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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

2010

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

For cal	endar	year 2010, or ta	x year beginniı	ng		, 2010,	and ending			,		
G Che	eck all	that apply:	Initial return	Initia	al Return o	of a former p	ublic charity_				Ein	al return
			Amended retu	ırn		Address of	hange	Nam				
										Employer identi		mber
		SON CEDERE		ATTON				Į.		81-0477		
		LAND PARK , MT 59102						- ['	В -	Telephone numb	er (see the	instructions)
חדות	TNGS	, MI 33102	•					- H		ı <i>t</i>		
										ir exemption ap Foreign organiza		pending, check here
H C	heck t	ype of organiza	tion: X Sec	tion 501	(c)(3) ever	mpt private f	nundation					ting the 85% test, check
Ĭ		tion 4947(a)(1)						ation				on
1 Fa		et value of all assets			ounting me			crual	E !	If private founda under section 5	ation statu	s was terminated
(1	from Pai	t II, column (c), lıne	16)		Other (specifi	y)		1), clieck liefe
<u>►\$</u>			772	(Part I,	column (a	l) must be or	cash basis ,), check here ▶
Parte		alysis of Re			(a) Rev	enue and	(b) Net inv	estmen	ıt	(c) Adjuste	d net	(d) Disbursements
	EX CO	penses (The lumns (b), (c), a	total of amount and (d) mav not	s in neces-	expenses	s per books	incor	me		ıncom		for charitable
	sai	uly equal the an	nounts ın colum	n (a)					1			purposes (cash basis only)
20%	(se	e the instruction		(att cob)	-		SHAP III YELL		and Res	有点有限的表示 。	g. 741,17 (F. 15	
2	2		oundn is not req to a						- mp my///			
V≔ 3		Interest on savi	ings and tempo	rarv	MANAGE STREET, CO.	Considerate principality	Christoff C Consolinate at					
6 0	١.	cash investmen				2,847.		2,84			<u>,847.</u>	
N N		Dividends and inter Gross rents	est from securities.	• • • • •		9,282.		9,282	- 	9	,282.	
=		Net rental income or (loss)		• • •				E Parket				
₽ R		Net gain/(loss) from	sale of assets not or	line 10	Parent - Constitution and	18,552.						
SCANNED	b	Gross sales price for assets on line 6a	rall 254	,251.				New York	12			
茎Ě	7 Capital gain net income (from Part IV, line 2) . 8 Net short-term capital gain 9 Income modifications							.8,55	2.			
S N									SOUTH TO SERVICE STATE OF THE	1	<u>,143.</u>	
Ŵ E	102	Gross sales less returns and	tations									
		allowances .									接通道	建金属的
	b	Less Cost of goods sold										
	c Gross profit/(li		(att sch)					MAN IN				
	11	Other income ((attach schedule	e)								
	122	Total Add line	o 1 through 11			20 (01	<u>_</u>	0 60	-		070	
	12		s 1 through 11.			30,681.		30,68	┸-┼-	13	,272.	
	14	• • • • • • •	laries and wages									
	15	Pension plans,	employee bene	efits .								
A		Legal fees (attach s				140.		14			140.	
Ņ D	[Accounting fees (at	ttach sch) SEE	ST2	ļ	1,160.		1,16		1	,160.	
Ņ		Other prof fees (at	· · · · · · · · · · · · · · · · · · ·			1,341.		1,34	1.	1	,341.	
O I P S E T R R		Taxes (attach schedule)	FCEIVED	ETIM (269.			-			
ŘŔ		Depreciation (a	attach			209.	 -		+			
A A		sch) and denle	tion	&								
N V G E		Occupancy!!	JN 1.3.2011	Ö	<u></u>		<u> </u>		+			
	1 21	Printing and pu	ences, and mee	g> Œ					+			
A E N X D P	23	Other expense	s (attach sched	ule)					\dashv			
Ë												
S E S	1 24	Total operating	g and administ	rative		2 010		2 (4	,	,	C 4.1	
S	25	Contributions gifts	Tlines 13 through, grants paid PAR	an∠o TXV		2,910. 14,750.	同些重要更加	2,64			,641.	14,750.
	26		s and disburse			14, 150.	N'34'	No resident designations		CARSINE MANAGEMENT (1994)	1.7 - 2.12 - 1.12 - 1.	14,750.
		Add lines 24 a	nd 25		1000, 10 10. A 100 at 1 a	17,660.	Bipagiti bilandimen	2,64	1.	2	,641.	14,750.
	27			ncoc								
	'	Excess of reve and disbursen	nents	1363		13,021.						公共
	1	Net investment inc	ome (if negative, ent	er -0-).				28,04				
	_	Adjusted net incom									,631.	
BAA	For Pa	perwork Reduc	tion Act Notice	, see the	e instructio	ons.		•	TEEA0	504L 07/23/10		Form 990-PF (2010)

