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Form **990-PF**

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

OMB No 1545-0052

2009

Department of the Treasury Internal Revenue Service

Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements ar beginning . 2009, and ending . For calendar year 2009, or tax year beginning

	all all that apply	tial Datum of a former o	ublic charity	Fine	al return
G Che		itial Return of a former p	· —		ai return
	Amended return	Address of			
Use th	1e TANE C HEMAN COUNDAMION	TNO	I ^A	Employer identification num	nber
IRS lab		INC	_	81-0526846	-1 -1
prin	401 DEARBORN AVE		В	Telephone number (see the	
or typ	MTCCOTIT & MT COOO1		(406) -549-319		
See Spe Instructi	••		C	If exemption application is	· —
				1 Foreign organizations, chec	
н с		01(c)(3) exempt private f		2 Foreign organizations meet here and attach computation	ing the 85% test, check
	Section 4947(a)(1) nonexempt charitable			If private foundation status	
	ur market value of all assets at end of year or market II, column (c), line 16)	counting method X C	ash Accrual	under section 507(b)(1)(A)	, check here
		Other (specify)	__ F	If the foundation is in a 60	
► \$		I, column (d) must be or	n cash basis)	under section 507(b)(1)(B)	, check here
Part I	Analysis of Revenue and	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	Expenses (The total of amounts in columns (b), (c), and (d) may not neces	expenses per books	ıncome	income	for charitable purposes
	sarily equal the amounts in column (a)				(cash basis only)
	(see the instructions).)	5 500 540			
	1 Contributions, gifts, grants, etc, received (att sch)	5,592,540.			
	2 Ck lifthe foundn is not req to att Sch B				
	3 Interest on savings and temporary cash investments	37,160.	14,617.	37,160.	
	4 Dividends and interest from securities	47,671.	47,671.	47,671.	
	5a Gross rents				
	b Net rental income or (loss)				
R	6a Net gain/(loss) from sale of assets not on line 10	1,631.			
E. V	b Gross sales price for all 2,436,631				
Ε	7 Capital gain net income (from Part IV, line 2)		1,631.		
N	8 Net short-term capital gain				
U E	9 Income modifications				
	10 a Gross sales tess			1	
RE	CELES Cost of O				-
1 111	c Gross projit/(loss) (att sch)	-			
1 30	102				
L	12 Total Add lines 1 through 11	5,679,002.	63,919.	84,831.	
$-\alpha$	Compensation of officers, directors, trustees, etc.	3,073,002.	05, 21, 2.	04,031.	· · · · · · · · · · · · · · · · · · ·
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
Α	16a Legal fees (attach schedule) SEE ST	L 16.	16.	16.	16.
A D M	b Accounting fees (attach sch) SEE ST	590.	590.	590.	590.
ı N	c Other prof fees (attach sch)				
o į	17 Interest				
O P E R A T	18 Taxes (attach schedule)(see instr.) SEE STM	930.	232.	232.	232.
A A	19 Depreciation (attach				
ı i	sch) and depletion				
N V	20 Occupancy 21 Travel, conferences, and meetings				
,	22 Printing and publications				
A E N X	23 Other expenses (attach schedule)				
C E		:			
	24 Total operating and administrative				
SES	expenses. Add lines 13 through 23	1,536.	838.	838.	838.
	25 Contributions, gifts, grants paid STMT 4	50,045.			50,045.
<u>.</u>	26 Total expenses and disbursements.	E1 E01	838.	838.	EU 005
<u> </u>	Add lines 24 and 25 27 Subtract line 26 from line 12:	51,581.	838.	838.	50,883.
	a Excess of revenue over expenses				
<u>ئ</u>	and disbursements	5,627,421.			
Ŷ.	b Net investment income (if negative, enter -0-)		63,081.		
	C Adjusted net income (if negative, enter -0-)			83,993.	
BAA E	or Privacy Act and Panerwork Reduction	ct Notice see the instru	ictions TEE	A0504L 02/02/10	Form 990-PF (2009)

Part	31	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year		Ena of	
1 ai c		(See instructions)	(a) Book Value	(b) Book Valu	ie ((c) Fair Market Value
	1	Cash – non-interest-bearing	19,852.	35,2	204.	35,204.
	2	Savings and temporary cash investments	1,503,742.	1,534,4	163.	1,294,463.
	3	Accounts receivable				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable				
		Less. allowance for doubtful accounts ▶	· [1	
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other	-	· · ·		
		disqualified persons (attach schedule) (see the instructions)				
	7	Other notes and loans receivable (attach sch)				
A S		Less allowance for doubtful accounts ▶				
š	8	Inventories for sale or use				
ASSETS	9	Prepaid expenses and deferred charges	7,500.	8	300.	800.
Ś	10:	a Investments – U.S. and state government obligations (attach schedule)				
	1	b Investments — corporate stock (attach schedule) STATEMENT 5	105,843.	3,307,5	14.	3,261,183.
	l	c Investments — corporate bonds (attach schedule)				
		Investments – land, buildings, and				
	''	equipment: basis. Less: accumulated depreciation				•
		(attach schedule)				
	12	Investments – mortgage loans.				
	13	Investments — other (attach schedule) STATEMENT 6		2,386,3	377.	2,132,497.
	14	Land, buildings, and equipment basis				
		Less accumulated depreciation (attach schedule)				
		Other assets (describe \(\bar{\text{D}} \) Total assets (to be completed by all filers \(-\)				
		see instructions Also, see page 1, item I)	1,636,937.	7,264,3	58.	6,724,147.
Ļ	17	Accounts payable and accrued expenses				
A	18	Grants payable				
В	19	Deferred revenue				
Ľ	20	Loans from officers, directors, trustees, & other disqualified persons				
- 1	21	Mortgages and other notes payable (attach schedule)	·			
Ţ	22	Other liabilities (describe				
E S	22	Total liabilities (add lines 17 through 22)	0.		0.	
	23	Foundations that follow SFAS 117, check here	<u> </u>		—	
		and complete lines 24 through 26 and lines 30 and 31.				
N F E U T N	24	Unrestricted				
ŤN	25	Temporarily restricted				
ח	26	Permanently restricted				
A B A L A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.				
E L T A	27	Capital stock, trust principal, or current funds				
S N C	28	Paid-in or capital surplus, or land, building, and equipment fund				
O E	29	Retained earnings, accumulated income, endowment, or other funds	1,636,937.	7,264,3	58.	
R S	30	Total net assets or fund balances (see the instructions)	1,636,937.	7,264,3	58.	
	31	Total liabilities and net assets/fund balances (see the instructions)	1,636,937.	7,264,3	58.	
Part	III	Analysis of Changes in Net Assets or Fund Balance				
1	Tota	I net assets or fund balances at beginning of year – Part II, colur	mn (a) line 30 (must ad	ree with		
•	end-	of-year figure reported on prior year's return).	(4), 50 (most ag		1	1,636,937.
2	2 Enter amount from Part I, line 27a 2 5, 627, 421.					
3						
4	Add	lines 1, 2, and 3			4	7,264,358.
5	Decre	ases not included in line 2 (itemize).			5	
6	Tota	net assets or fund balances at end of year (line 4 minus line 5)	- Part II, column (b), lii	ne 30	6	7,264,358.

