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## Form **990-PF**

Department of the Treasury Internal Revenue Service

## **Return of Private Foundation**

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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2008

Use the IRS label. Otherwise, print or type. See Specific instructions.  Check all that apply Initial return Final return Amended return Address change Name of Soundation Address change Name of Soundation Southwest Montana Agriculture & Resource 81-0603334  Remployer identification number 91-0603334  Remployer identification num	<b>▶</b> □
SOUTHWEST MONTANA AGRICULTURE & RESOURCE  Otherwise, print or type. See Specific instructions.  City or town, state, and ZIP code  SOUTHWEST MONTANA AGRICULTURE & RESOURCE  81-0603334  Room/suite 8 Telephone number 402-525-0489  City or town, state, and ZIP code	<b>▶</b> □
Otherwise, print print or type. See Specific Instructions.  PRADITIONS FOUNDATION  RADITIONS FOUNDATION  81-0603334  Room/suite  8 Telephone number  402-525-0489  City or town, state, and ZIP code  City or town, state, and ZIP code  City contains a polication is pending, check here	<b>▶</b> □
print or type. See Specific Instructions.  Number and street (or P O box number if mail is not delivered to street address)  PROOM/Suite  B Telephone number 402-525-0489  City or town, state, and ZIP code	<b>▶</b> □
or type. See Specific Instructions.  On type 201 COTTONWILLOW ROAD, PO BOX 126  City or town, state, and ZIP code	<b>▶</b> □
See Specific City or town, state, and ZIP code  C If exemption application is pending, check here	▶
	)d
MELROSE, MT 59743 D 1. Foreign organizations, check here	
H Check type of organization  X Section 501(c)(3) exempt private foundation  2. Foreign organizations meeting the 85% test, check here and attach computation	od ▶ ☐
Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation E if private foundation status was terminate	
I Fair market value of all assets at end of year J Accounting method X Cash Accrual under section 507(b)(1)(A), check here	
(from Part II, col. (c), line 16)  Other (specify)   F if the foundation is in a 60-month termin	ation
▶\$ Under section 507(b)(1)(B), check here	
Part 1 Analysis of Revenue and Expenses (The total of amounts in column (a))  (a) Revenue and expenses per books (b) Net investment income (c) Adjusted net for charitable per books (cash basis	urposes
1 Contributions, gifts, grants, etc., received 0.	
2 Check ► X if the foundation is not required to attach Sch B	***************************************
3 Interest on savings and temporary cash investments	
4 Dividends and interest from securities	
5a Gross rents	*******
D Net rental income or (loss)	
62 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2)	······
7 Capital gain net income (from Part IV, line 2)	***************************************
8 Net short-term capital gain	
9 Income modifications	<del></del>
10a Gross sales less returns and allowances	<del></del>
D Less Cost of goods sold	<del></del>
c Gross profit or (loss)	
11 Other income	
12 Total. Add lines 1 through 11 0. 0.	***************************************
13 Compensation of officers, directors, trustees, etc 0. 0.	0.
14 Other employee salaries and wages	
15 Pension plans, employee benefits	
% 16a Legal fees	
b Accounting fees c Other professional fees	
17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy RECEIVED 21 Travel, conferences and meetings	
3 E 18 Taxes	
19 Depreciation and depletion	
E 20 Occupancy RECEIVED	
22 Printing and publications 23 Other expenses JAN 0 8 2010	<del></del>
23 Other expenses JAN 0 8 2010 9	
24 Total operating and administrative	_
23 Other expenses JAN 0 8 ZUIU 9 24 Total operating and administrative expenses. Add lines 18 through 22 0. 0. 0. 25 Contributions gifts, grants page 7.	0.
26 Total expenses and disbursements.	
Add lines 24 and 25 0 . 0 .	0.
27 Subtract line 26 from line 12.	
2 Excess of revenue over expenses and disbursements	
b Net Investment income (if negative, enter -0-)	
C Adjusted net income (if negative, enter -0-)	

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

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Form 990-PF (2008)