Form	990-F	PF (2010) DRU ALLISON CEDERBERG FOUNDATION			77622 Page 2
Date	1135	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End	of year
ir ar u	îitæl r	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash — non-interest-bearing			
	2	Savings and temporary cash investments	14,776.	61,974	61,974.
	3	Accounts receivable			
1		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		Less: allowance for doubtful accounts ▶			
A S E T	8	Inventories for sale or use			
Ě	9	Prepaid expenses and deferred charges			<u> </u>
S	-	Investments – U.S. and state government			
٠	102	obligations (attach schedule)		1	
	Ł	Investments — corporate stock (attach schedule)STATEMENT 5	198,715.	92,001	. 98,800.
1		Investments — corporate bonds (attach schedule)			1
		Investments — land, buildings, and equipment: basis			
		Less: accumulated depreciation (attach schedule)	diselection of the second		
	12	Investments – mortgage loans			
	13	Investments – other (attach schedule) STATEMENT 6	65,000.	137,537	. 142,998.
	14	Land, buildings, and equipment: basis.			
	1-4	Less: accumulated depreciation		to the fact that the fact of the second second	in the second conference of the second confere
		(attach schedule)			
	15				
		Total assets (to be completed by all filers -			
		see instructions. Also, see page 1, item l)	278,491.	291,512	. 303,772.
Ļ	17	Accounts payable and accrued expenses			
À	18	Grants payable			
Ŗ	19	Deferred revenue			
Ľ	20	Loans from officers, directors, trustees, & other disqualified persons			
Ţ	21	Mortgages and other notes payable (attach schedule)			
1	22	Other liabilities (describe)	_	
Ė S	23	Total liabilities (add lines 17 through 22)	0.	0	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			美国人的
	ŀ	and complete lines 24 through 26 and lines 30 and 31.	1		
NF	24	Unrestricted			
ΕÜ	25	Temporarily restricted			
D	26	Permanently restricted		·-	
A B S A E A		Foundations that do not follow SFAS 117, check here. > X and complete lines 27 through 31.	<u> </u>		
ĔÎ	27	Capital stock, trust principal, or current funds	278,491.	291,512	
T A S N	l		270,431.	231,312	
С	28		·		
O E R S	29		070 401	001 510	_
к 5	30		278,491.	291,512	
	31	Total liabilities and net assets/fund balances (see the instructions)	278,491.	291,512	
Par	tělik	Analysis of Changes in Net Assets or Fund Balance			
	Tota	al net assets or fund balances at beginning of year - Part II, col		agree with	278,491.
2		07	• • • • •	2	
2 3		r increases not included in line 2 (itemize)		2	
3 4				<u>3</u>	
5		eases not included in line 2 (itemize)			
_		al net assets or fund balances at end of year (line 4 minus line 5	5) - Part II column (h)	 -	
U	1010	ar net assets or runa pararices at end or year (inte 4 minus line t	<i>,</i> , anc ii, colulliii (0),	mic Ju 0	434,314.