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shares MLC Company) (b) How the property sold (e.g., real estate, property sold (e.g., real					se (month, day, year)	(d) Date sold (month, day, year)	
1. CFF	STATEMENT 7			D — Donatio	on		
b	SIATEMENT /						
	-						
			····				
e							
(e) (Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other ba plus expense of sa		(h) Gain or (e) plus (f) m		
а							
b							
С			·				
<u>d</u>							
е							
		ving gain in column (h) and owned by			(I) Gains (Col		
	air Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		gain minus column (l than -0-) or Losses (fi		
a b							
С							
d			-				
е	· · · · · · · · · · · · · · · · · · ·						
2 Capita	I gain net income or (ne	et capital loss)	enter in Part I, line 7 ter -0- in Part I, line 7		2	1,631.	
3 Net sh	ort-term capital gain or	(loss) as defined in sections 1222(5)	and (6)				
	, also enter in Part I, lin t I, line 8	e 8, column (c) (see the instructions) If (loss), enter -0-		3	0.	
Part V	Qualification Unde	r Section 4940(e) for Reduce	d Tax on Net Investm	ent Incom	e		
Was the four		this part blank. ction 4942 tax on the distributable an ilify under section 4940(e). Do not co		se period?	Yes	☐ No	
1 Enter t	the appropriate amount	in each column for each year; see th	e instructions before makir	ig any entrie	S		
Calend	(a) se period years ar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as	sets ((d) Distribution ratio (column (b) divided by column (c))		
	2008	·					
	2007						
	2006						
	2005						
	2004						
2 Total o	of line 1, column (d)				2		
3 Averag	ge distribution ratio for the role of the results of the foundation	he 5-year base period – divide the to n has been in existence if less than !	otal on line 2 by 5, or by the 5 years		3		
4 Enter t	the net value of nonchar	ritable-use assets for 2009 from Part	X, line 5		4		
5 Multiply line 4 by line 3					5		
6 Enter 1% of net investment income (1% of Part I, line 27b)					6		
7 Add lin	nes 5 and 6				7		
8 Enter o	qualifying distributions fi		8				
	8 is equal to or greater t	than line 7, check the box in Part VI,	line 1b, and complete that	part using a	1% tax rate See t	he	

orr	n 990-PF (2009) JANE S HEMAN FOUNDATION INC 81-0526846		F	Page 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the instruc	tions)		
1:	a 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 instr.)			
l	Domestic foundations that meet the section 4940(e) requirements in Part V,		1,2	<u> 262.</u>
	check here ▶and enter 1% of Part I, line 27b			
•	c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable			_
_	foundations only Others enter -0-)		1 (0.
3	Add lines 1 and 2		1,4	262.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		1 /	0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		1,4	262.
6	Credits/Payments			
	a 2009 estimated tax pmts and 2008 overpayment credited to 2009 6a 800.			
	b Exempt foreign organizations — tax withheld at source C Tax paid with application for extension of time to file (Form 8868) 6c			
	Backup withholding erroneously withheld Total credits and payments. Add lines 6a through 6d 7			300.
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached 8			300.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			462.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			102.
	Enter the amount of line 10 to be: Credited to 2010 estimated tax			
	t VII-A Statements Regarding Activities			
			Yes	No
1 8	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		X
ı	DIDID IT SPEND TO DIA \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1 b		Х
	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.	_		
	Did the foundation file Form 1120-POL for this year?	1 c		X
•	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation \$\ \\$ \ \ \ \\$ \ \ \ \ \ \ \ \ \ \ \ \			
	foundation managers > \$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	-	Х
	If 'Yes,' attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles			
Ŭ	of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		Х
4:	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
ı	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	4b	N	/A
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If 'Yes,' attach the statement required by General Instruction T			
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?	6		Х
	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	7	<u> X</u>	L
8	Enter the states to which the foundation reports or with which it is registered (see the instructions) MT			
I	o 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 General Instruction G? If 'No,' attach explanation	8ь	Х	
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 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If 'Yes,' complete Part XIV			
		9		X
	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses SEE STATEMENT 8	10	X	(0000)
3 A A	. Fo	rm 99	D-PF /	(2009)