TRADITIONS FOUNDATION

81-0603334

F		Balance Sheets Attached schedules and amounts in the description	Beginning of year	End	of year
	art	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing			
	!	Savings and temporary cash investments			
		Accounts receivable			
	•	Less allowance for doubtful accounts ▶	1		
	4	Pledges receivable			
	'	Less allowance for doubtful accounts	1		
	5	Grants receivable			
	1 -	Receivables due from officers, directors, trustees, and other			
	"	disqualified persons			
				······································	
	<b>′</b>	Other notes and loans receivable	-{		
	١.	Less allowance for doubtful accounts			<del> </del>
Assets	I -	Inventories for sale or use			
<b>SS</b>	1	Prepaid expenses and deferred charges			
•	1	Investments - U.S. and state government obligations		·	
	ĺ	Investments - corporate stock			<del>_</del>
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis	1		
		Less: accumulated depreciation			
ĺ	12	Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis ►	1		
		Less accumulated depreciation			
	15	Other assets (describe			
	16	Total assets (to be completed by all filers)	0.	0	0.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
S.	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
ā	21	Mortgages and other notes payable			
		Other liabilities (describe >)			
	23	Total liabilities (add lines 17 through 22)	0.	0	•
_		Foundations that follow SFAS 117, check here			7
		and complete lines 24 through 26 and lines 30 and 31.			
Š	24	Unrestricted			
E S	25	Temporarily restricted			╡
Net Assets or Fund Balances		Permanently restricted			<b>-</b> [
ਰੂ	20	Foundations that do not follow SFAS 117, check here			<b>-</b>
Ē		and complete lines 27 through 31.	1		
ō	27	•	0.	0	
ets		Capital stock, trust principal, or current funds	0.	0	
SS	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0	<b></b>
t a	29	Retained earnings, accumulated income, endowment, or other funds	0.	0	<del></del>
ž	30	Total net assets or fund balances	- 0.		<b>-</b>
		<b>-</b>		^	
	31	Total liabilities and net assets/fund balances	0.	0	•
P	art	Analysis of Changes in Net Assets or Fund I	Balances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), lin	e 30		
		st agree with end-of-year figure reported on prior year's return)		_	·
		r amount from Part I, line 27a			0.
		r increases not included in line 2 (itemize)			0.
		lines 1, 2, and 3			40.
		eases not included in line 2 (itemize)		-	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II,	column (b), line 30		6 0.
_		2. 100 June 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		<del></del>	- 000 DE

81-0603334

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)					(c) How acquired P - Purchase D - Donation		(c) Dai	te acquired , day, yr )	(d) Date sold (mo., day, yr)	
<u> 1a</u>		· · · · · · · · · · · · · · · · · · ·		<del></del>	ļ					
b NC	NE				├-					
<u>C</u>					-					
<u>d</u>					-			· · · · · ·		<del> </del>
e (e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale					Gain or (loss lus (f) minus	
a										
b		· · · · · · · · · · · · · · · · · · ·								
C										
d		·							<u></u>	
<u>e</u>		<u></u>								
Complete only for assets show				-					(Col (h) gain	
(i) F.M.V as of 12/31/69		(I) Adjusted basis as of 12/31/69		ccess of col (i)				Losse	it not less that es (from col. (	(h))
<u>a</u>						····				<del> </del>
b	ļ <u>.</u>			<del> </del>						
<u>C</u>										
<u>d</u>	-			<del>_</del> .						
8	<u> </u>				╗					
Capital gain net income or (net c	apital loss	If gain, also enter If (loss), enter -0-			<b> </b>	2				
Net short-term capital gain or (lo										
if gain, also enter in Part I, line 8			u (0)		1					
If (loss), enter -0- in Part I, line 8		·	<u></u>	····		3				
<del></del>		Section 4940(e) for					ent in	come	<del></del>	<del> </del>
For optional use by domestic privat	e foundati	ons subject to the section 4	1940(a) tax on	net investment ir	come	∍.)				
section 4940(d)(2) applies, leave t	his part bl	ank								
Vas the foundation liable for the sec	stion 4042	tay on the distributable am	ount of any w	oar in the base no	nod?					Yes X N
'"Yes," the foundation does not qua			• -		iluur					103 (Z¥ 191
Enter the appropriate amount in					es					
(a)		(b)			(c)				Dioteil	(d) bution ratio
Base periód years Calendar year (or tax year beginn	ing in)	Adjusted qualifying dist	inbutions	Net value of no			ise asset	s		vided by col (c))
2007			0.					0.		.00000
2006										<u> </u>
2005										. <u>.</u>
2004										··
2003		·								
<b>-</b>										00000
Total of line 1, column (d)	<b>r</b>				4			2		.00000
Average distribution ratio for the the foundation has been in existe			on line 2 by 5,	or by the number	oi ye	ars		3		.00000
the foundation has been in existe	ilice il less	man 5 years						-		.00000
Enter the net value of noncharita	ble-use as:	sets for 2008 from Part X, I	ine 5					4		
Multiply line 4 by line 3								5		0
Enter 1% of net investment incor	ne (1% of	Part I, line 27b)						6		0
Add lines 5 and 6								7		0
Enter qualifying distributions from	m Part XII	line 4						8		0
If line 8 is equal to or greater tha See the Part VI instructions			1b, and comp	olete that part usir	ng a 1	% tax ra	ite.	<b>,</b>		

