BOX 1871 RED LODGE, MT 59068	NONE		PHILANTHROPIC PURPOSE	88,000.
RED LODGE FIRE RESCUE FOUNDATION PO BOX 318 RED LODGE, MT 59068	NONE		PHILANTHROPIC PURPOSE	10,000.
RED LODGE PUBLIC SCHOOL FOUNDATION PO BOX 1144 RED LODGE, MT 59068	NONE		PHILANTHROPIC PURPOSE	500.
SCHOOL OF THE BEARTOOTH DBA MOUNTAIN BLUEBELLS PRESCHOOL 501 NORTH COOPER AVE RED LODGE, MT 59068	NONE		PHILANTHROPIC PURPOSE	36,195.
SEVENTH GENERATION FUND PO BOX 4569 ARCATA, CA 95518	NONE		PHILANTHROPIC PURPOSE	22,279.
SILVER RUN SKI EDUCATION FOUNDATION 305 SKI RUN ROAD RED LODGE, MT 59068	NONE		PHILANTHROPIC PURPOSE	5,000.
ST. LABRE INDIAN SCHOOL 112 ST. LABRE CAMPUS DRIVE ASHLAND, MT 59003	NONE		PHILANTHROPIC PURPOSE	20,000.
STARR COMMONWEALTH SCHOOL 13725 STARR COMMONWEALTH ROAD ALBION, MI 49224	NONE		PHILANTHROPIC PURPOSE	31,300.
Total from continuation sheets				

Part XIV Supplementary Information**3 Grants and Contributions Paid During the Year (Continuation)**

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
THE LINEAGE PROJECT 228 PARK AVE. SOUTH, PMB 98592 NEW YORK, NY 10003	NONE		PHILANTHROPIC PURPOSE	10,000.
THE PINEY WOODS SCHOOL 5096 HIGHWAY 49 SOUTH, BOX 99 PINEY WOODS, MS 39148	NONE		PHILANTHROPIC PURPOSE	31,300.
THE SALVATION ARMY 114 EAST CENTRAL PARKWAY CINCINNATI, OH 45202	NONE		PHILANTHROPIC PURPOSE	31,300.
THE UNITED METHODIST CHURCH, WEST OHIO CONFERENCE 32 WESLEY BLVD. WORTHINGTON, OH 43085	NONE		PHILANTHROPIC PURPOSE	62,600.
TRILOGY FOUNDATION 303 N. HURSTBOURNE PKWY SUITE 200 LOUISVILLE, KY 40222	NONE		PHILANTHROPIC PURPOSE	6,300.
TRUST MONTANA PO BOX 8791 MISSOULA, MT 59807	NONE		PHILANTHROPIC PURPOSE	20,000.
UNIVERSITY OF MONTANA 32 CAMPUS DRIVE MISSOULA, MT 59812	NONE		PHILANTHROPIC PURPOSE	10,000.
VAMOS!, INC. BOX 212 WESTON, VT 05161	NONE		PHILANTHROPIC PURPOSE	25,000.
VERMONT COMMUNITY LOAN FUND PO BOX 827 / 15 STATE STREET MONTPELIER, VT 05601	NONE		PHILANTHROPIC PURPOSE	30,000.
VILLAGE OF LEIPSIC TOWN HALL, 142 E. MAIN ST. LEIPSIC, OH 45856	NONE		PHILANTHROPIC PURPOSE	6,300.
Total from continuation sheets				

3 Grants and Contributions Paid During the Year (Continuation)

223631
04-01-22

Schedule B
(Form 990)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**Attach to Form 990 or Form 990-PF.
Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2022

Name of the organization

OP & WE EDWARDS FOUNDATION INC

Employer identification number

13-6100965

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
- ☐ 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), 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 totaling \$5,000 or more during the year \$

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

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

Schedule B (Form 990) (2022)

Name of organization	Employer identification number
OP & WE EDWARDS FOUNDATION INC	13-6100965