Part 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	X_
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12	X
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X
Website address • N/A		
14 The books are in care of ► J. RANDOLPH ALFORD, CPA Telephone no ► (406)	<u>-363-</u>	2820
Located at 108 NORTH SECOND ST HAMILTON MT ZIP + 4 59840 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	M/A	N/A
Part VII-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
1 a 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? $\qquad \qquad \qquad$		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		
(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)? Yes X No		
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) Yes X No		
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 the instructions)?	1 b	N/A
Organizations relying on a current notice regarding disaster assistance check here		
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1 c	<u> x</u>
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 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2009?		
If 'Yes,' list the years ▶ 20, 20, 20		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	26	N/A
all years listed, answer 'No' and attach statement — see the instructions) c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	2b	IV/ A
► 20, 20, 20		
3a Did the foundation hold more than a 2% direct or indirect interest in any business		
enterprise at any time during the year? Yes X No		
b If 'Yes,' did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or		
(3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule Č, Form 4720, to determine if the foundation had excess business holdings in 2009)	3ь	N/A
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	Х
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 2009?	4ь	х
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Part VII-B Statements Regarding Activiti	es for Which Form	1 4720 May Be Req	uired (continued)	· 			
5a During the year did the foundation pay or incu	r any amount to:			.			
(1) Carry on propaganda, or otherwise attempt	ot to influence legislatio	n (section 4945(e))?	Yes X	No			
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra	lic election (see section ation drive?	4955), or to carry	Yes X	No			
(3) Provide a grant to an individual for travel,	study, or other similar	purposes?	Yes X	No	ļ		
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section			Yes X	No			
(5) Provide for any purpose other than religio educational purposes, or for the preventio	us, charitable, scientific n of cruelty to children	c, literary, or or animals?	Yes X	No			
b If any answer is 'Yes' to 5a(1)-(5), did any of described in Regulations section 53 4945 or in (see instructions)?	the transactions fail to a current notice regard	qualify under the excep ding disaster assistance	tions	_5ь	N/A		
Organizations relying on a current notice regarding disaster assistance check here							
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure responsif 'Yes,' attach the statement required by Region	sibility for the grant?		N/A Yes] No			
6a Did the foundation, during the year, receive ar on a personal benefit contract?			s ∏Yes X	No			
b Did the foundation, during the year, pay prem <i>If 'Yes' to 6b, file Form 8870.</i>	iums, directly or indirec	tly, on a personal bene	fit contract?	6ь	X		
7a At any time during the tax year, was the found	dation a party to a proh	ibited tax shelter transa	iction? Yes X]No			
b If yes, did the foundation receive any proceed				7 b	N/A		
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Manag	gers, Highly Paid I	Employees	,		
List all officers, directors, trustees, foundation	n managers and their	rompensation (see inst	ructions)				
List all officers, directors, trastees, fourtaine	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expense	account		
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other allo			
JOHN DAYRIES	PRESIDENT	0.	0.		0.		
401 DEARBORN AVE	0.60						
MISSOULA, MT 59801							
_CAROL_CAPP	VICE PRES	0.	0.		0.		
4004 WILDFLOWER LANE	0.30						
STEVENSVILLE, MT 59870							
ROBERT A. THOMAS	SECR/TREAS	0.	0.		0.		
366 HILLVIEW DRIVE	0.30						
STEVENSVILLE, MT 59870							
2 Compensation of five highest-paid employee	s (other than those inc	luded on line 1- see ir	structions). If none, e	nter '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 other allo			
NONE							

		-					
Total number of other employees paid over \$50,000)	27/05/00	•	Form 990	0 -PF (2009)		

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amount All other program-related investments See instructions 3

Total. Add lines 1 through 3

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►

Pai	Minimum Investment Return (All domestic foundations must complete this part. For see instructions.)	reign	foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes a Average monthly fair market value of securities	1 a	_2,062,871.
	Average of monthly cash balances	1 b	1,552,392.
	Fair market value of all other assets (see instructions)	1 c	
	d Total (add lines 1a, b, and c)	1 d	3,615,263.
	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	3,615,263.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	54,229.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	3,561,034.
6	Minimum investment return. Enter 5% of line 5	6	178,052.
Pai	TXI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here ► ☐ and do not complete this pa		foundations
1	Minimum investment return from Part X, line 6	1	178,052.
2	Tax on investment income for 2009 from Part VI, line 5		-
	Income tax for 2009 (This does not include the tax from Part VI)		
•	Add lines 2a and 2b	2c	1,262.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	176,790.
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4	5	176,790.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	176,790.
Pai	Qualifying Distributions (see instructions)		
ā	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	50,883.
I	Program-related investments — total from Part IX-B	1 b	
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	
1	cash distribution test (attach the required schedule)	3ь	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	50,883.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	50,883.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whet qualifies for the section 4940(e) reduction of tax in those years	her the	e foundation
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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				176 700
Inne 7 2 Undistributed income, if any, as of the end of 2009.				176,790.
a Enter amount for 2008 only			0.	
b Total for prior years 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2009.				
a From 2004 20, 614. b From 2005 19, 766.				
c From 2006 17,506.				
d From 2007 21,771.				
e From 2008 24,135.				
f Total of lines 3a through e4 Qualifying distributions for 2009 from Part	103,792.			
XII, line 4. ► \$ 50,883.				
a Applied to 2008, 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		0.		
(Election required – see instructions)	0.			
d Applied to 2009 distributable amount				50,883.
e Remaining amount distributed out of corpus Excess distributions carryover applied to 2009	0. 103,792.			103,792.
(If an amount appears in column (d), the	103,732.			103,732.
same amount must be shown in column (a))				
6 Enter the net total of each column as				
indicated below: a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income Subtract	0.	, , , , , , , , , , , , , , , , , , , ,		
line 4b from line 2b		0.		_
c Enter the amount of prior years' undistribut- ed 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		0.	-	
amount - see instructions		0.		
e Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount — see instructions			0.	
ine za Taxable amount — See instructions			0.	
f Undistributed income for 2009 Subtract lines 4d and 5 from line 1. This amount must be				
distributed in 2010				22,115.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
8 Excess distributions carryover from 2004 not				
applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2005				
b Excess from 2006 c Excess from 2007				
d Excess from 2008				
e Excess from 2009				

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Form 990-PF (2009) JANE S HEMAN FOL				81-0526840	
Part XIV Private Operating Foundat					<u> N/A</u>
1 a If the foundation has received a ruling or is effective for 2009, enter the date of the	e ruling	•		_	10.00.05
b Check box to indicate whether the found		erating foundation o		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	42.0000	Prior 3 years	(-h 200c	(a) Takal
investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
b 85% of line 2a		ļ			
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		ļ			
 Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c 					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test - enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information	(Complete this	part only if the	organization ha	d \$5,000 or mor	re in
assets at any time during t		structions.)			
1 Information Regarding Foundation Mana a List any managers of the foundation who close of any tax year (but only if they has NONE	have contributed m	ore than 2% of the than \$5,000). (See	total contributions r section 507(d)(2))	eceived by the found	dation before the
b List any managers of the foundation who a partnership or other entity) of which the NONE	own 10% or more of e foundation has a 1	of the stock of a cor 0% or greater inter	poration (or an equi est	ally large portion of	the ownership of
2 Information Regarding Contribution, Grand Check here In the foundation only	makes contributions	to preselected cha	ırıtable organization:		•
requests for funds If the foundation mak complete items 2a, b, c, and d	es gifts, grants, etc,	(see instructions) t	to individuals or org	anızatıons under oth	er conditions,
a The name, address, and telephone numb	per of the person to	whom applications	should be addresse	d·	
SEE STATEMENT 9					
b The form in which applications should be	submitted and info	mation and materia	als they should inclu	de.	
	Judanikas and initia	matori and matoric	and they official mora	u 0	
SEE STATEMENT FOR LINE 2A c Any submission deadlines:		· · · · · · · · · · · · · · · · · · ·			
•					
SEE STATEMENT FOR LINE 2A d Any restrictions or limitations on awards,	such as by geograp	hical areas, charita	ble fields, kinds of i	nstitutions, or other	factors
SEE STATEMENT FOR LINE 2A	"				
BAA	TE	EA0310L 07/06/09			orm 990-PF (2009)
	10			Г	UIIII JUUTII (2007)