(a) List and describ	e the kind(s) of property sold (e.g., rese; or common stock, 200 shares ML	eal estate,	(b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a SEE STATEMENT 7		· · · · · · · · · · · · · · · · · · ·	D — Donation		
b					
c			 		
d					·
e					
(e) Gross sales price	(f) Deprectation allowed (or allowable)	(g) Cost or other bas plus expense of sal		(h) Gain or (e) plus (f) m	(loss) inus (g)
a		· - · · · · · · · · · · · · · · · · · ·			
b					
С					
d				 	
e					
	ving gain in column (h) and owned by			(I) Gains (Col	umn (h)
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column over column (j), if a		ain minus column (l an -0-) or Losses (fi	
а					
b					<u>-</u>
<u> </u>					
d					
e				1	
2 Capital gain net income or (no3 Net short-term capital gain or	et capital loss). If gain, also If (loss), en (loss) as defined in sections 1222(5)	enter in Part I, line 7 ter -0- in Part I, line 7	. 2		18,552.
If gain, also enter in Part I, Iir	ne 8, column (c) (see the instructions)	· · · · · · · · · · · · · · · · · · ·	. 3		1,143.
In Part I, line 8	er Section 4940(e) for Reduce	d Tay on Net Investm		l	1,143.
	te foundations subject to the section			N/A	
	this part blank. ection 4942 tax on the distributable an alify under section 4940(e). Do not co	• •	se period?.	Yes	☐ No
	in each column for each year; see the		n any entries.		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use as		(d) Distribution umn (b) divided	
2009					
2008					<u>_</u>
2007					
2006					-
2005			İ		
2 Total of line 1, column (d)			2		_
3 Average distribution ratio for number of years the foundation	the 5-year base period — divide the to on has been in existence if less than	otal on line 2 by 5, or by the 5 years	. 3		_
4 Enter the net value of noncha	arıtable-use assets for 2010 from Part	X, line 5	. 4		
5 Multiply line 4 by line 3			5		
6 Enter 1% of net investment in	ncome (1% of Part I, line 27b)		. 6		
7 Add lines 5 and 6 .			7		-
8 Enter qualifying distributions	from Part XII, line 4		8		
Part VI instructions.	r than line 7, check the box in Part VI	line 1b, and complete that	part using a 19	 _	
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Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names

and addresses

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Form	990-PF (2010) DRU ALLISON CEDERBERG FOUNDATION	81-047762	2	Page 5
Par	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	(
14	The books are in care of ► ROBERT A. EVERSON, CPA Located at ► 550 N31ST STE 220, TWIII, BILLINGS, MT ZIP + 4 ►	no. ► 406-25 59101	9-340	0
16	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here.		.N/A .	- <u>-</u>
15	and enter the amount of tax-exempt interest received or accrued during the year	1 1		N/A
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other aubank, securities, or other financial account in a foreign country?	thority over a	16 Ye	S No
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If 'Yes,' enter the na foreign country ►	me of the		
Par	能划提图 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	s No
18	a During the year did the foundation (either directly or indirectly):		Ø-57 III	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	Yes X No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	Yes X No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	Yes X No		
	(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 XNo		
١	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 instruction	ns)?	1 b	N/A
	Organizations relying on a current notice regarding disaster assistance check here	▶ 🔲		表 医线
	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 2010?		1 c	X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
	a At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010?	Yes X No		
	b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942((relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a all years listed, answer 'No' and attach statement — see the instructions)	a)(2) to	2 b	N/A
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years h			
	► 20 , 20 , 20 , 20			
3	a 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 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2010.)	i	3Ь	N/A
4	a 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 2010?.		4b	X
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Form 990-PF (2010) DRU ALLISON CEDERB		4700 M D D	81-047	77622 Page 6
Part WILB Statements Regarding Activitie		4/20 May Be Requ	uired (continued)	
5a During the year did the foundation pay or incur (1) Carry on propaganda, or otherwise attemp	=	n (continu 404E(n))2	Yes X	
• • • • • • • • • • • • • • • • • • • •			Yes X	NO I
(2) Influence the outcome of any specific publ on, directly or indirectly, any voter registra	ic election (see section	4955); or to carry	Yes X	No.
(3) Provide a grant to an individual for travel,			Yes X	
,,,		•		
(4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section	ian a charitable, etc, or 4940(d)(2)? (see instru	ganization described ictions)	Yes X	No
(5) Provide for any purpose other than religious educational purposes, or for the prevention	us, charitable, scientific n of cruelty to children	, literary, or or or animals?.	Yes X	No
b If any answer is 'Yes' to 5a(1)-(5), did any of to described in Regulations section 53.4945 or in (see instructions)?	he transactions fail to da current notice regard	ling disaster assistance	tions	5b N/A
Organizations relying on a current notice regain			▶ 🗍	
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure responsing the statement required by Regulary 1.	sibility for the grant?		N/A Yes	No
6a Did the foundation, during the year, receive ar on a personal benefit contract?	ny funds, directly or ind	rectly, to pay premiums	S ∏Yes X	No la
b Did the foundation, during the year, pay premi	ums, directly or indirec	tly, on a personal bene	fit contract?	6b X
If 'Yes' to 6b, file Form 8870.				
7a At any time during the tax year, was the found	lation a party to a proh	ibited tax shelter transa	ction? Yes X	No Maria
b If yes, did the foundation receive any proceed				7b
Part VIII Information About Officers, Di	rectors, Trustees,	Foundation Manag	gers, Highly Paid E	mployees,
and Contractors				 .
1 List all officers, directors, trustees, foundation	n managers and their	compensation (see inst	ructions).	
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
DRU ALLISON CEDERBERG	PRESIDENT	0.	0.	0.
620 HIGHLAND PARK DRIVE	0			
BILLINGS, MT 59102				
TIMOTHY SCHRUTH	SECRETARY	0.	0.	0.
401 NORTH 31ST STE 1700	0			
BILLINGS, MT 59101				
TIMOTHY P. SCHRUTH	TREASURER	0.	0.	0.
401 N. 31ST STE 1700	0	Ŭ.	· ·	
BILLINGS, MT 59101	~			
ROBERT A. EVERSON, CPA	DIRECTOR	0.	0.	0.
550 N. 31ST STE 220 TWIII	0			0.
BILLINGS, MT 59101	Ů			
2 Compensation of five highest-paid employee	es (other than those in	rluded on line 1— see is	etructions) If none a	nter 'NONE '
(a) Name and address of each employee	(b) Title and average	(c) Compensation	(d) Contributions to	(e) Expense account,
paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	other allowances
NONE			,	
				