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?
 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.

 Ba Enter the states to which the foundation reports or with which it is registered (see instructions)

of each state as required by General Instruction G? If "No," attach explanation

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2008 or the taxable year beginning in 2008 (see instructions for Part XIV)? If "Yes," complete Part XIV

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

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)

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6

7

8b

9

10

N/A

X

X

Pa	rt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>X</u>
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008? .	12		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► NONE	- A	400	
14	The books are in care of ► SOUTHWEST MONTANA AGRICULTURAL & RE Telephone no ► 402-52	5-0	489	
	Located at ▶PO BOX 126, MELROSE, MT ZIP+4 ▶59	143		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	N	/A	ш
n.	and enter the amount of tax-exempt interest received or accrued during the year  ** VII-B   Statements Regarding Activities for Which Form 4720 May Be Required	ŤÁ	/ A	
			Yes	No
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		103	140
18	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?  Yes X No			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(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)?			
	(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.)			
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 page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
£	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 2008?	10		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))			
8	At the end of tax year 2008, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2008?			
	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	2b		•••••
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
٥.	Did the foundation held more than a 90/ direct or indirect interest in any hydrone enterprise at any time			
52	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?  Yes X No			
h	If "Yes," did it have excess business holdings in 2008 as a result of (1) any purchase by the foundation or disqualified persons after			
n	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 foundation had excess business holdings in 2008.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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 2008?	4b		X
_		m 990	DE /	2008)