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	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year	śubstantial contributor	recipient		
Total	l		► 3a	
b Approved for future payment Total			► 3b	

nter gross amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	
1. December converse revenues	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (see the instructions)
1 Program service revenue:	-		code		(See the instructions
a	 	<u>-</u>			
b	+		+		
С	 		+ +		
d	+		+		
e			+		
g Fees and contracts from government agencies	+ +				
2 Membership dues and assessments					
3 Interest on savings and temporary cash investments	 				37,160
4 Dividends and interest from securities		 			47,671
5 Net rental income or (loss) from real estate:	 		+		37,071
a Debt-financed property	 				
b Not debt-financed property			 	 	
6 Net rental income or (loss) from personal property					
7 Other investment income			1		
8 Gain or (loss) from sales of assets other than inventory	+		- 		1,631
9 Net income or (loss) from special events			+ +-		1,031
O Gross profit or (loss) from sales of inventory			- -		
1 Other revenue	 		1		···
			+		
· ····································	 		 -		
	 				
cd			+ +		
е			 		·
2 Subtotal Add columns (b), (d), and (e)			1		86,462
3 Total. Add line 12, columns (b), (d), and (e)	<u> </u>		_ L L _	13	86,462
see worksheet in the instructions for line 13 to verify of	calculations)				
		•			
art XVI-B Relationship of Activities to th	e Accomplish	nment of Exem	pt Purpos	es	
Line No. Explain below how each activity for which accomplishment of the foundation's exemp	income is reporte	ed in column (e) of r than by providing	Part XVI-A of	contributed important ich purposes) (See t	tly to the the instructions)
3 & 4 THE FOUNDATION WAS ENDOWED	TO BENEFIT	RESIDENTS C	F WESTER	RN MONTANA FO	R THE
FOLLOWING PURPOSES: EDUCAT					
AGING. THE INVESTMENT INCO	OME EARNED	ON THIS PRIN	CIPAL MA	AINTAINS THE	PURCHASING

Line No. ▼	accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See the instructions)
3 & 4	THE FOUNDATION WAS ENDOWED TO BENEFIT RESIDENTS OF WESTERN MONTANA FOR THE
	FOLLOWING PURPOSES: EDUCATION AND TO ALLEVIATE SUFFERING CAUSED BY DISEASE OR
	AGING. THE INVESTMENT INCOME EARNED ON THIS PRINCIPAL MAINTAINS THE PURCHASING
	POWER OF THE ENDOWMENT.

BAA

Form 9	990-P <u>F</u>	·(2009) JANE S	HEMAN FO	UNDATION 1	INC			81-052	5846	Pa	ge 13
Part 2	XVII	Information R Exempt Organ		ransfers To a	and Transact	ions an	d Relations	ships With Nonc	naritable	•	
		Exempt Organ	IIZALIOIIS						T	Yes	No
C	lescrib	organization directly ed in section 501(c) to political organiza	of the Code (d	engage in any o other than section	f the following won 501(c)(3) orga	ith any canizations	ther organizat s) or in section	ion 1 527,		163	140
	_	to political organizars from the reporting		a noncharitable	e exempt organi	zation of					
	1) Cas		, roundation to	o a mononamabh	c cxcmpt organi	zanon o			1 a (1)		Х
•	•	er assets							1a (2)		Х
b (Other ti	ansactions.									
(1) Sal	es of assets to a nor	ncharitable ex	empt organization	on				1 b (1)	<u> </u>	Х
(2) Pur	chases of assets fro	m a noncharit	able exempt org	ganization				1 b (2)		X
(3) Rer	ital of facilities, equi	pment, or oth	er assets					1 b (3)		Х
•	-	mbursement arrange							1 b (4)		X
•	•	ns or loan guarantee							1 b (5)	ļ	X
•	•	formance of services		•	•				1 b (6)		X
C S	narıng	of facilities, equipm	ient, mailing li	ists, other assets	s, or paid emplo	yees			1 c	L	X
t	he aoo	ds, other assets, or	services aiver	by the reporting	a foundation If	the found	lation received	lways show the fair i l less than fair marke s, or services receive	et value in	ue of	
(a) Lin	e no	(b) Amount involved	(c) Name	of noncharitable exe	mpt organization	(d	Description of tr	ansfers, transactions, and	sharing arrai	ngement	S
N/A											
			ļ			-				-	
			 			 					
			+			+					
	-		 			+					
			 								
	 -		1			 					
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			<u> </u>					· · · · · · · · · · · · · · · · · · ·			-
d	lescrib	oundation directly or ed in section 501(c) complete the follow	of the Code (d	iated with, or re other than section	lated to, one or on 501(c)(3)) or	more tax in section	-exempt orgar i 527?	nizations	Yes	X	No
	(a) Name of organizat	ion	(b) Typ	e of organizatio	n		(c) Description of rel	ationship		
N/A				<u> </u>			ļ				
				ļ			-				
				 							_
		· · · · · · · · · · · · · · · · · · ·		ļ							
Unde	r nenath	es of personal Lideolare that	I have examined t	his return, including a	accompanying schedu	les and stat	ements, and to the	best of my knowledge and	belief it is tri	ie corre	ct and
comp	olete De	claration of preparer (other	than taxpayer or fi	duciary) is based on	all information of white	ch preparer	has any knowledge	these of my knowledge and	belier, it is tre	ie, cone	Ct, and
		had an alla	ah. a a .				d d d a				
s 🕨	77	TO OXO	gries	<u> </u>		(4	1 4/10	_ ► PRESIDENT	·		
G	Signatu	e of officer or trustee	U			Qate Dat	<u>·</u>	Title	provin Ideal f		har
[, P	reparer's	ρ.	0 4 0 1		Dat ــــر	1 1	Check if (See	arer's Identify Signature in	the insti	rs)
ễ Pre	⊢	griature 2	Kanolo	esa ne	fool		115/10	employed ► X PU	0211521	<u> </u>	
E pard Use		sure if colf 's		ALFORD, CE	A			EIN ► 81-03	89053_		
Onl	y e	nployed), 108 dress, and 12MT	N. SECONI						·C) 262	000	^
		P code HAMI	LTON, MT	3 9 040				Phone no ► (40	<u>6)</u> 363	<u>-282</u>	U

