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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

	nal Revenue Service Note The foundation may	be able to use a copy of this	return to satisfy state rep	orting requirements.	
		19, 2010	, and ending	DEC 31, 2010	-
_	Check all that apply: X Initial return		ormer public charity	Final return	
_	Amended return	Address chan	· · · · ·	Name change	
an	me of foundation		<u> </u>	A Employer identification r	number
				,	
	LEE AND DONNA METCALF	' CHARITABLE	TRUST	27-6298924	
Jum	mber and street (or P O box number if mail is not delivered to street		Room/suite	B Telephone number	
	P.O. BOX 1241			406-442-867	70
 Citv	y or town, state, and ZIP code		-	C If exemption application is per	
	HELENA, MT 59624			D 1. Foreign organizations,	_
С	Check type of organization: X Section 501(c)(3) ex	kempt private foundation		Foreign organizations meet check here and attach com	ing the 85% test,
		Other taxable private founda	atron	E If private foundation statu	
Fai	air market value of all assets at end of year J Account		Accrual	under section 507(b)(1)(
(fro	rom Part II, col. (c), line 16)	ther (specify)		F If the foundation is in a 60)-month termination
>	\$ 200,000. (Part I, colu	mn (d) must be on cash i	basis.)	under section 507(b)(1)(i	
Pa	art Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	202,752.			
	2 Check 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 ECEIVED				
	Net rental-income-or-(loss)				
اه	6a Net gain or (loss) from sale of assets not on line 10				
Ž۱	6a Net gain or (loss) from sale of assets not on line to Grossaales price for all (',') ,' (') ,'				
Revenue	7 Capital gain net income (from Part (V, line 2)		0	•	
<u>«</u>	8 Net short-term capital-gain,				
	9 Income modifications				
ı	Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income				<u>-</u>
\dashv	12 Total. Add lines 1 through 11	202,752.	0	-	
	13 Compensation of officers, directors, trustees, etc	0.	0	0.	0
	14 Other employee salaries and wages				
s	15 Pension plans, employee benefits				
ses	16a Legal fees				
per	b Accounting fees				
ŭ	c Other professional fees				
and Administrative Expens	17 Interest				
tra	18 Taxes				
izi	19 Depreciation and depletion				
튀	20 Occupancy				
۲p	21 Travel, conferences, and meetings		<u>.</u>		
a	22 Printing and publications	0.550			0.150
ing	23 Other expenses STMT 1	2,752.	0	0.	2,150
ă	24 Total operating and administrative	0.550	•		0 150
Operating	expenses. Add lines 13 through 23	2,752.	0	0.	2,150
	25 Contributions, grits, grants paid	0.		 	0
	26 Total expenses and disbursements	0 550	•		0 4 = 0
\dashv	Add lines 24 and 25	2,752.	0	0.	2,150
	27 Subtract line 26 from line 12:	000 000			
	a Excess of revenue over expenses and disbursements	200,000.		+	
	b Net investment income (if negative, enter -0-)		0	-	
	C Adjusted net income (if negative, enter -0-) O1 7-10 LHA For Paperwork Reduction Act Notice, see			0.	Form 990-PF (2010

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$\overline{}$	Table to the first of the first of the Co.		Т	···-
1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30		1	
	(must agree with end-of-year figure reported on prior year's return)	1		0.
2	Enter amount from Part I, line 27a	2	Ι	200,000.
3	Other increases not included in line 2 (itemize)	3		0.
4	Add lines 1, 2, and 3	4		200,000.
5	Decreases not included in line 2 (itemize) ▶	5		0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6		200,000.