, SOUTHWEST MONTANA AGRICU	ETURE & RESUU			
Form 990-PF (2008) TRADITIONS FOUNDATION			<u>81-06033</u>	34 Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to				
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio	n 4945(e))?	Ye	s X No	
(2) Influence the outcome of any specific public election (see section 4955), a	or to carry on, directly or indire			
any voter registration drive?		Ye	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	9	Ye	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or f			
the prevention of cruelty to children or animals?		Y6	s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described i	n Regulations		
section 53 4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b
Organizations relying on a current notice regarding disaster assistance check it	nere			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it maintai	ined		
expenditure responsibility for the grant?	N	I/A 🔲 Ye	s No	
If "Yes," attach the statement required by Regulations section 53.494	5-5(d). `			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal benefit contract?		Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b X
If you answered "Yes" to 6b, also file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax s	shelter transaction?	Y8	s X No	
b If yes, did the foundation receive any proceeds or have any net income attribut	able to the transaction?		N/A	7b
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	<b>'</b>	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deterred compensation	(e) Expense account, other allowances
	hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and defended compensation	(e) Expense account, other allowances
EMILIE M ELLINGSON, MS	hours per week devoted		(d) Contributions to employee benefit plans and deferred compensation	account, other
EMILIE M ELLINGSON, MS 6101 WOODSTOCK CIRCLE	hours per week devoted to position  PRESIDENT	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
EMILIE M ELLINGSON, MS 6101 WOODSTOCK CIRCLE LINCOLN, NE 68512	hours per week devoted to position	(If not paid, enter -0-)	compensation	account, other
EMILIE M ELLINGSON, MS 6101 WOODSTOCK CIRCLE	PRESIDENT	(If not paid, enter -0-)	compensation	account, other allowances
EMILIE M ELLINGSON, MS 6101 WOODSTOCK CIRCLE LINCOLN, NE 68512 BRUCE B JOHNSON, PHD	PRESIDENT	(If not paid, enter -0-)	compensation	account, other allowances
EMILIE M ELLINGSON, MS 6101 WOODSTOCK CIRCLE LINCOLN, NE 68512 BRUCE B JOHNSON, PHD 15050 GARDEN ROAD	hours per week devoted to position  PRESIDENT  10.00  VICE-PRESIDEN  10.00	(If not paid, enter -0-)  O  T	O .	account, other allowances
EMILIE M ELLINGSON, MS 6101 WOODSTOCK CIRCLE LINCOLN, NE 68512 BRUCE B JOHNSON, PHD 15050 GARDEN ROAD BENNET, NE 68317	PRESIDENT  10.00  VICE-PRESIDEN	(If not paid, enter -0-)  O  T	O .	account, other allowances
EMILIE M ELLINGSON, MS 6101 WOODSTOCK CIRCLE LINCOLN, NE 68512 BRUCE B JOHNSON, PHD 15050 GARDEN ROAD BENNET, NE 68317 HAL W ANDERSON, JD	hours per week devoted to position  PRESIDENT  10.00  VICE-PRESIDEN  10.00	(If not paid, enter -0-)  O  T	O .	account, other allowances
EMILIE M ELLINGSON, MS 6101 WOODSTOCK CIRCLE LINCOLN, NE 68512 BRUCE B JOHNSON, PHD 15050 GARDEN ROAD BENNET, NE 68317 HAL W ANDERSON, JD 5839 WOODSTOCK AVENUE	PRESIDENT  10.00 VICE-PRESIDEN  10.00 SECRETARY	(If not paid, enter -0-)  O •	0 •	account, other allowances  0.
EMILIE M ELLINGSON, MS 6101 WOODSTOCK CIRCLE LINCOLN, NE 68512 BRUCE B JOHNSON, PHD 15050 GARDEN ROAD BENNET, NE 68317 HAL W ANDERSON, JD 5839 WOODSTOCK AVENUE	PRESIDENT  10.00 VICE-PRESIDEN  10.00 SECRETARY	(If not paid, enter -0-)  O •	0 •	account, other allowances  0.
EMILIE M ELLINGSON, MS 6101 WOODSTOCK CIRCLE LINCOLN, NE 68512 BRUCE B JOHNSON, PHD 15050 GARDEN ROAD BENNET, NE 68317 HAL W ANDERSON, JD 5839 WOODSTOCK AVENUE	PRESIDENT  10.00 VICE-PRESIDEN  10.00 SECRETARY	(If not paid, enter -0-)  O •	0 •	account, other allowances  0.