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JO ANN EDER PO BOX 2445 RED LODGE, MT 59068	\$ 480,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Employer identification number

13-6100965

Part II

(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

	_____	\$ _____	_____

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received

	_____	\$ _____	_____

Name of organization	Employer identification number
OP & WE EDWARDS FOUNDATION INC	13-6100965

Part III Exclusively religious, charitable, etc., contributions to organizations described 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 the year. (Enter this info. once.) \$ _____
Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
BANK OF RED LODGE	242.	242.	
FIRST INTERSTATE BANK	3,985.	3,985.	
INCOME FROM CL&F RESOURCES L.P. ID#76-0690190	9,857.	9,857.	
TOTAL TO PART I, LINE 3	14,084.	14,084.	

FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
DOMINI	9,374.	8,878.	496.	496.	
INCOME FROM CL&F RESOURCES L.P. ID#76-0690190	160,790.	0.	160,790.	160,790.	
TO PART I, LINE 4	170,164.	8,878.	161,286.	161,286.	

FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
INCOME FROM CL&F RESOURCES L.P. ID#76-0690190	331,920.	331,920.	
INTEREST INCOME FROM COMMUNITY INVESTMENT NOTES	3,622.	3,622.	
INTEREST INCOME FROM LOANS RECEIVABLE FROM EXEMPT COMMUNITY ORGANIZATIONS	1,644.	1,644.	
OTHER INCOME	100.	100.	
INCOME FROM CL&F RESOURCES L.P. ID#76-0690190	5,146,120.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	5,483,406.	337,286.	

FORM 990-PF

ACCOUNTING FEES

STATEMENT 4

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	15,366.	7,683.		7,683.
TO FORM 990-PF, PG 1, LN 16B	15,366.	7,683.		7,683.

FORM 990-PF

TAXES

STATEMENT 5

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL EXCISE TAX	13,286.	0.		0.
PAYROLL TAXES	21,291.	10,646.		10,645.
TO FORM 990-PF, PG 1, LN 18	34,577.	10,646.		10,645.

FORM 990-PF

OTHER EXPENSES

STATEMENT 6

DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
DUES & SUBSCRIPTIONS	21,081.	10,541.		10,540.
BANK & CREDIT CARD CHARGES	856.	428.		428.
OFFICE & POSTAGE	3,769.	1,885.		1,884.
SEC 1231 LOSS - CL&F				
RESOURCES LP EIN 76-0690190	-460,664.	-460,664.		0.
MISCELLANEOUS	96.	48.		48.
TO FORM 990-PF, PG 1, LN 23	-434,862.	-447,762.		12,900.

FORM 990-PF	CORPORATE STOCK	STATEMENT 7
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
DOMINI IMPACT EQUITY FUND	484,645.	517,023.
CONTINENTAL LAND & FUR CO INC	2,462,247.	401,401.
TOTAL TO FORM 990-PF, PART II, LINE 10B	2,946,892.	918,424.

FORM 990-PF		OTHER INVESTMENTS		STATEMENT 8
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	
CL&F RESOURCES LP	FMV	16,507,538.	19,099,852.	
TOTAL TO FORM 990-PF, PART II, LINE 13		16,507,538.	19,099,852.	

FORM 990-PF	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT		STATEMENT 9
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
FURNITURE - JO ANN'S DESK	2,552.	2,552.	0.
COMPUTER - JO ANN'S TOWER	4,098.	4,098.	0.
PRINTER/SCANNER/FAX HP LASER	670.	670.	0.
COMPUTERS - 2 MACBOOK PRO	7,709.	7,709.	0.
MAC MINI & ACCESSORIES	2,084.	2,084.	0.
MAC BOOK PRO	3,149.	3,149.	0.
2 FILE CABINETS	906.	906.	0.
SCANNER	258.	258.	0.
SOFTWARE	7,000.	7,000.	0.
MAC BOOK PRO	1,699.	1,218.	481.
TOTAL TO FM 990-PF, PART II, LN 14	30,125.	29,644.	481.