Total number of other employees paid over \$50,00	0			0
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Form 990-PF (2010) DRU ALLISON CEDERBERG FOUNDATION Part VIII Information About Officers, Directors, Trustees, Found and Contractors (continued)	81-047 ation Managers, Highly Paid E	
3 Five highest-paid independent contractors for professional services (see insenter 'NONE.'	structions). If none,	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
		<u> </u>
Partix: A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical organizations and other beneficiaries served, conferences convened, research papers produced, etc.	information such as the number of	Expenses
1 <u>N/A</u>		
2		
3		
4		
Partix By Summary of Program-Related Investments (see Instruc	ctions)	
Describe the two largest program-related investments made by the foundation dur	ing the tax year on lines 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
Total. Add lines 1 through 3		0.

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1 a	14,750.
1 b	
2	
3 a	
3 b	
4	14,750.
5	
6	14,750.
	1 b 2 3 a 3 b 4

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

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RattXIII 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				14,249.
2 Undistributed income, if any, as of the end of 2010:				
a Enter amount for 2009 only			0.	
b Total for prior years: 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
b From 2006				
c From 2007				
d From 2008. 995, 564.				
e From 2009	007 271			
f Total of lines 3a through e	997,271.			
XiI, line 4: ► \$ 14,750.				
a Applied to 2009, but not more than line 2a)	
••		CONTRACTOR OF THE PROPERTY OF		
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				14,249.
e Remaining amount distributed out of corpus.	501.			
5 Excess distributions carryover applied to 2010	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a).)				
.,,				
6 Enter the net total of each column as				
indicated below:	007 772			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 .	997,772.			
b Prior years' undistributed income. Subtract 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				
amount — see instructions		0.		
e Undistributed income for 2009. Subtract line 4a from				
line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2010. Subtract lines				
4d and 5 from line 1. This amount must be				2
distributed in 2011				U.
corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3) (see instructions)	0.			
•	0.			
8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	997,772.		生性的	
10 Analysis of line 9:				
a Excess from 2006 . 1,707.				
b Excess from 2007 .				
c Excess from 2008 . 995, 564.			1	
d Excess from 2009				
e Excess from 2010 501.	SAM DE SAME			