EMILIE M ELLINGSON, MS 6101 WOODSTOCK CIRCLE LINCOLN, NE 68512 BRUCE B JOHNSON, PHD 15050 GARDEN ROAD BENNET, NE 68317 HAL W ANDERSON, JD 5839 WOODSTOCK AVENUE	PRESIDENT  10.00 VICE-PRESIDEN  10.00 SECRETARY	(If not paid, enter -0-)  O •  T  O •	0 • 0 •	account, other allowances  0.
EMILIE M ELLINGSON, MS 6101 WOODSTOCK CIRCLE LINCOLN, NE 68512 BRUCE B JOHNSON, PHD 15050 GARDEN ROAD BENNET, NE 68317 HAL W ANDERSON, JD 5839 WOODSTOCK AVENUE LINCOLN, NE 68512	hours per week devoted to position  PRESIDENT  10.00  VICE-PRESIDEN  10.00  SECRETARY  10.00	(If not paid, enter -0-)  O •  T  O •	O .  O .	O .  O .  (e) Expense account, other
EMILIE M ELLINGSON, MS 6101 WOODSTOCK CIRCLE LINCOLN, NE 68512 BRUCE B JOHNSON, PHD 15050 GARDEN ROAD BENNET, NE 68317 HAL W ANDERSON, JD 5839 WOODSTOCK AVENUE LINCOLN, NE 68512  2 Compensation of five highest-paid employees (other than those incomplete and address of each employee paid more than \$50,000	PRESIDENT  10.00 VICE-PRESIDEN  10.00 SECRETARY  10.00	(If not paid, enter -0-)  O .  T  O .  enter "NONE."	0 • 0 •	O .  O .  (e) Expense
EMILIE M ELLINGSON, MS 6101 WOODSTOCK CIRCLE LINCOLN, NE 68512 BRUCE B JOHNSON, PHD 15050 GARDEN ROAD BENNET, NE 68317 HAL W ANDERSON, JD 5839 WOODSTOCK AVENUE LINCOLN, NE 68512  2 Compensation of five highest-paid employees (other than those inc	hours per week devoted to position  PRESIDENT  10.00  VICE-PRESIDEN  10.00  SECRETARY  10.00	(If not paid, enter -0-)  O .  T  O .  enter "NONE."	O .  O .  (d) Contributions to employee benefit plans and deferred	O .  O .  (e) Expense account, other
EMILIE M ELLINGSON, MS 6101 WOODSTOCK CIRCLE LINCOLN, NE 68512 BRUCE B JOHNSON, PHD 15050 GARDEN ROAD BENNET, NE 68317 HAL W ANDERSON, JD 5839 WOODSTOCK AVENUE LINCOLN, NE 68512  2 Compensation of five highest-paid employees (other than those incomplete and address of each employee paid more than \$50,000	hours per week devoted to position  PRESIDENT  10.00  VICE-PRESIDEN  10.00  SECRETARY  10.00	(If not paid, enter -0-)  O .  T  O .  enter "NONE."	O .  O .  (d) Contributions to employee benefit plans and deferred	O .  O .  (e) Expense account, other
EMILIE M ELLINGSON, MS 6101 WOODSTOCK CIRCLE LINCOLN, NE 68512 BRUCE B JOHNSON, PHD 15050 GARDEN ROAD BENNET, NE 68317 HAL W ANDERSON, JD 5839 WOODSTOCK AVENUE LINCOLN, NE 68512  2 Compensation of five highest-paid employees (other than those incomplete and address of each employee paid more than \$50,000	hours per week devoted to position  PRESIDENT  10.00  VICE-PRESIDEN  10.00  SECRETARY  10.00	(If not paid, enter -0-)  O .  T  O .  enter "NONE."	O .  O .  (d) Contributions to employee benefit plans and deferred	O .  O .  (e) Expense account, other
EMILIE M ELLINGSON, MS 6101 WOODSTOCK CIRCLE LINCOLN, NE 68512 BRUCE B JOHNSON, PHD 15050 GARDEN ROAD BENNET, NE 68317 HAL W ANDERSON, JD 5839 WOODSTOCK AVENUE LINCOLN, NE 68512  2 Compensation of five highest-paid employees (other than those incomplete and address of each employee paid more than \$50,000	hours per week devoted to position  PRESIDENT  10.00  VICE-PRESIDEN  10.00  SECRETARY  10.00	(If not paid, enter -0-)  O .  T  O .  enter "NONE."	O .  O .  (d) Contributions to employee benefit plans and deferred	O .  O .  (e) Expense account, other
EMILIE M ELLINGSON, MS 6101 WOODSTOCK CIRCLE LINCOLN, NE 68512 BRUCE B JOHNSON, PHD 15050 GARDEN ROAD BENNET, NE 68317 HAL W ANDERSON, JD 5839 WOODSTOCK AVENUE LINCOLN, NE 68512  2 Compensation of five highest-paid employees (other than those incomplete and address of each employee paid more than \$50,000	hours per week devoted to position  PRESIDENT  10.00  VICE-PRESIDEN  10.00  SECRETARY  10.00	(If not paid, enter -0-)  O .  T  O .  enter "NONE."	O .  O .  (d) Contributions to employee benefit plans and deferred	O .  O .  (e) Expense account, other
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0