FORM 990-PF

OTHER ASSETS

STATEMENT 10

DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
LOANS RECEIVABLE FROM EXEMPT COMMUNITY ORGANIZATIONS	237,023.	237,023.	237,023.
COMMUNITY INVESTMENT NOTES	264,165.	303,577.	303,577.
TO FORM 990-PF, PART II, LINE 15	501,188.	540,600.	540,600.

FORM 990-PF

PART VII - LIST OF OFFICERS, DIRECTORS
TRUSTEES AND FOUNDATION MANAGERS

STATEMENT 11

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JO ANN EDER PO BOX 2445 RED LODGE, MT 59068	PRESIDENT 15.00	0.	0.	0.
GISELA GAMPER PO BOX 2445 RED LODGE, MT 59068	VICE PRESIDENT 1.00	0.	0.	0.
MARK D EDER PO BOX 2445 RED LODGE, MT 59068	TREASURER 1.00	0.	0.	0.
CHRISTOPHER E GAMPER PO BOX 2445 RED LODGE, MT 59068	DIRECTOR 1.00	0.	0.	0.
JESSICA DUNBAR PO BOX 2445 RED LODGE, MT 59068	DIRECTOR 1.00	0.	0.	0.
YOGEEETA GAMPER PO BOX 2445 RED LODGE, MT 59068	SECRETARY 1.00	0.	0.	0.
MAYA TILLO PO BOX 2445 RED LODGE, MT 59068	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VII		0.	0.	0.

2022 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	FURNITURE - JO ANN'S DESK	04/17/02	SL	7.00		16	2,552.				2,552.	2,552.		0.	2,552.
2	COMPUTER - JO ANN'S TOWER	03/28/05	SL	5.00		16	4,098.				4,098.	4,098.		0.	4,098.
3	PRINTER/SCANNER/FAX HP LASER	06/06/07	SL	5.00		16	670.				670.	670.		0.	670.
4	COMPUTERS - 2 MACBOOK PRO	10/14/08	SL	5.00		16	7,709.				7,709.	7,709.		0.	7,709.
5	MAC MINI & ACCESSORIES	09/01/11	SL	5.00		16	2,084.				2,084.	2,084.		0.	2,084.
6	MAC BOOK PRO	07/19/12	SL	5.00		16	3,149.				3,149.	3,149.		0.	3,149.
7	2 FILE CABINETS	09/21/12	SL	7.00		16	906.				906.	906.		0.	906.
8	SCANNER	06/19/13	SL	5.00		16	258.				258.	258.		0.	258.
9	SOFTWARE	06/08/18	SL	3.00		16	7,000.				7,000.	7,000.		0.	7,000.
10	MAC BOOK PRO	05/29/19	SL	5.00		16	1,699.				1,699.	878.		340.	1,218.
	* TOTAL 990-PF PG 1 DEPR						30,125.				30,125.	29,304.		340.	29,644.

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No. 1545-0047

2022Department of the Treasury
Internal Revenue Service

For calendar year 2022 or other tax year beginning _____, and ending _____

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Open to Public Inspection for
501(c)(3) Organizations Only

A ☐ Check box if address changed. B Exempt under section ☒ 501(c)(3)) ☐ 408(e) ☐ 220(e) ☐ 408A ☐ 530(a) ☐ 529(a) ☐ 529A	Print or Type	Name of organization (☐ Check box if name changed and see instructions.) OP & WE EDWARDS FOUNDATION INC Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 2445 City or town, state or province, country, and ZIP or foreign postal code RED LODGE, MT 59068-2445 C Book value of all assets at end of year 24,911,292.	D Employer identification number 13-6100965 E Group exemption number (see instructions) F ☐ Check box if an amended return.
G Check organization type ☒ 501(c) corporation ☐ 501(c) trust ☐ 401(a) trust ☐ Other trust ☐ State college/university H Check if filing only to ☐ Claim credit from Form 8941 ☐ Claim a refund shown on Form 2439 I Check if a 501(c)(3) organization filing a consolidated return with a 501(c)(2) titleholding corporation ☐ J Enter the number of attached Schedules A (Form 990-T) 1 K During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ☐ Yes ☒ No If "Yes," enter the name and identifying number of the parent corporation. L The books are in care of THE ORGANIZATION Telephone number 406-425-5243			