orm 990-PF (2010) DRU ALLISON CEDERI			· · · · · · · · · · · · · · · · · · ·	81-0477622	Page 1
aল্পেম্যার্থ Private Operating Foundation					N/A
1 a If the foundation has received a ruling or de is effective for 2010, enter the date of the ru	termination lettei uling		operating foundation		
b Check box to indicate whether the foundation	n is a private op	erating foundation	described in section	4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum investment return from Part X for each year listed	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:					
(1) Value of all assets		<u> </u>			
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			-11.74 2.		
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		1	<u> </u>	L	
Supplementary Information (assets at any time during the	Complete this vear – see ir	part only if the structions.)	e organization ha	ıd \$5,000 or moı	re in
Information Regarding Foundation Manage List any managers of the foundation who had close of any tax year (but only if they have NONE	ave contributed n	nore than 2% of the than \$5,000). (See	e total contributions re e section 507(d)(2).)	eceived by the foun	dation before the
b List any managers of the foundation who or a partnership or other entity) of which the f NONE	wn 10% or more oundation has a	of the stock of a co 10% or greater inte	orporation (or an equi rest.	ally large portion of	the ownership of
2 Information Regarding Contribution, Gran Check here ► X if the foundation only m requests for funds. If the foundation makes complete items 2a, b, c, and d.	akes contribution gifts, grants, etc	s to preselected ch , (see instructions)	aritable organization to individuals or org	anızatıons under oth	ept unsolicited ner conditions,
a The name, address, and telephone number	of the person to	whom applications	should be addresse	d:	
b The form in which applications should be s	ubmitted and info	rmation and mater	ials they should inclu	ıde:	
					_
c Any submission deadlines:					
d Any restrictions or limitations on awards, s	uch as by geogra	phical areas, charit	able fields, kinds of	institutions, or other	factors:

Page 11

3 Grants and Contributions Paid During the	Year or Approved for Fut	ure Paymen	t	
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 SEE STATEMENT 9	substantial contributor			
Total	I			14,750
Total	· · · · · · · · · · · · · · · · · · ·	T		14,/30
Total			► 31	b

PanexxIIAI Analysis of Income-Producing Activities

Enter gross	amounts unless otherwise indicated.	Unrelate	ed business income	Eveluder	d by section 512, 513, or 514	<u> </u>
Enter gross	amounts unless otherwise indicated.	(a) Business code	(b) Amount	(c) Exclu- sion	(d) Amount	(e) Related or exempt function income (see the instructions)
1 Progra	am service revenue:		-	code		
a						
c						
d						ļ
е						
f				ļ		
•	and contracts from government agencies			-		
	pership dues and assessments			 		2 047
	t on savings and temporary cash investments					2,847.
	ends and interest from securities	ALIVOTE LESS	1725年,2015年3月10日至175日,175日			9,282.
	ental income or (loss) from real estate:	Land State Control of	。 上面,在1000年中,1000年日11日日			
	financed property	-		<u> </u>		-
	ebt-financed property					
	atal income or (loss) from personal property			 		
						18,552.
	(loss) from sales of assets other than inventory			-		10,332.
	s profit or (loss) from special events	 			 	
	revenue:					
		CARL MELENCACE	A STATE OF THE PARTY OF THE PAR	HARASORAN	Dayles - Salar and the Constitution of the Con	
		1		 		
				 		
				 	 	
					· · · · · · · · · · · · · · · · · · ·	
e						
e 12 Subto	otal. Add columns (b), (d), and (e)	. 300 27 20	1		¥	30,681.
12 Subto	otal. Add columns (b), (d), and (e) . Add line 12, columns (b), (d), and (e)				13	30,681. 30,681.
12 Subto	otal. Add columns (b), (d), and (e) . Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate		1		· · · · · · · · · · · · · · · · · · ·	
12 Subto 13 Total (See works	. Add line 12, columns (b), (d), and (e)	tions.)			. 13	
12 Subto 13 Total (See works Part XVII	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the	tions.) ee Accomp	lishment of Exemp	t Purp	oses 13	30,681.
12 Subto 13 Total (See works Part XVI Line No.	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculate	tions.) ee Accomp	lishment of Exemp	t Purp	oses 13	30,681.
12 Subto 13 Total (See works Part XVII	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the	tions.) ee Accomp	lishment of Exemp	t Purp	oses 13	30,681.
12 Subto 13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the	tions.) ee Accomp	lishment of Exemp	t Purp	oses 13	30,681.
12 Subto 13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the	tions.) ee Accomp	lishment of Exemp	t Purp	oses 13	30,681.
12 Subto 13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the	tions.) ee Accomp	lishment of Exemp	t Purp	oses 13	30,681.
12 Subto 13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the	tions.) ee Accomp	lishment of Exemp	t Purp	oses 13	30,681.
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12 Subto 13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the	tions.) ee Accomp	lishment of Exemp	t Purp	oses 13	30,681.
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12 Subto 13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the	tions.) ee Accomp	lishment of Exemp	t Purp	oses 13	30,681.
12 Subto 13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the	tions.) ee Accomp	lishment of Exemp	t Purp	oses 13	30,681.
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12 Subto 13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the	tions.) ee Accomp	lishment of Exemp	t Purp	oses 13	30,681.
12 Subto 13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the	tions.) ee Accomp	lishment of Exemp	t Purp	oses 13	30,681.
12 Subto 13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the	tions.) ee Accomp	lishment of Exemp	t Purp	oses 13	30,681.
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12 Subto 13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculated Relationship of Activities to the	tions.) ee Accomp	lishment of Exemp	t Purp	oses 13	30,681.