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

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Part VIII- Information About Officers, Directors, Trustees, Foun Paid Employees, and Contractors (continued)	dation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, er	nter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NO CONTRACTORS-NO COMPENSATION		
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		• 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant stanumber of organizations and other beneficiaries served, conferences convened, research papers p	atistical information such as the produced, etc.	Expenses
1 <u>N/A</u>		
2		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year  1 N/A	on lines 1 and 2	Amount
2		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	<b></b>	0.

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Part X Minimum Investment Return (All domestic foundations must complete	this part. Foreign foundations, see instr	ructions.)
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	0.
b Average of monthly cash balances	1b	
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	14	0.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	0.
4 Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions	3) 4	
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	0.
6 Minimum Investment return. Enter 5% of line 5	6	0.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private of foreign organizations check here  and do not complete this part )	operating foundations and certain	
1 Minimum investment return from Part X, line 6	1	0.
2a Tax on investment income for 2008 from Part VI, line 5		
b Income tax for 2008 (This does not include the tax from Part VI ) 2b		
c Add lines 2a and 2b	2c	0.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	0.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	0.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	0.
Part XII 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	0.
b Program-related investments - total from Part IX-B	16	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purpose	s 2	
3 Amounts set aside for specific charitable projects that satisfy the.		
a Sultability test (prior IRS approval required)	3a	
<b>b</b> Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line	4 4	0.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
income Enter 1% of Part I, line 27b	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating v	whether the foundation qualifies for the secti	on
4940(e) reduction of tax in those years.		

Form **990-PF** (2008)

Part XIII. Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2007	(c) 2007	(d) 2008
1 Distributable amount for 2008 from Part XI,	·			0.
line 7				
2 Undistributed income, if any, as of the end of 2007			0.	
a Enter amount for 2007 only b Total for prior years			-	
the rotal for prior years		0.		
3 Excess distributions carryover, if any, to 2008				
a From 2003				
b From 2004	,			
-				
c From 2005 d From 2006				
8 From 2007				
	0.			
f Total of lines 3a through e	<b>V</b> •		······	
4 Qualifying distributions for 2008 from Part XII, line 4 ▶ \$ 0 .				
			0.	
a Applied to 2007, but not more than line 2a		<u></u>	0.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		V •		
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	_ 0 •			0.
d Applied to 2008 distributable amount				<u> </u>
e Remaining amount distributed out of corpus	0.			^
5 Excess distributions carryover applied to 2008 (if an amount appears in column (d), the same amount must be shown in column (a))	U .			0.
6 Enter the net total of each column as indicated below:	j			
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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 2007 Subtract line				***************************************
4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2008 Subtract			`	
lines 4d and 5 from line 1. This amount must				
be distributed in 2009				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.		,	
8 Excess distributions carryover from 2003				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2009.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9			***************************************	
a Excess from 2004				
b Excess from 2005		`		
c Excess from 2006				
d Excess from 2007				,
e Excess from 2008				

SOUTHWEST MONTANA AGRICULTURE & RESOURCE

Form 990-PF (2008) TRADITIONS FOUNDATION Part XIV Private Operating Foundations (see instructions and Part VII-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 2008, enter the date of the ruling 4942(1)(5) 4942(i)(3) or b Check box to indicate whether the foundation is a private operating foundation described in section Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (d) 2005 (a) 2008 (b) 2007 (c) 2006 (e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed 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 Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test - enter (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed c "Support" alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(J)(3)(B)(III) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see the instructions.) **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)) 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 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here Fig. 1 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. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d a The name, address, and telephone number 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