Part I Total Unrelated Business Taxable Income

1 Total of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	1	0.
2 Reserved	2	
3 Add lines 1 and 2	3	
4 Charitable contributions (see instructions for limitation rules)	4	0.
5 Total unrelated business taxable income before net operating losses. Subtract line 4 from line 3	5	
6 Deduction for net operating loss. See instructions	6	
7 Total of unrelated business taxable income before specific deduction and section 199A deduction. Subtract line 6 from line 5	7	
8 Specific deduction (generally \$1,000, but see instructions for exceptions)	8	1,000.
9 Trusts. Section 199A deduction. See instructions	9	
10 Total deductions. Add lines 8 and 9	10	1,000.
11 Unrelated business taxable income. Subtract line 10 from line 7. If line 10 is greater than line 7, enter zero	11	0.

Part II Tax Computation

1 Organizations taxable as corporations. Multiply Part I, line 11 by 21% (0.21)	1	0.
2 Trusts taxable at trust rates. See instructions for tax computation. Income tax on the amount on Part I, line 11 from: ☐ Tax rate schedule or ☐ Schedule D (Form 1041)	2	
3 Proxy tax. See instructions	3	
4 Other tax amounts. See instructions	4	
5 Alternative minimum tax (trusts only)	5	
6 Tax on noncompliant facility income. See instructions	6	
7 Total. Add lines 3 through 6 to line 1 or 2, whichever applies	7	0.

LHA For Paperwork Reduction Act Notice, see instructions.

Form 990-T (2022)

Part III Tax and Payments

1a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	1a		
b	Other credits (see instructions)	1b		
c	General business credit. Attach Form 3800 (see instructions)	1c		
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	1d		
e	Total credits. Add lines 1a through 1d	1e		
2	Subtract line 1e from Part II, line 7	2		0.
3	Other amounts due. Check if from: ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (attach statement)	3		
4	Total tax. Add lines 2 and 3 (see instructions). ☐ Check if includes tax previously deferred under section 1294. Enter tax amount here	4		0.
5	Current net 965 tax liability paid from Form 965-A, Part II, column (k)	5		0.
6a	Payments: A 2021 overpayment credited to 2022	6a		
b	2022 estimated tax payments. Check if section 643(g) election applies ☐	6b		
c	Tax deposited with Form 8868	6c		
d	Foreign organizations: Tax paid or withheld at source (see instructions)	6d		
e	Backup withholding (see instructions)	6e		
f	Credit for small employer health insurance premiums (attach Form 8941)	6f		
g	Other credits, adjustments, and payments: ☐ Form 2439 ☐ Form 4136 ☐ Other Total	6g		
7	Total payments. Add lines 6a through 6g	7		
8	Estimated tax penalty (see instructions). Check if Form 2220 is attached ☐	8		
9	Tax due. If line 7 is smaller than the total of lines 4, 5, and 8, enter amount owed	9		
10	Overpayment. If line 7 is larger than the total of lines 4, 5, and 8, enter amount overpaid	10		
11	Enter the amount of line 10 you want: Credited to 2023 estimated tax Refunded	11		

Part IV Statements Regarding Certain Activities and Other Information (see instructions)

1	At any time during the 2022 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country here	Yes	No
			X
2	During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If "Yes," see instructions for other forms the organization may have to file.		X
3	Enter the amount of tax-exempt interest received or accrued during the tax year \$		
4	Enter available pre-2018 NOL carryovers here \$ Do not include any post-2017 NOL carryover shown on Schedule A (Form 990-T). Don't reduce the NOL carryover shown here by any deduction reported on Part I, line 6.		
5	Post-2017 NOL carryovers. Enter the Business Activity Code and available post-2017 NOL carryovers. Don't reduce the amounts shown below by any NOL claimed on any Schedule A, Part II, line 17 for the tax year. See instructions.		
	Business Activity Code	Available post-2017 NOL carryover	
		\$	
		\$	
6a	Did the organization change its method of accounting? (see instructions)		X
b	If 6a is "Yes," has the organization described the change on Form 990, 990-EZ, 990-PF, or Form 1128? If "No," explain in Part V		

Part V Supplemental Information

Provide the explanation required by Part IV, line 6b. Also, provide any other additional information. See instructions.