Form **990-PF** (2009)

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF

OMB No 1545-0047

2009

Name of the organization JANE S HEMAN FOUN	IDATION INC	Employer identification number					
C/O JOHN DAYRIES		81-0526846					
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					
	X 501(c)(3) taxable private foundation						
Check if your organization is covered by the G Note : Only a section 501(c)(7), (8), or (10) org	eneral Rule or a Special Rule anization can check boxes for both the General Rule an	id a Special Rule See instructions					
General Rule -							
X For an organization filing Form 990, 990-E. contributor (Complete Parts I and II)	Z, or 990-PF that received, during the year, \$5,000 or m	ore (in money or property) from any one					
Special Rules —							
509(a)(1)/170(b)(1)(A)(vi) and received from any	Form 990 or 990-EZ, that met the 33-1/3% support test of an econtributor, during the year, a contribution of the greater or (ii) Form 990-EZ, line 1 Complete Parts I and II	of the regulations under sections of (1) \$5,000 or (2) 2% of the					
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III							
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributior, during the year, contributions for use <i>exclusively</i> for religious, charitable, etc, purposes, but these contributions did not aggregate to more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc, purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively							
religious, charitable, etc, contributions of \$	5,000 or more during the year	> \$					
990-PF) but it must answer 'No' on Part IV, In	Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it must answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)						
BAA For Privacy Act and Paperwork Reducti for Form 990, 990EZ, or 990-PF.	on Act Notice, see the Instructions Sch	nedule B (Form 990, 990-EZ, or 990-PF) (2009)					

Schedule B	(Form 990.	990-FZ.	or 990-PF)	(2009)

of Part I

Page 1 of 2
Employer identification number

Name of org			r identification number
	S HEMAN FOUNDATION INC	526846	
Part I	Contributors (see instructions)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ESTATE OF JANE S. HEMAN	-	Person X Payroll
	401 DEARBORN AVE	\$480,765.	Noncash X
	MISSOULA, MT 59801	-	(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	ESTATE_OF_JANE_S HEMAN		Person Payroll
	401 DEARBORN AVE	\$491,664.	Noncash X
	MISSOULA , MT 59801		(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	ESTATE OF JANE S. HEMAN		Person
	401 DEARBORN AVE	\$2,083,226.	Payroll X
	MISSOULA, MT 59801		(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	ESTATE OF JANE S. HEMAN		Person
	401 DEARBORN AVE	\$ 410,304.	Payroll X
	MISSOULA, MT 59801		(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	ESTATE OF JANE S, HEMAN		Person
	401 DEARBORN AVE	\$ <u>378,976.</u>	Payroll X
	MISSOULA, MT 59801		(Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6	ESTATE OF JANE S. HEMAN		Person
	401 DEARBORN AVE	\$651,936.	Payroll X
	MISSOULA, MT 59801		(Complete Part II if there is a noncash contribution)

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2009)

Schedule	B (Form 990, 990-EZ, or 990-PF) (2009)	Page 2	of 2 of Part I
Name of org	anization S HEMAN FOUNDATION INC		r identification number 526846
Part I	Contributors (see instructions)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7	ESTATE OF JANE S. HEMAN 401 DEARBORN AVE MISSOULA, MT 59801	\$ <u>526,156.</u>	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2009)

(Complete Part II if there is a noncash contribution)

of 2

of Part II

Name of organization

JANE S HEMAN FOUNDATION INC

Employer identification number 81-0526846

Part II	Noncash Pro	perty (see instructions)					
(a) No. from Part I		I	(b) Description of noncash property given			(c) FMV (or estimate) (see instructions)		(d) Date received
	1,965 SH	A'	T&T INC	\$79,273				
1	1,500 SH	A	MERICAN EXPRESS CO	87,683				
	1,100 SH	A.	PPLE INC	152,177				
	2,116 SH	B	P PLC ADR	144,972	\$		440,765.	8/27/09
	650 SH	E	XXON MOBILE CORP	57,783				
(a) No. from Part I		į	(b) Description of noncash property given			FMV (or	(c) restimate) structions)	(d) Date received
	1,030 SH	GLAC	IER BANCORP	21,535				
2	7,538 SH		RGAN CHASE & CO	341,415				
	1,100 SH		SON & JOHNSON	63,055				
	1,650 SH		RESOURCE GROUP	43,362	\$		491,664.	8/27/09
	1,000 SH		NALDS CORP	54,550				
(a) No. from Part I						FMV (or	(c) estimate) structions)	(d) Date received
_ 	30,134 SH	ALT	RIA GROUP INC	616,638				
3	408 SH		SANTO COMPANY	30,470				
	30,134 SH			,405,127				
	1,516 SH		IZON COMMUNICATIONS	64,521	\$	2,	083,226.	8/27/09
	1,300 SH		SICO INC	90,626			,	
(a) No. from Part I			(b) Description of noncash property given	,		FMV (or	(c) estimate) structions)	(d) Date received
	25,040.834	SH	AIM INTL ALLOC A	231,302				
4	316.196			A 19,963				
	9,711.000		FRANKLIN FED TAX FREE IN					
	2,964.958		GOLDMAN SACHS GR & INC	38,361	\$		410,304.	8/28/09
	600.	SH	CHEVRON CORPORATION	54,327				
(a) No. from Part I		l	(b) Description of noncash property given			FMV (or	(c) restimate) structions)	(d) Date received
	1,759.857	SH	HARTFORD FUNDAMENTAL GRW	TH 22,720				
5	2,081.035		HARTFORD HIGH YIELD A	15,761				
<u>-</u>	213.036		HARTFORD DIV & GRWTH	4,741			İ	
	30,805.627		LORD ABBETT NTL TAX FREE		ş		378,976.	8/28/09
	3,463.423		LORD ABBETT INTER CORE E				_,	
(a) No. from Part I	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(b) Description of noncash property given			FMV (or (see ins	(c) · estimate) ·tructions)	(d) Date received
	3,098.043	SH	LORD ABBETT BOND DEB FD	24,162				
6	45,263.884		ISI MANAGED MUNI A	479,964				
	1,141.723		AMER NEW WORLD FD	64,515				
	4,408.637		VAN ECK INTL INV GOLD	75,104	s		651,936.	8/28/09
							, · · · ·	

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2,249.531 SH

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2009)

VAN KAMPEN COMSTOCK

42,864

of 2

of Part II

Name of organization

JANE S HEMAN FOUNDATION INC

Employer Identification number 81-0526846

Part II Noncash Property (see instructions.)