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SOUTHWEST MONTANA AGRICULTURE & RESOURCE

TRADITIONS FOUNDATION

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient a Paid during the year None 0. **▶** 3a Total b Approved for future payment None 0. **▶** 3b Total

Form 990-PF (2008)

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nter gross amounts unless otherwise indicated	Unrelated	business income	Exclu	ided by section 512, 513, or 514	(8)
•	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
Program service revenue a	C000	<del>_</del>	+ ====		
	_	<del></del>	-		
i					
B					<del> </del>
·	_				
g Fees and contracts from government agencies	- <del>   </del>				
Membership dues and assessments					
nterest on savings and temporary cash					
nvestments					
Dividends and interest from securities					
let rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property					
let rental income or (loss) from personal					. =
property					
Other investment income					
Gain or (loss) from sales of assets other					
han inventory			<u> </u>		
let income or (loss) from special events					
iross profit or (loss) from sales of inventory					
ther revenue					
	_				
·	_				
1	_				<u> </u>
	_		ļ		
Subtotal Add columns (b), (d), and (e)	<u> </u>	0	<u>•                                    </u>	0.	
otal. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculations				. 13	· · · · · · · · · · · · · · · · · ·
Relationship of Activities  B No. Explain below how each activity for which in	ncome is reported in	column (e) of Part XVI-			nplishment of
the foundation's exempt purposes (other th	nan by providing fun	ds for such purposes)			
			<u>-</u>	-	
					<del></del>
					· · · · · ·
				· · · · · · · · · · · · · · · · · · ·	

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Form **990-PF** (2008)

F	art X	Information Re Exempt Organ		o and Transactions an	d Relationships With Nonc	haritable	•	
1	Did th			wing with any other organization	described in section 501(c) of		Yes	No
•				1 527, relating to political organiza				
		·	ation to a noncharitable exemp					į
	(1) 0	, ,	ation to a menonantable exemp	co.gameation of		1a(1)	i	X
		Other assets				1a(2)		X
		transactions				1.5,5		
		Gales of assets to a noncharita	hle evernot organization			1b(1)		Х
			ncharitable exempt organizatio	n		1b(2)		X
		Rental of facilities, equipment,	·	11		1b(3)		X
		Reimbursement arrangements				1b(4)		X
	٠,	oans or loan guarantees				1b(5)		X
			mbership or fundraising solicit	rations		1b(6)		<u>X</u>
	٠,		iling lists, other assets, or paid			10		X
		· ·	-		ys show the fair market value of the god		L	
		-	· · · · · · · · · · · · · · · · · · ·	• •	in any transaction or sharing arrangeme		,015,	
			other assets, or services receiv		many transaction or one mig arrangeme	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
(a	) Line no	(b) Amount involved		able exempt organization	(d) Description of transfers, transactions	and sharing ar	rangeme	nts
. – .	, Liio iio	(B) THIODIC INTOITED	N/2		(2) 5 2 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2 3			
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	ın sec	tion 501(c) of the Code (other s,* complete the following sch	r than section 501(c)(3)) or in s edule			Yes	X	□ No
_		(a) Name of org	anization	(b) Type of organization	(c) Description of relat	diigiibi		
		N/A						
		<del></del>						
_								
<u> </u>	and com	enatties of perjury, I declare that I haplete Declaration of previous to the	eve examined this return, including in than taxpayer or fiduciary) is based	accompanying schedules and statement on all information of which preparer has	nts, and to the best of my knowledge and belies as any knowledge	f, it is true, com	ect,	
Ē	- 31g	· · · · · ·	<del></del>	Date Dat		reparer's Identi	lying nun	nber
<u> </u>	S ≥	Preparer's signature	KIIn -		self-		-	
ñ	Paid sparer se Onl	DANA	F COLE & COM	PANY, LLP	7-/0 employed ► L			
	Paid Preparer's Use Only	Tilling name (or yours			EIIV			
	40		OLN, NE 68508	IE JOO	Phone no (4	02) 47	9-9	300