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer	Date	Title	
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed
	KENDRA MORAN	KENDRA MORAN	11/13/23	
	Firm's name	Firm's EIN		PTIN
	KCOE ISOM, LLP	48-0567703		P00814196
	Firm's address	Phone no.		
	402 N BROADWAY, 4TH FLOOR BILLINGS, MT 59101	406-245-5136		

May the IRS discuss this return with the preparer shown below (see instructions)?	☒ Yes	☐ No
---	---	-----------------------------

**SCHEDULE A
(Form 990-T)**

Department of the Treasury
Internal Revenue Service

**Unrelated Business Taxable Income
From an Unrelated Trade or Business**

Go to www.irs.gov/Form990T for instructions and the latest information.

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

OMB No. 1545-0047

2022

Open to Public Inspection for
501(c)(3) Organizations Only

A Name of the organization OP & WE EDWARDS FOUNDATION INC	B Employer identification number 13-6100965
C Unrelated business activity code (see instructions) 211100	D Sequence: 1 of 1

E Describe the unrelated trade or business **OIL & GAS PRODUCTION**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a Gross receipts or sales				
b Less returns and allowances	c Balance	1c		
2 Cost of goods sold (Part III, line 8)		2		
3 Gross profit. Subtract line 2 from line 1c		3		
4 a Capital gain net income (attach Schedule D (Form 1041 or Form 1120)). See instructions		4a		
b Net gain (loss) (Form 4797) (attach Form 4797). See instructions		4b		
c Capital loss deduction for trusts		4c		
5 Income (loss) from a partnership or an S corporation (attach statement) STATEMENT 12		5 5,146,120.		5,146,120.
6 Rent income (Part IV)		6		
7 Unrelated debt-financed income (Part V)		7		
8 Interest, annuities, royalties, and rents from a controlled organization (Part VI)		8		
9 Investment income of section 501(c)(7), (9), or (17) organizations (Part VII)		9		
10 Exploited exempt activity income (Part VIII)		10		
11 Advertising income (Part IX)		11		
12 Other income (see instructions; attach statement) STMT 13		12 4,029,352.		4,029,352.
13 Total. Combine lines 3 through 12		13 9,175,472.		9,175,472.

Part II **Deductions Not Taken Elsewhere** See instructions for limitations on deductions. Deductions must be directly connected with the unrelated business income

1 Compensation of officers, directors, and trustees (Part X)	1	
2 Salaries and wages	2	
3 Repairs and maintenance	3	
4 Bad debts	4	
5 Interest (attach statement). See instructions	5	
6 Taxes and licenses	6	
7 Depreciation (attach Form 4562). See instructions	7	
8 Less depreciation claimed in Part III and elsewhere on return	8a	
9 Depletion	9	353,026.
10 Contributions to deferred compensation plans	10	
11 Employee benefit programs	11	
12 Excess exempt expenses (Part VIII)	12	
13 Excess readership costs (Part IX)	13	
14 Other deductions (attach statement) SEE STATEMENT 14	14	8,822,446.
15 Total deductions. Add lines 1 through 14	15	9,175,472.
16 Unrelated business income before net operating loss deduction. Subtract line 15 from Part I, line 13, column (C)	16	0.
17 Deduction for net operating loss. See instructions	17	0.
18 Unrelated business taxable income. Subtract line 17 from line 16	18	

LHA For Paperwork Reduction Act Notice, see instructions.