Form 990-PF (2010) DRU ALLISON CEDERBERG FOUNDATION 81-0477622 Part XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

des rela	cribed iting to	ganızation dırectly in section 501(c) o political organizat	of the Code (oth nons?	ner than secti	on 501(c)(3) org	anızatıons)	ner organizatio or in section 5	n 527,	Yes	No
		from the reporting								25
(1)	Cash.	assets							. 1a (1)	<u> </u>
(2)	Other	assets			• • •				. 1a (2)	X
		sactions:								
(1)	Sales	of assets to a non	charitable exer	npt organizat	ion				. 15(1)	X_
(2)	Purch	ases of assets from	n a noncharital	ole exempt or	ganization .				. 1b (2)	X
(3)	Renta	l of facilities, equip	ment, or other	assets					. 1b (3)	Х
		oursement arrange							1b (4)	X
, ,		or loan guarantee							1b (5)	X
		rmance of services							1b (6)	X
, ,		f facilities, equipme			-				. 1c	X
Ç SH	aring o	riacinues, equipiri	erit, mailing is	is, other asse	ts, or paid emple	Jyces .	•• •		· [16 1	1 <u>.v</u>
d If the the	he ans goods trans	wer to any of the a , other assets, or s action or sharing a	bove is 'Yes,' o services given l rrangement, sh	complete the by the reporting now in column	following schedung foundation. If a (d) the value of	ile. Columr the founda the goods	n (b) should alw ation received I , other assets,	rays show the fail ess than fair mar or services receiv	r market value of ket value in ved.	
(a) Line r	10. (b) Amount involved	(c) Name of	f noncharitable ex	empt organization	(d)	Description of tran	sfers, transactions, ar	d sharing arrangemer	ıts
N/A										
										_
		-						•		
		· · · · · · · · · · · · · · · · · · ·								
							-			
	_									
<u></u>	\dashv	· · · · · · · · · · · · · · · · · · ·	 		· · · · ·	_				
			 							
			- 				·		 	
		·	 			_				
	-		<u> </u>	···		_				
			 			<u> </u>				
de	scribed	indation directly or in section 501(c) complete the follow	of the Code (of	ated with, or i ther than sect	related to, one or ion 501(c)(3)) or	r more tax- in section	exempt organi: 527?	zations	Yes X]No
<u> D II</u>		J.,		(h) T	as of seasons at			A Deservation of s	olotionobio	
NT / 7	<u>(a)</u>	Name of organizat	1011	(0) 1	ype of organizati	OH) Description of r	elationship	
N/A		-			· · · · · · · · · · · · · · · · · · ·					
										
				<u> </u>						
							-			
 										
Sign Here	Under or correct,	enalties of perjury, I declaration	ire that I have exam	ined this return, in than taxpayer or f	icluding accompanying iduciary) is based on a	schedules an all information	d statements, and to of which preparer ha			в,
11616	P − P	nature of officer or trustee	NENEN	VOATA	<u> </u>	Date	/// ``	Title		
		Print/Type preparer's na		Prep	Aluro	Date	Date		PTIN	
		1			111			Check if if	P01211	613
Paid		ROBERT A EV			CD2 C		5/26/11	self-employed		
Prepa		·	ROBERT A.	EVERSON,	CPA, P.C.		-	Firm's EIN > 81	-0403254	7
Use O	nly	l Firm's address 🗩 😁			TE. 220 TW	3				•
		<u> </u>	BILLINGS,	MT 59101				Phone no. (40	06) 259-340	<u>U</u>
BAA									Form 990-PF	(2010)