Part IV Ca	pital Gains and L	osses for Tax on In	vestmen	t Income					
	(a) List and describe the 2-story brick warehous	kınd(s) of property sold (e.g. e; or common stock, 200 shs	, real estate, . MLC Co.)		(b)	How acquired - Purchase - Donation	(c) Da (mo	ate acquired ., day, yr.)	(d) Date sold (mo., day, yr.)
1a		-				•			
b	NONE				<u> </u>				
_c									
<u>d</u>									
е	<u> </u>				Т-				<u> </u>
(e) Gross s	ales price (1) Depreciation allowed (or allowable)		st or other basis expense of sale) Gain or (loss plus (f) minus	
_a									
<u>b</u>						.			·
<u>C</u>				_					
<u>d</u>									· · · · · · · · · · · · · · · · · · ·
Complete only	for assets showing gain i	n column (h) and owned by t	the foundation	n on 12/31/69			(I) Gains	(Col. (h) gain	minus
- Complete only	lot decote offerming games	(j) Adjusted basis		cess of col. (1)		(ol. (k), b	ut not less tha	n -0-) or
(i) F.M.V. as	of 12/31/69	as of 12/31/69		col. (j), if any			Loss	ses (from col. ((h))
a									
b									
C									
d								-	
е									
2 Capital gain net	income or (net capital los	(ss) If gain, also enter	ın Part I, lıne - ın Part I, lıne	7 : 7	}	2			
3 Net short-term	capital gain or (loss) as di	efined in sections 1222(5) an							
	er in Part I, line 8, column		· · · (0).		J				
	0- ın Part I, line 8			· · · · · · · · · · · · · · · · · · ·		3			
Part V Qu	alification Under	Section 4940(e) for	Reduced	lax on Net	t Inv	estment li	ncome	•	
(For optional use by	y domestic private founda	ations subject to the section 4	1940(a) tax or	n net investment ii	ncom	e.)			N/A
If section 4940(d)(2) applies, leave this part	blank.							
• • •				Ab b					Yes No
		12 tax on the distributable am		•	rioaz				☐ Yes ☐ No
		er section 4940(e). Do not co lumn for each year; see instri			ies.				_
	(a) period years	(b)		Thaking any one	(c)				(d) oution ratio
Base Calendar year (o	periód years ir tax year beginning in)	Adjusted qualifying dis	tributions	Net value of no		ritable-use asse	ets	Distrit (col. (b) div	oution ratio vided by col. (c))
	2009							`` `	
	2008								
	2007								
	2006								
	2005								
2 Total of line 1, o	column (d)							!	
3 Average distribu	ution ratio for the 5-year t	ase period - divide the total o	on line 2 by 5,	or by the number	r of ye	ears			
the foundation t	has been in existence if le	ss than 5 years						<u> </u>	
4 Enter the net va	lue of noncharitable-use	assets for 2010 from Part X,	line 5					}	
5 Multiply line 4 b	y line 3						5	j	
		5B (11 051)					1.		
6 Enter 1% of net	investment income (1%	of Part I, line 27b)					6		
7 Add been 5 cell	C							,	
7 Add lines 5 and	O						-7		
	distributions from Part X							3	
		check the box in Part VI, line	1b, and comp	plete that part usin	ng a 1	% tax rate.			
See the Part VI	INSTRUCTIONS.								

	990-PF (2010) LEE AND DONNA METCALF CHARITABLE tVI Excise Tax Based on Investment Income (Section 4940(a),	TRUST 4940(b), 494	0(e) or 4		6298			Page 4
	exempt operating foundations described in section 4940(d)(2), check here and enter "N.)		T			
	Date of ruling or determination letter:		\					
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here		'	1				0.
	of Part I, line 27b							 -
C A	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Pai	rt I, line 12, col. (b). J					
	Fax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others e		•	2				0.
3	Add lines 1 and 2			3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others ϵ	enter -0-)		4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5				0.
6	Credits/Payments;							
a :	2010 estimated tax payments and 2009 overpayment credited to 2010 6a							
b l	exempt foreign organizations - tax withheld at source							
c ·	Fax paid with application for extension of time to file (Form 8868) 6c							
d l	Backup withholding erroneously withheld 6d			_				
7	Total credits and payments. Add lines 6a through 6d			7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			8				
9 .	Fax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		>	9				0.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	,	•	10				
	Enter the amount of line 10 to be: Credited to 2011 estimated tax	Re	funded	11				
Par	t VII-A Statements Regarding Activities					<u>, - </u>		
1a i	During the tax year, did the foundation attempt to influence any national, state, or local legislation (or did it participate	or intervene	: in			Yes	No
;	any political campaign?					1a		X
b i	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (se	ee instructions for	definition)?			1b		X
	f the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copi	es of any materia	als publishe	d or				
	distributed by the foundation in connection with the activities							
c l	Did the foundation file Form 1120-POL for this year?					10		X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:							
	(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$		0.	-				
e l	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure ta	ıx ımposed on foui	ndation					
	managers. ▶ \$0 .					Ì		
2	las the foundation engaged in any activities that have not previously been reported to the IRS?					2		X
- 1	f "Yes," attach a detailed description of the activities.							
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrum	nent, articles of inc	orporation, o	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes					3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?					4a		<u> </u>
b	f "Yes," has it filed a tax return on Form 990-T for this year?			N	I/A	4b		
	Nas there a liquidation, termination, dissolution, or substantial contraction during the year?					5		X
	f "Yes," attach the statement required by General Instruction T							
	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 are stated in the control of the contro	tions that conflict	with the state	e law				
	remain in the governing instrument?					6		X
	Oid the foundation have at least \$5,000 in assets at any time during the year?					7	X	
	f "Yes," complete Part II, col (c), and Part XV.							
8a I	Enter the states to which the foundation reports or with which it is registered (see instructions)	NONE_						
		0	1-1					
	f the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney	y General (or desig	nate)			۱.,	7.5	
	of each state as required by General Instruction G? If "No," attach explanation	10.40(.)(0) == 40.40	(AVE) 4 1			8b	<u> </u>	_
	s the foundation claiming status as a private operating foundation within the meaning of section 4		(J)(5) for cale	mar				v
	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? <i>If "Yes," comple</i> Did any persons become substantial contributors during the tax year? it "Yes," attach a schedule listor			тмт	1 2	10	v	<u> </u>