(a) (b) (c) FMV (or estimate for extension of noncash property given (c) FMV (or estimate for extension of noncash property given (c) FMV (or estimate for extension of noncash property given (c) FMV (or estimate for extension of noncash property given (c) FMV (or estimate for extension of noncash property given (c) FMV (or estimate for extension of noncash property given (c) FMV (or estimate for extension of noncash property given (c) FMV (or estimate for extension of noncash property given (c) FMV (or estimate for extension of noncash property given (c) FMV (or estimate for extension of noncash property given (c) FMV (or estimate for extension of noncash property given (c) FMV (or estimate for extension of noncash property given (c) FMV (or estimate for extension of noncash property given (c) FMV (or estimate for extension of noncash property given (c) FMV (or estimate for extension of noncash property given (c) FMV (or estimate for extension of noncash property given (c) FMV (or estimate for extension of noncash property given (c) FMV (or estimate for extension of noncash property given (c) FMV (or extension of nonca

(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (see instructions)	(d) Date received
7	3,502.448 SH HARTFORD GLOBAL HEALTH A 62,579 39,730.209 SH PRINCIPAL INV TX EXMPT BD 291,981 4,487.424 SH FEDERATED MUNI & STOCK ADV 53,292 15,758.962 SH EVERGREEN MUNI BOND A 47,499	\$	526,156.	8/28/09
	4,400.000 SH SUNAMERICA FOCUSED ALPHA 87,175	7 -		
(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
		1		

BAA

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2009)

of 1

of Part III

				25.05046				
	HEMAN FOUNDATION INC			81-0526846				
Part III	Exclusively religious, charitable, e organizations aggregating more th	rtc, individual contribution nan \$1,000 for the year.(Co	ns to section omplete cols (a) t	501(c)(7), (8), or (10) hrough (e) and the followi	ng line entry			
	For organizations completing Part III, enter contributions of \$1,000 or less for the year	total of <i>exclusively</i> religious, ch (Enter this information once –	arıtable, etc, see instructions.) ► \$	N/.			
(a)	(b)	(c)		(d)				
No. from Part I	Purpose of gift	Use of gift		Description of how gift	t is held			
_	N/A							
	Transferee's name, addres	(e) Transfer of gift ss. and ZIP + 4	Relation	ship of transferor to trans	sferee			
				(d)				
(a) No. from Part I	(b) (c) Purpose of gift Use of gift			Description of how gift is held				
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relation	ship of transferor to trans	sferee			
(a)	(b)	(c)	····	(d)				
No. from Part I	Purpose of gift			Description of how gift	t is held			
	(e)							
	Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transfere							
			····					
(a)	(b)	(c)		(d)				
No. from Part I	Purpose of gift	Use of gift		Description of how gift	is held			

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

BAA

2009 CLIENT 1001	JANE S	FEDERAL STATEMENTS JANE S HEMAN FOUNDATION INC					
5/15/10		C/O JOHN DAY	KIES		81-052684 09.47A		
STATEMENT 1 FORM 990-PF, PART I, LINE 16A LEGAL FEES							
		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
WORDEN THANE P.C.	TOTAL	\$ 16. \$ 16.	\$ 16. \$ 16.	\$ 16. \$ 16.	\$ 16. \$ 16.		
STATEMENT 2 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES							
J. RANDOLPH ALFORD, CPA	TOTAL	(A) EXPENSES PER BOOKS \$ 590.	\$ 590.	(C) ADJUSTED NET INCOME \$ 590. \$ 590.	(D) CHARITABLE PURPOSES \$ 590 \$ 590		
STATEMENT 3 FORM 990-PF, PART I, LINE 18 TAXES							
		(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
990-PF TAX ON INVESTMENT INVESTMENT IN ANNUAL REPORT FOREIGN TAXES	NCOME TOTAL	\$ 698. 15. 217. \$ 930.	\$ 15. 217.	217.	217		
	TOTAL	y 	<u> </u>	<u> </u>	<u> </u>		

CASH GRANTS AND ALLOCATIONS

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: AMOUNT GIVEN:

SUPPORT OF THE ARTS

THE RIALTO COMMUNITY THEATER RESTORATION

418 MAIN STREET - PO BOX 874 DEER LODGE, MT 59722

NONE

501 (C(3)

10,000.

CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:

RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF DONEE: SUPPORT OF THE ARTS

MONTANA MUSEUM OF ART & CULTURE THE UNIVERSITY OF MONTANA

MISSOULA, MT 59812

NONE

UNIVERSITY FOUNDATION

2009	FEDERAL STATEMENTS	PAGE 2
CLIENT 1001	JANE S HEMAN FOUNDATION INC C/O JOHN DAYRIES	81-0526846
5/15/10		09 47AM
STATEMENT 4 (CONTINUED) FORM 990-PF, PART I, LINE 25 CONTRIBUTIONS, GIFTS, AND (GRANTS	
AMOUNT GIVEN:	\$	20,045.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	SUPPORT OF EDUCATION ROCKY MTN MUSEUM OF MILITARY HISTORY BLDG T-316 FORT MISSOULA	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF AMOUNT GIVEN:	MISSOULA, MT 59804 NONE DONEE: 501(C(3)	10,000.
CLASS OF ACTIVITY: DONEE'S NAME: DONEE'S ADDRESS:	ENHANCE SCHOOL ACTIVITIES STEVENSVILLE PUBLIC SCHOOLS 300 PARK AVENUE	
RELATIONSHIP OF DONEE: ORGANIZATIONAL STATUS OF AMOUNT GIVEN:	STEVENSVILLE, MT 59870 NONE DONEE: PUBLIC ELEMENTARY SCHOOL	10,000.

50,045.