DRU		RAL STATI on gederber	EMENTS - RECUNDATION		PAGE 1
5/26/11 STATEMENT 1 FORM 990-PF, PART I, LINE 16A LEGAL FEES					12:10PM .
LEGAL FEES	TOTAL	(A) EXPENSES PER BOOKS \$ 140. \$ 140.	(B) NET INVESTMENT INCOME \$ 140. \$ 140.	(C) ADJUSTED NET INCOME \$ 140. \$ 140.	(D) CHARITABLE PURPOSES \$ 0.
STATEMENT 2 FORM 990-PF, PART I, LINE 16B ACCOUNTING FEES					
ACCOUNTING	TOTAL	(A) EXPENSES PER BOOKS \$ 1,160. \$ 1,160.	(B) NET INVESTMENT INCOME \$ 1,160. \$ 1,160.	(C) ADJUSTED NET INCOME \$ 1,160. \$ 1,160.	(D) CHARITABLE PURPOSES \$ 0.
STATEMENT 3 FORM 990-PF, PART I, LINE 16C OTHER PROFESSIONAL FEES					:
MANAGEMENT/PROFESSIONAL FEES	TOTAL	(A) EXPENSES PER BOOKS \$ 1,341. \$ 1,341.	(B) NET INVESTMENT INCOME \$ 1,341.	(C) ADJUSTED NET INCOME \$ 1,341. \$ 1,341.	(D) CHARITABLE PURPOSES \$ 0.
STATEMENT 4 FORM 990-PF, PART I, LINE 18 TAXES					
TAXES	TOTAL	(A) EXPENSES PER BOOKS \$ 269. \$ 269.		(C) ADJUSTED NET INCOME \$ 0.	(D) CHARITABLE PURPOSES \$ 0.

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2010 FEDERAL STA dru allison gedere		,	PAGE 2 811-0477692
5/26/11			12.10PM
STATEMENT 5 FORM 990-PF, PART II, LINE 10B INVESTMENTS - CORPORATE STOCKS			
CORPORATE STOCKS	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
AMERICAN FUNDS GROWTH BLACKROCK ENERGY & RESOURCES LORD ABBETT FUNDAMENTAL EQUITY	COST \$ COST COST TOTAL \$	34,554. 23,081. 34,366. 92,001.	
STATEMENT 6 FORM 990-PF, PART II, LINE 13 INVESTMENTS - OTHER			
	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
OTHER PUBLICLY TRADED SECURITIES		VIIIOU	VIIIOD
TEMPLETON GLOBAL BOND FUND A LORD ABBETT BOND FUND PIMCO TOTAL RETURN FUND AMERICAN FUNDS CAPITAL INCOME BUILDER	COST \$ COST COST COST	35,631. 35,614. 36,562. 29,730.	
	TOTAL \$	137,537.	\$ 142,998.
STATEMENT 7 FORM 990-PF, PART IV, LINE 1 CAPITAL GAINS AND LOSSES FOR TAX ON INVESTME ITEM (A) DESCRIPTION 1 FT FRANKLIN INCOME FUND 2 PIMCO TOTAL RETURN FUND 3 BMW BANK NA 4 AMERICAN FUNDS CAPITAL INVESTMENT 5 AMERICAN FUNDS INCOME FUND OF AMERICA 6 FT FRANKLIN INCOME FUND	NT INCOME (B) HOW ACQUIRE PURCHASE PURCHASE PURCHASE PURCHASE PURCHASE	D ACQUIR 5/05/2 ED 12/09/2 ED 11/20/2 ED 12/15/1 ED 12/22/1	ED SOLD 2009 4/15/2010 2009 4/15/2010 2008 12/01/2010 1998 4/15/2010
(E) (F) (G) (H) GROSS DEPREC. COST GAIN ITEM SALES ALLOWED BASIS (LOSS) 1 4,120. 3,709. 41. 2 72,447. 71,715. 732 3 65,000. 65,000. (4 12,345. 11,439. 906 5 48,830. 43,237. 5,593 6 51,509. 40,599. 10,916	12/31/6912 l. 2. 3. 5. 3.	J. BAS. EX	(K) (L) CESS GAIN -(J) \$ 411. 732. 0. 906. 5,593. 10,910. TOTAL \$ 18,552.