orm 990-PF (2010) LEE AND DONNA METCALF CH	ARITABLE TRUS		27-62989	24 Page	6
 Part VII-B Statements Regarding Activities for Which II 5a During the year did the foundation pay or incur any amount to: Carry on propaganda, or otherwise attempt to influence legislation (section 2). Influence the outcome of any specific public election (see section 4955); of any voter registration drive? Provide a grant to an individual for travel, study, or other similar purposes. Provide a grant to an organization other than a charitable, etc., organization 509(a)(1), (2), or (3), or section 4940(d)(2)? Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals? If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance (see instructions of the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945. 	n 4945(e))? or to carry on, directly or indirectly or educational purposes, or for the exceptions described in the exceptions described in the exceptions of the exception of the exc	ectly, Ye Ye Ye Ye Tor Ye In Regulations	es X No es X No es X No es X No	5b	_
 6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a pif "Yes" to 6b, file Form 8870. 7a At any time during the tax year, was the foundation a party to a prohibited tax series. 	ersonal benefit contract?		es X No	6b X	
b If "Yes," did the foundation receive any proceeds or have any net income attribu	table to the transaction?		N/A	7b	_
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	inagers, Highly	<i>/</i>		
List all officers, directors, trustees, foundation managers and their		14.00	(4) 0		_
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, othe allowances	91
	TRUSTEE				
P.O. BOX 1241 IELENA, MT 59624	1.00	0.	0.	0	
					_
Compensation of five highest-paid employees (other than those inc		enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, othe allowances	ŧ۲
NONE	devoted to position		compensation	allowances	_
					_ _ _
otal number of other employees paid over \$50,000					ი

0.

Total. Add lines 1 through 3

F	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, se	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a		1a	0.
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets	1c	200,000.
d	Total (add lines 1a, b, and c)	1d	200,000.
е			
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	200,000.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	3,000.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	197,000.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	351.
F	part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	351.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	351.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	351.
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	351.
F	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	2,150. 0.
b	Program-related investments - total from Part IX-B	1b	0.
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:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	2,150.
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	2,150.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies for th	e section

4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
1 Distributable amount for 2010 from Part XI,	·			
line 7				351.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			_ 0.	
b Total for prior years:				
, ,		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
b From 2006				
c From 2007				
d From 2008				
e From 2009				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2010 from	•			
Part XII, line 4: ►\$ 2,150.				
a Applied to 2009, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount	<u> </u>			351.
e Remaining amount distributed out of corpus	1,799.	· · · · · · · · · · · · · · · · · · ·		331.
5 Excess distributions carryover applied to 2010	0.			0.
(if an amount appears in column (d), the same amount	0.			
must be shown in column (a)) 6 Enter the net total of each column as indicated below:				
	1,799.			
Corpus Add lines 3f, 4c, and 4e Subtract line 5 Prior years' undistributed income. Subtract	1,100.			<u>-</u>
line 4b from line 2b		0.		
c Enter the amount of prior years'		0.		_
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	· <u></u>			
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line			""	_
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				0.
7 Amounts treated as distributions out of		** *		
corpus to satisfy requirements imposed by			u.	
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005	*			" "
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	1,799.			
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007	ļ			
c Excess from 2008	1			
d Excess from 2009				
e Excess from 2010 1,799.				
\$ EXCUSS ITOM ESTO			1	Form 990-PF (2010)