TOTAL \$

STATEMENT 5 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS

CORPORATE STOCKS	VALUATION METHOD	BOOK VALUE	FAIR MARKETVALUE
2,881.084 SH PIONEER OAK RIDGE LRG CAP	COST	\$ 0.	\$ 0.
2,800.474 SH SUNAMERICA FOC DIV STRAT II	COST	0.	0.
1,445.292 SH THORNBURG INT'L VAL C	COST	0.	0.
1,965 SH AT&T	COST	79,273.	55,079.
30,134 SH ALTRIA GROUP INC	COST	616,638.	591,530.
1,500 SH AMERICAN EXPRESS	COST	87,683.	60,780.
1,100 SH APPLE INC	COST	152,177.	
2,116 SH BP PLC ADS	COST	144,972.	
600 SH CHEVRON CORPORATION	COST	54,327.	
650 SH EXXON MOBILE CORPORATION	COST	57,783.	44,324.
1,030 SH GALCIER BANCORP INC	COST	21,535.	
7,538 SH JPMORGAN CHASE & CO	COST	341,415.	
1,000 SH JOHNSON & JOHNSON	COST	63,055.	- •
1,650 SH MDU RESOURCE GROUP	COST	43,362.	•
1,000 SH MCDONALDS CORP	COST	54,550.	62,440.
408 SH MONSANTO COMPANY	COST	30,470.	
1,300 SH PEPSICO	COST	90,626.	
30,141 SH PHILIP MORRIS INTL	COST	1,405,127.	_,,
1,516 SH VERIZON COMMUNICATIONS	COST	64,521.	
	TOTAL	\$ 3,307,514.	\$ 3,261,183.

2009

FEDERAL STATEMENTS

JANE S HEMAN FOUNDATION INC C/O JOHN DAYRIES

81-0526846

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STATEMENT 6 FORM 990-PF, PART II, LINE 13 INVESTMENTS - OTHER

	VALUATIO METHOD		BOOK VALUE	FF	AIR MARKET VALUE
OTHER PUBLICLY TRADED SECURITIES					
25,629.572 SH AIM INTL ALLOC A 323.413 SH CAPITAL INC BUILDER A 15,993.840 SH EVERGREEN MUNICIPAL BOND 4,540.609 SH FEDERATED MUNI & STOCK ADV 9,858.175 SH FRANKLIN FED TAX FREE INCOM 3,048.434 SH GOLDMAN SACHS GR & INC 1,759.857 SH HARTFORD FUNDMENTAL GRWTH 3,502.448 SH HARTFORD GLOBAL HEALTH 2,149.799 SH HARTFORD HIGH YIELD CL A 214.547 SH HARTFORD DIVIDEND & GR CL A 31,306.160 SH LORD ABBETT NTL TAX FREE 3,487.042 SH LOR ABBETT INTER CORE EQ 3,163.091 SH LORD ABBETT BOND DEB 45,692.508 SH ISI MANAGED MUNI A 1,155.696 SH AMERICAN NEW WORLD FUND 40,376.681 SH PRINCIPAL TAX-EXEMPT BD 4,400 SH SUNAMERICA FOCUSED ALPHA GROWTH 4,571.060 SH VAN ECK INTL INV GOLD FD 2,260.230 SH VAN KAMPEN COMSTOCK 2,881.084 SH PIONEER OAK RIDGE LRG CAP 2,800.474 SH SUNAMERICA FOC DIV STRAT	COST COST COST COST COST COST COST COST	\$	338,474. 20,249. 118,623. 53,833. 117,873. 39,165. 22,720. 62,579. 16,340. 4,767. 346,226. 56,380. 24,621. 487,439. 65,164. 297,787. 87,175. 78,097. 43,005. 36,375. 31,696.	\$	235, 792. 15, 488. 116, 115. 46, 269. 116, 031. 29, 905. 17, 528. 51, 696. 14, 962. 3, 671. 324, 645. 40, 415. 23, 249. 488, 453. 54, 549. 283, 040. 60, 324. 86, 393. 31, 214. 30, 972. 27, 865.
1,445.292 THORNBURG INT'L VAL C	COST	TAL <u>\$</u>	37,789. 2,386,377.	\$	33,921. 2,132,497.

STATEMENT 7 FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ITEM	(A) DESCRIPTION	(B) HOW ACOUIRED	(C) DATE ACOUIRED	(D) DATE SOLD
1	95,000 CENLAR FSB 1/2/09 2.35%	PURCHASED	9/23/2008	1/02/2009
$\bar{2}$	95,000 CAPMARK BK 1/2/09 2.40%	PURCHASED	9/23/2008	1/02/2009
3	95,000 GOLDMAN SACHS BK USA 1/2/09 2.40%	PURCHASED	9/23/2008	1/02/2009
4	65,000 MERCANTILE BK MICH 1/2/09 2.30%	PURCHASED	9/23/2008	1/02/2009
5	95,000 COMMUNITY BUSINESS BK 1/5/09 2.25		37 207 2000	2, 02, 2005
·	20,000 001110111111111111111111111111111	PURCHASED	9/23/2008	1/05/2009
6	95,000 CIT BK 1/30/09 2.55%	PURCHASED	9/23/2008	1/30/2009
7	95,000 CARVER FED SVGS BK 3/26/09 2.85%	PURCHASED	9/23/2008	3/26/2009
8		85%	0, 00, 000	0, 20, 200
-	,	PURCHASED	9/23/2008	3/26/2009
9	95,000 COMMERICA BK 4/01/09 2.85%	PURCHASED	9/23/2008	4/01/2009
10	95,000 HANMI BK 3/30/09 2.85%	PURCHASED	9/23/2008	3/30/2009
11	68,000 SEATTLE SVGS BK 04/02/09 2.80%	PURCHASED	9/23/2008	4/02/2009
12	95,000 WACHOVIA BK FSB 3/30/09 2.85%	PURCHASED	9/23/2008	3/30/2009
13	95,000 CATHAY BK 4/3/09 2.80&	PURCHASED	9/23/2008	4/03/2009
14	95,000 FIRST NATL BK OMAHA 4/3/09	PURCHASED	9/23/2008	4/03/2009
15	240,000 AMERICAN EXPRESS FSB 10/01/09 .25%			
	•	PURCHASED	6/23/2009	10/01/2009
16	240,000 ALLY BK 9/30/09 0.30%	PURCHASED	6/23/2009	9/30/2009
	,			

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FEDERAL STATEMENTS

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CLIENT 1001

JANE S HEMAN FOUNDATION INC **C/O JOHN DAYRIES**

81-0526846

5/15/10

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STATEMENT 7 (CONTINUED) FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTMENT INCOME