STATEMENT 9 FORM 990-PF, PART XV, LINE 3A RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
FRIENDSHIP HOUSE 3123 8TH AVENUE SOUTH BILLINGS, MT 59101	NONE	EXEMPT	EDUCATIONAL	\$ 3,000.
BILLINGS COMMUNITY & SENIOR CENTER 360 NORTH 23RD STREET BILLINGS, MT 59101	NONE	EXEMPT	HEALTH & WELFARE	3,000.
YELLOWSTONE CASA 111 NORTH 30TH ST BILLINGS, MT 59101	NONE	EXEMPT	HEALTH & WELFARE	3,000.
FAMILY SERVICES, INC. PO BOX 1020 BILLINGS, MT 59103	NONE	EXEMPT	HEALTH & WELFARE	1,000.
YELLOWSTONE COUNTY BOYS & GIRLS CLUB 505 ORCHARD LANE BILLINGS, MT 59101	NONE	EXEMPT	HEALTH AND WELFARE	3,000.
BILLINGS CATHOLIC SCHOOLS FOUNDATION 120 SOUTH 34TH ST BILLINGS, MT 59107	NONE	EXEMPT	EDUCATIONAL	750.
INTERFAITH HOSPITALITY NETWORK 40 10TH STREET WEST BILLINGS, MT 59102	NONE	EXEMPT	HEALTH & WELFARE	1,000.
			TOTAL	\$ 14,750.

Form **8868** (Rev January 2011)

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Department of the Treasury Internal Revenue Service

nternal Revenue	Service	c a separate applic	audit for each return.	
-	e filing for an Automatic 3-Month Extension	• •		
-	e filing for an Additional (Not Automatic)			•
	plete Part II unless you have already been	3		
corporation i request an e Associated V	ling (e-file). You can electronically file Form required to file Form 990-T), or an addition extension of time to file any of the forms list With Certain Personal Benefit Contracts, withing of this form, visit www.irs.gov/efile and	nal (not automatic) sted in Part I or Pa hich must be sent	3-month extension of time. You can ele rt II with the exception of Form 8870, In to the IRS in paper format (see instruct	ectronically file Form 8868 to oformation Return for Transfers
Parti A	automatic 3-Month Extension of Ti	me. Only subm	it original (no copies needed).	
A corporatio	on required to file Form 990-T and requesti	ng an automatic 6-	month extension - check this box and	complete Part I only ►
All other coi income tax i	rporations (including 1120-C filers), partne returns.	rships, REMICS, ar	nd trusts must use Form 7004 to reques	t an extension of time to file
	Name of exempt organization			Employer identification number
Type or print	DRU ALLISON CEDERBERG FOU	81-0477622		
File by the due date for	Number, street, and room or suite number If a P.O. b			101 0177011
filing your return. See	620 HIGHLAND PARK DRIVE			
instructions.	City, town or post office, state, and ZIP code. For a fo	reign address, see instruc	ctions.	
	BILLINGS, MT 59102			
Enter the R	leturn code for the return that this applicati	on is for (file a sep	parate application for each return)	04
Application Is For	1	Return Code	Application Is For	Return Code
Form 990		01	Form 990-T (corporation)	07
Form 990-E	<u>3L</u>	02	Form 1041-A	08
Form 990-E	Z	03	Form 4720	09
Form 990-F	PF	04	Form 5227	10
	(section 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-1	(trust other than above)	06	Form 8870	12
Telepho If the o	oks are in the care of ROBERT A. EVone No. 406-259-3400 organization does not have an office or place of a Group Return, enter the organization	FAX Note of business in the	e United States, check this box Exemption Number (GEN)	f this is for the whole group,
check t	this box . $ ightharpoonup \square$. If it is for part of the grou	ip, check this box.	and attach a list with the names	and EINs of all members
	ension is for.			
until The e	uest an automatic 3-month (6 months for a 8/15, 20_11, to file the exe extension is for the organization's return fo	empt organization r r:	eturn for the organization named above	
>	X calendar year 20 10 or tax year beginning, 20	0 , and endi	ng, 20	
	e tax year entered in line 1 is for less than Change in accounting period	12 months, check r	reason: Initial return Fi	nal return
3a If thi	s application is for Form 990-BL, 990-PF, 9 efundable credits. See instructions	990-T, 4720, or 606	9, enter the tentative tax, less any	. 3a \$ 0.
b If thi payn	s application is for Form 990-PF, 990-T, 47 ments made. Include any prior year overpa	720, or 6069, enter yment allowed as a	any refundable credits and estimated ta credit	x 3b\$ 0.
c Bala EFTI	ince due. Subtract line 3b from line 3a. Incl PS (Electronic Federal Tax Payment Syste	lude your payment m). See instruction	with this form, if required, by using s	3c\$ 0.

ettersion mailed 5/10/11

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

BAA For Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2011)