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		ALF CHARITA			198924 Page 10
Part XIV Private Operating F		·	-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for	•		▶ [
b Check box to indicate whether the found		ng foundation described i		4942(j)(3) or 49	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year	(1) 0000	Prior 3 years	(4) 0007	(-) 7-4-1
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a				<u> </u>	
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					<u> </u>
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:	ļ				
(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)		ı			
(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 Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or m	ore in assets
at any time during t					
1 Information Regarding Foundatio	n Managers:		<u>.</u> .		
a List any managers of the foundation who	o have contributed more	than 2% of the total conti	ributions received by the	foundation before the clo	se of any tax
year (but only if they have contributed in	iore than \$5,000). (See s	ection 507(d)(2).)			
NONE					
b List any managers of the foundation wh			or an equally large porti	on of the ownership of a p	artnership or
other entity) of which the foundation has	a 10% or greater interes	st.			
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here $ ightharpoonup$ if the foundation o	•	•	•		
the foundation makes gifts, grants, etc.	(see instructions) to indiv	viduals or organizations u	nder other conditions, c	omplete items 2a, b, c, and	d d.
a The name, address, and telephone number	per of the person to whor	n applications should be	addressed:		
b The form in which applications should b	e submitted and informat	tion and materials they sh	iould include:		
		·			
c Any submission deadlines:					
4 Any restrictions or limitations on available	ough as by assarantics	al arose, obsertable fields	kinds of institutions or	other factors:	
d Any restrictions or limitations on awards	, such as by geographica	ai areas, charitadie lielos,	kinus of histitutions, of t	טנווסו ומטנטוס.	
023601 12-07-10					Form 990-PF (2010)

Part XV Supplementary informa		Da		
3 Grants and Contributions Paid During Recipient	If recipient is an individual	Payment	1	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	Of Substantial Contributor	recipient		
a raid during the year				
NONE				
	·			
		İ		
T. 1. 1			▶ 3a	 <u>-</u>
Total b Approved for future payment		<u> </u>	▶ 3a	
a reproved to retare payment				
27027				
NONE				
Total		<u>l</u>	▶ 3b	(
10tar 1811 12-07-10			For	m 990-PF (20

Part XVI-A Analysis of Income-Production Enter gross amounts unless otherwise indicated. 1 Program service revenue:	Unrelated (a) Business	business income	T 5		
•				y section 512, 513, or 514	(e)
1 Program service revenue:		(b)	(c) Exclu-	(d)	Related or exempt
	l code l	Amount	sion code	Amount	function income
a					
b					
С	1 1				
d					
е					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					<u> </u>
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					-
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory		· · · ·			
11 Other revenue:					
a					
b					
С					
d	l i				
e					
12 Subtotal. Add columns (b), (d), and (e)		O).	0.	0.
13 Total. Add line 12, columns (b), (d), and (e)			_	13	0.
(See worksheet in line 13 instructions to verify calculations.)				
Part XVI-B Relationship of Activities		anliahmant af l	Evamat D	urnosos	
rait Avi-b Relationship of Activities	s to the Accom	ipiisiinent or i	Exemple	urposes	
Line No. Explain below how each activity for which in	come is reported in	column (e) of Part XVI	I-A contributed	Importantly to the accom	plishment of
▼ the foundation's exempt purposes (other th	an by providing fund	s for such purposes).			