ITEM		(A) DESCRI			AC	B) HOW COUIRED) DATE OUIRED _		DATE SOLD
17 18 19 20	240,000 BEA 240,000 PUI		30/09 30/09	.55% .50%	PU: PU:	RCHASED RCHASED RCHASED RCHASED	6/ 6/	723/2009 723/2009 723/2009 723/2009 723/2008	12, 12,	/02/2009 /30/2009 /30/2009 /31/2009
<u>ITEM</u>	(E) GROSS SALES	DEPREC. CO	G) OST SIS	(H) GAIN (LOSS)	(I) FMV <u>12/31/</u>	ADJ.		(K) EXCESS (I) - (J)	,	(L) GAIN (LOSS)
1	95,000. 95,000.	95	,000.	0.					\$	0.
2 3 4 5 6 7 8 9	95,000.		,000.	0.						0. 0.
4	65,000.	65	,000.	0.						0.
5	95,000.	95	,000.	0.						0.
6	95,000.	95	,000.	0.						0.
/	95,000.	95	,000.	0. 0.						0. 0.
å	57,000. 95,000.	37	,000. ,000.	0.						0. 0.
10	95,000.		,000.	0.						0.
11	68,000.		,000.	Ö.						0.
12	95,000.		,000.	0.						0.
13	95,000.		,000.	0.						0.
14	95,000.		,000.	0.						0.
15	240,000.		,000.	0.						0.
16	240,000.		,000.	0.						0.
17	240,000.		,000.	0.						0. 0.
18 19	240,000. 240,000.		,000. ,000.	0. 0.						0.
20	1,631.	240	0.	1,631.						1,631.
20	1,001.		٠.	1,001.				TOTAL	\$	1,631.

STATEMENT 8 FORM 990-PF, PART VII-A, LINE 10 SUBSTANTIAL CONTRIBUTORS DURING THE TAX YEAR

NAME OF SUBSTANTIAL CONTRIBUTOR

ADDRESS OF SUBSTANTIAL CONTRIBUTOR

JANE S. HEMAN ESTATE

401 401 DEARBORN AVE MISSOULA, MT 59801

STATEMENT 9 FORM 990-PF, PART XV, LINE 2A-D APPLICATION SUBMISSION INFORMATION

NAME OF GRANT PROGRAM:

NAME:

JANE S. HEMAN FOUNDATION

CARE OF:

TELEPHONE:

JOHN DAYRIES

STREET ADDRESS:

401 DEARBORN AVE

CITY, STATE, ZIP CODE:

MISSOULA, MT 59801

2009

FEDERAL STATEMENTS

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CLIENT 1001

JANE S HEMAN FOUNDATION INC C/O JOHN DAYRIES

81-0526846

5/15/10

09·47AM

STATEMENT 9 (CONTINUED)
FORM 990-PF, PART XV, LINE 2A-D
APPLICATION SUBMISSION INFORMATION

FORM AND CONTENT: SUBMISSION DEADLINES: RESTRICTIONS ON AWARDS:

GRANTS ARE MADE TO BENEFIT THE RESIDENTS OF WESTERN MONTANA (THAT AREA OF MONTANA WEST OF THE CONTINETAL DIVIDE) IN THE AREA OF EDUCATION AND TO ALLEVIATE THE SUFFERING OF INDIVIDUALS AFFLICTED BY DISEASE AND THE ASSISTANCE AND RELIEF OF THE ELDERLY.

Form **8868** (Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury Internal Revenue Service

File a separate application for each return.

If you are	e filing for an Automatic 3-Month	Extension, complete only Part I and chec	ck this box			► [X]		
_		omatic) 3-Month Extension, complete on			•			
		dy been granted an automatic 3-month e			ed Form 8868			
Part I	Automatic 3-Month Extens	ion of Time. Only submit original	(no copies ne	eded).				
A corporation	n required to file Form 990-T and	requesting an automatic 6-month extensi	on - check this t	oox and co	mplete Part I	only. ►		
All other corp income tax r		, partnerships, REMICS, and trusts must	use Form 7004 to	request a	an extension (of time to file		
the additiona Form 990-T.	iling (e-file). Generally, you can e il below (6 months for a corporation il (not automatic) 3-month extens instead, you must submit the full int www.irs.gov/efile and click on e	lectronically file Form 8868 if you want a 3 on required to file Form 990-T). However, ion or (2) you file Forms 990-BL, 6069, or y completed and signed page 2 (Part II) of e-file for Charities & Nonprofits.	3-month automat you cannot file F · 8870, group retu of Form 8868. For	ic extension form 8868 irns, or a c more deta	on of time to f electronically composite or c ails on the ele	ile one of the if (1) you want consolidated ectronic filing of		
	Name of Exempt Organization	E	mployer identific	ation number				
Type or	JANE S HEMAN FOUNDAT	I						
print	C/O JOHN DAYRIES	81-0526846						
File by the due date for	Number, street, and room or suite number							
filing your return, See	401 DEARBORN AVE							
Instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions							
	MISSOULA, MT 59801							
	of return to be filed (file a separal	e application for each return).	_					
Form 990		Form 990-T (corporation)						
Form 990	·	Form 990-T (section 401(a) or 408(a) tr	orm 5227					
Form 990		Form 990-T (trust other than above)	orm 6069					
X Form 990)-PF	Form 1041-A		orm 8870	8870			
Telephone If the orga	No. ► (406) -363-2820 anization does not have an office	OLPH ALFORD, CPA FAX No. ► or place of business in the United States inization's four digit Group Exemption Nui	, check this box.		Is is for the w	rhole group.		
		ne group, check this box						
the extens	sion will cover.							
1 I reques	st an automatic 3-month (6 month	is for a corporation required to file Form S	990-T) extension	of time				
	8/15, 20 _10, to file ension is for the organization's re	the exempt organization return for the org turn for:	ganization named	above.				
► X	calendar year 20 09 or							
▶ □	tax year beginning	, 20, and ending	, 20					
		, check reason: Initial return		Cha	inge in accou	nting period		
3a If this a	pplication is for Form 990-BL, 990 ndable credits. See instructions.	D-PF, 990-T, 4720, or 6059, enter the tent	ative tax, less an	y 	3a \$	1,262.		
b If this apmade. In	pplication is for Form 990-PF or 9 nclude any prior year overpaymei	90-T, enter any refundable credits and es nt allowed as a credit	stimated tax payn		3ь\$	800.		
deposit	with FTD coupon or, if required, I	la. Include your payment with this form, one of the state	or, if required, Payment System)		3c \$	462.		
Caution. If yo payment instr	u are going to make an electronicuctions.	c fund withdrawal with this Form 8868, se	e Form 8453-EO	and Form	8879-EO for			
BAA For Priv	racy Act and Paperwork Reduction	on Act Notice, see instructions			Form 886	8 (Rev. 4-2009)		