Schedule A (Form 990-T) 2022

Part III Cost of Goods Sold

Enter method of inventory valuation

1	Inventory at beginning of year	1	
2	Purchases	2	
3	Cost of labor	3	
4	Additional section 263A costs (attach statement)	4	
5	Other costs (attach statement)	5	
6	Total. Add lines 1 through 5	6	
7	Inventory at end of year	7	
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and in Part I, line 2	8	
9	Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		☐ Yes ☐ No

Part IV Rent Income (From Real Property and Personal Property Leased with Real Property)

1	Description of property (property street address, city, state, ZIP code). Check if a dual-use. See instructions.				
A	☐				
B	☐				
C	☐				
D	☐				
2	Rent received or accrued	A	B	C	D
a	From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)				
b	From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)				
c	Total rents received or accrued by property. Add lines 2a and 2b, columns A through D				
3	Total rents received or accrued. Add line 2c columns A through D. Enter here and on Part I, line 6, column (A)	0.			
4	Deductions directly connected with the income in lines 2(a) and 2(b) (attach statement)				
5	Total deductions. Add line 4 columns A through D. Enter here and on Part I, line 6, column (B)	0.			

Part V Unrelated Debt-Financed Income (see instructions)

1	Description of debt-financed property (street address, city, state, ZIP code). Check if a dual-use. See instructions.				
A	☐				
B	☐				
C	☐				
D	☐				
2	Gross income from or allocable to debt-financed property	A	B	C	D
3	Deductions directly connected with or allocable to debt-financed property				
a	Straight line depreciation (attach statement)				
b	Other deductions (attach statement)				
c	Total deductions (add lines 3a and 3b, columns A through D)				
4	Amount of average acquisition debt on or allocable to debt-financed property (attach statement)				
5	Average adjusted basis of or allocable to debt-financed property (attach statement)				
6	Divide line 4 by line 5	%	%	%	%
7	Gross income reportable. Multiply line 2 by line 6				
8	Total gross income (add line 7, columns A through D). Enter here and on Part I, line 7, column (A)	0.			
9	Allocable deductions. Multiply line 3c by line 6				
10	Total allocable deductions. Add line 9, columns A through D. Enter here and on Part I, line 7, column (B)	0.			
11	Total dividends-received deductions included in line 10	0.			

Part VI Interest, Annuities, Royalties, and Rents from Controlled Organizations (see instructions)

1. Name of controlled organization		2. Employer identification number	Exempt Controlled Organizations			6. Deductions directly connected with income in column 5
			3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	
(1)						
(2)						
(3)						
(4)						
Nonexempt Controlled Organizations						
7. Taxable Income		8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10	
(1)						
(2)						
(3)						
(4)						
				Add columns 5 and 10. Enter here and on Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on Part I, line 8, column (B)	
Totals				0.	0.	

Part VII Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach statement)	4. Set-asides (attach statement)	5. Total deductions and set-asides (add cols 3 and 4)
(1)				
(2)				
(3)				
(4)				
	Add amounts in column 2. Enter here and on Part I, line 9, column (A)			Add amounts in column 5. Enter here and on Part I, line 9, column (B)
Totals	0.			0.

Part VIII Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1	Description of exploited activity:		
2	Gross unrelated business income from trade or business. Enter here and on Part I, line 10, column (A)	2	
3	Expenses directly connected with production of unrelated business income. Enter here and on Part I, line 10, column (B)	3	
4	Net income (loss) from unrelated trade or business. Subtract line 3 from line 2. If a gain, complete lines 5 through 7	4	
5	Gross income from activity that is not unrelated business income	5	
6	Expenses attributable to income entered on line 5	6	
7	Excess exempt expenses. Subtract line 5 from line 6, but do not enter more than the amount on line 4. Enter here and on Part II, line 12	7	

Schedule A (Form 990-T) 2022

1 Name(s) of periodical(s). Check box if reporting two or more periodicals on a consolidated basis.

A	
B	
C	
D	

Enter amounts for each periodical listed above in the corresponding column.