023621 12-07-10

Form 990 Part X				CHARITABLE		27-629 nships With Noncha			ge 13
Fait	Exempt Organ		isiers to ai	iu mansactions a		Histilips With Noticile			
1 Did	the organization directly or indi	rectly engage in any	of the following	with any other organizati	on described in :	section 501(c) of		Yes	No
	Code (other than section 501(c				nizations?				
a Tran	sfers from the reporting found	ation to a noncharit	able exempt orga	inization of:					
(1)	Cash						1a(1)	ļ	<u> </u>
• •	Other assets						1a(2)		X
	r transactions:								
٠,	Sales of assets to a noncharita						1b(1)		X
	Purchases of assets from a no		organization				1b(2)		X
	Rental of facilities, equipment,						1b(3)		X
` '	Reimbursement arrangements	,					1b(4)		X
	Loans or loan guarantees Performance of services or me	mharchin ar fundra	ucina colicitation	n			1b(5) 1b(6)		X
٠,,	renormance or services or me ring of facilities, equipment, ma	•	_				10(0)		X
	e answer to any of the above is				wave show the f	air market value of the goods		LLLLI Sets	21
	ervices given by the reporting f							,	
	mn (d) the value of the goods,			Tool man fall market var	ao in any manoai	and the state of t			
(a) Line no	(b) Amount involved	, <u> </u>		exempt organization	(d) Descri	ption of transfers, transactions, and	sharing ar	rangeme	nts
			N/A						
						<u> </u>			
	_								
					_				
									
	-								-
	-					•			
2a le th	e foundation directly or indirec	tly affiliated with or	related to one o	r more tay-eyemot organ	l Izatione describe	nd .			
	ection 501(c) of the Code (othe	-	•	• •	24110113 4630115	Γ	Yes	X	No
	es," complete the following sch		o)(o)) o ooo			_			
	(a) Name of org			(b) Type of organization		(c) Description of relations	ship		
	N/A								
	under penalties of perjury, Lidectar and complete Declaration of prepa					to the best of my knowledge and be nowledge	olief, it is tr	ue, corre	ct,
Sign Here	\ v /	/)	• •	1 2/22	13	TRUSTRA			
пете	Signature of officer or to			Die /	<u>''</u>				
	Print/Type preparer's na		Preparer's sign	Datte /	Date	Title			
	Tring Type preparer 6 116		i Toparei S Siyi	1/11	Date	self- employed			
Paid	CINDY A. U	₩₽₽₽₽₩₽	CINDY A	. UTTERBAC	02/14/1				
Prepa				I & CO., P.C		Firm's EIN ▶			
Hee O	mbe					1			

406-442-1040

Firm's address ▶ P.O. BOX 1040

HELENA, MT 59624

Phone no.

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

LEE AND DONNA METCALF CHARITABLE TRUST

OMB No 1545-0047

2010

Name of the organization

Employer identification number

27-6298924

Organization type (check one): Section: Filers of: 501(c)(Form 990 or 990-EZ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II. For 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 exclusively 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 contributor, during the year, contributions for use exclusively 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 exclusively 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 ▶ \$ 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 its 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).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2010)

Employer identification number

LEE AND DONNA METCALF CHARITABLE TRUST

27-6298924

Part I	Contributors (see instructions)		
(a) No.	(b) Name, <u>address, and</u> ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	P.O. BOX 1241 HELENA, MT 59624	\$\$\$	Person Payroll Noncash X (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	P.O. BOX 1241 HELENA, MT 59624	\$2,752.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(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) No.	(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) No.	(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) No.	(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)
023452 12-2	3-10	Schedule B (Form	990, 990-EZ, or 990-PF) (2010)

Employer identification number

LEE AND DONNA METCALF CHARITABLE TRUST

27-6298924

Part II	Noncash Property (see instructions)		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	RESIDENCE IN HELENA, MT (TOWNSHIP 10 N, RANGE 3 W, MPM, SECTION 29: LOT 11, BLOCK 2, FLOWEREE ADN)	\$\$	12/19/10
(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
023453 12-23	3-10	\$Schedule B (Form 9	90, 990-EZ, or 990-PF) (2010)

Employer identification number Name of organization 27-6298924 LEE AND DONNA METCALF CHARITABLE TRUST Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating Part III more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once See instructions) > \$ (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

OTHER EXPENSES		STATEMENT 1	
(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
2,150. 602.	0.	0.	2,150.
2,752.	0.	0.	2,150.
		S S T	CATEMENT 2
	(A) EXPENSES PER BOOKS 2,150. 602. 2,752. F SUBSTANTIA PART VII-A,	(A) (B) EXPENSES NET INVEST- MENT INCOME 2,150. 0. 602. 0. 2,752. 0.	(A) (B) (C) EXPENSES NET INVEST- ADJUSTED PER BOOKS MENT INCOME NET INCOME 2,150. 0. 0. 602. 0. 0. 2,752. 0. 0. SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10

PO BOX 1241

HELENA, MT 59624

ESTATE OF DONNA METCALF