	A	B	C	D
2 Gross advertising income				
Add columns A through D. Enter here and on Part I, line 11, column (A)				0.

a

3 Direct advertising costs by periodical					
a Add columns A through D. Enter here and on Part I, line 11, column (B)		0.			

4 Advertising gain (loss). Subtract line 3 from line 2. For any column in line 4 showing a gain, complete lines 5 through 8. For any column in line 4 showing a loss or zero, do not complete lines 5 through 7, and enter zero on line 8.

5	Readership costs				
6	Circulation income				
7	Excess readership costs. If line 6 is less than line 5, subtract line 6 from line 5. If line 5 is less than line 6, enter zero				
8	Excess readership costs allowed as a deduction. For each column showing a gain on line 4, enter the lesser of line 4 or line 7				

a Add line 8, columns A through D. Enter the greater of the line 8a, columns total or zero here and on
Part II, line 13 0.

Part X	Compensation of Officers, Directors, and Trustees (see instructions)
---------------	---

1. Name	2. Title	3. Percentage of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	

Total. Enter here and on Part II, line 1 0.

Part XI	Supplemental Information (see instructions)
----------------	--

FORM 990-T (A)	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT 12
----------------	---------------------------------	--------------

DESCRIPTION	NET INCOME OR (LOSS)
CL&F RESOURCES LP - ORDINARY BUSINESS INCOME (LOSS)	5,146,120.
TOTAL INCLUDED ON SCHEDULE A, PART I, LINE 5	5,146,120.

FORM 990-T (A)	OTHER INCOME	STATEMENT 13
----------------	--------------	--------------

DESCRIPTION	AMOUNT
PASSIVE LOSS CARRYFORWARD TO 2022	4,029,352.
TOTAL TO SCHEDULE A, PART I, LINE 12	4,029,352.

FORM 990-T (A)	OTHER DEDUCTIONS	STATEMENT 14
----------------	------------------	--------------

DESCRIPTION	AMOUNT
2021 PASSIVE LOSS CARRYFORWARD	8,822,446.
TOTAL TO SCHEDULE A, PART II, LINE 14	8,822,446.

2022 DEPRECIATION AND AMORTIZATION REPORT

- CURRENT YEAR FEDERAL - OP & WE EDWARDS FOUNDATION INC

Asset No.	Description	Date Acquired			Method	Life	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Reduction In Basis	Basis For Depreciation	Accumulated Depreciation	Current Sec 179	Current Year Deduction
1	FURNITURE - JO ANN'S DESK	04	17	02	SL	7.00	16	2,552.			2,552.	2,552.		0.
2	COMPUTER - JO ANN'S TOWER	03	28	05	SL	5.00	16	4,098.			4,098.	4,098.		0.
3	PRINTER/SCANNER/FAX HP LASER	06	06	07	SL	5.00	16	670.			670.	670.		0.
4	COMPUTERS - 2 MACBOOK PRO	10	14	08	SL	5.00	16	7,709.			7,709.	7,709.		0.
5	MAC MINI & ACCESSORIES	09	01	11	SL	5.00	16	2,084.			2,084.	2,084.		0.
6	MAC BOOK PRO	07	19	12	SL	5.00	16	3,149.			3,149.	3,149.		0.
7	2 FILE CABINETS	09	21	12	SL	7.00	16	906.			906.	906.		0.
8	SCANNER	06	19	13	SL	5.00	16	258.			258.	258.		0.
9	SOFTWARE	06	08	18	SL	3.00	16	7,000.			7,000.	7,000.		0.
10	MAC BOOK PRO	05	29	19	SL	5.00	16	1,699.			1,699.	878.		340.
	* TOTAL 990-PF PG 1 DEPR							30,125.		0.	30,125.	29,304.		340.

OP & WE EDWARDS FOUNDATION INC

* ITC, Section 179, Salvage, HR 3090, Commercial Revitalization Deduction, GO Zone