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

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

**2011**

For calendar year 2011 or tax year beginning

, 2011, and ending

, 20

|   |  |  |
|---|--|--|
| Name of foundation<br><b>JAMES &amp; WANDA HOLLENSTEINER FNDTN</b>  |  | A Employer identification number<br><b>84-1395820</b>  |
| Number and street (or P O box number if mail is not delivered to street address)<br><b>22993 ROLLINS LAKESHORE DR</b>   | Room/suite   | B Telephone number (see instructions)<br><b>406-844-2976</b>   |
| City or town, state, and ZIP code<br><b>ROLLINS MT 59931</b>  |  | C If exemption application is pending, check here <input type="checkbox"/>   |
| G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change |  | D 1. Foreign organizations, check here <input type="checkbox"/><br>2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> |
| H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation<br><input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation   |  | E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>  |
| I Fair market value of all assets at end of year (from Part II, col. (c), line 16) <b>\$ 1236955</b>  | J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual<br><input type="checkbox"/> Other (specify) _____<br>(Part I, column (d) must be on cash basis) |  |
| F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>  |  |  |

| Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions)) |   | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
|--|---|------------------------------------|---------------------------|-------------------------|---|
| <b>Revenue</b>   | 1 Contributions, gifts, grants, etc., received (attach schedule)                    | 15000                              |                           |                         |   |
|  | 2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B |                                    |                           |                         |   |
|  | 3 Interest on savings and temporary cash investments                                |                                    |                           |                         |   |
|  | 4 Dividends and interest from securities  | 42086                              | 42086                     | 42086                   |   |
|  | 5a Gross rents  |                                    |                           |                         |   |
|  | b Net rental income or (loss)   |                                    |                           |                         |   |
|  | 6a Net gain or (loss) from sale of assets not on line 10                            |                                    |                           |                         |   |
|  | b Gross sales price for all assets on line 6a                                       |                                    |                           |                         |   |
|  | 7 Capital gain net income (from Part IV, line 2)                                    |                                    |                           |                         |   |
|  | 8 Net short-term capital gain   |                                    |                           |                         |   |
|  | 9 Income modifications  |                                    |                           |                         |   |
|  | 10a Gross sales less returns and allowances   |                                    |                           |                         |   |
| b Less. Cost of goods sold   |   |                                    |                           |                         |   |
| c Gross profit or (loss) (attach schedule)   |   |                                    |                           |                         |   |
| 11 Other income (attach schedule)  |   |                                    |                           |                         |   |
| 12 Total. Add lines 1 through 11   | 57086   | 42086                              | 57086                     |                         |   |
| <b>Operating and Administrative Expenses</b>   | 13 Compensation of officers, directors, trustees, etc                               |                                    |                           |                         |   |
|  | 14 Other employee salaries and wages  |                                    |                           |                         |   |
|  | 15 Pension plans, employee benefits   |                                    |                           |                         |   |
|  | 16a Legal fees (attach schedule)  |                                    |                           |                         |   |
|  | b Accounting fees (attach schedule)   |                                    |                           |                         |   |
|  | c Other professional fees (attach schedule)   |                                    |                           |                         |   |
|  | 17 Interest   |                                    |                           |                         |   |
|  | 18 Taxes (attach schedule) (see instructions)                                       | 617                                | 617                       | 617                     | 617   |
|  | 19 Depreciation (attach schedule) and depletion                                     |                                    |                           |                         |   |
|  | 20 Occupancy  |                                    |                           |                         |   |
|  | 21 Travel, conferences, and meetings  | 6329                               | 6329                      | 6329                    | 6329  |
|  | 22 Printing and publications  | 16                                 | 16                        | 16                      |   |
|  | 23 Other expenses (attach schedule)   | 390                                | 390                       | 390                     | 390   |
|  | 24 Total operating and administrative expenses. Add lines 13 through 23             | 7352                               | 7352                      | 7352                    | 7352  |
|  | 25 Contributions, gifts, grants paid  | 51000                              |                           |                         | 51000   |
| 26 Total expenses and disbursements. Add lines 24 and 25   | 58352   | 7352                               | 7352                      | 58352                   |   |
| 27 Subtract line 26 from line 12:  |   |                                    |                           |                         |   |
| a Excess of revenue over expenses and disbursements  | (1266)  |                                    |                           |                         |   |
| b Net investment income (if negative, enter -0-)   |   | 34734                              |                           |                         |   |
| c Adjusted net income (if negative, enter -0-)   |   |                                    | 49734                     |                         |   |

| <b>Part II Balance Sheets</b>   |   | Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.) |                | Beginning of year     | End of year |  |
|---|---|---|----------------|-----------------------|-------------|--|
|   |   | (a) Book Value  | (b) Book Value | (c) Fair Market Value |             |  |
| <b>Assets</b>   | <b>1</b> Cash—non-interest-bearing . . . . .  |   | 17224          | 31050                 | 31050       |  |
|   | <b>2</b> Savings and temporary cash investments . . . . .   |   |                |                       |             |  |
|   | <b>3</b> Accounts receivable ▶ . . . . .  |   |                |                       |             |  |
|   | Less: allowance for doubtful accounts ▶ . . . . .   |   |                |                       |             |  |
|   | <b>4</b> Pledges receivable ▶ . . . . .   |   |                |                       |             |  |
|   | Less: allowance for doubtful accounts ▶ . . . . .   |   |                |                       |             |  |
|   | <b>5</b> Grants receivable . . . . .  |   |                |                       |             |  |
|   | <b>6</b> Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) . . . . .  |   |                |                       |             |  |
|   | <b>7</b> Other notes and loans receivable (attach schedule) ▶ . . . . .   |   |                |                       |             |  |
|   | Less: allowance for doubtful accounts ▶ . . . . .   |   |                |                       |             |  |
|   | <b>8</b> Inventories for sale or use . . . . .  |   |                |                       |             |  |
|   | <b>9</b> Prepaid expenses and deferred charges . . . . .  |   |                |                       |             |  |
|   | <b>10a</b> Investments—U.S. and state government obligations (attach schedule) . . . . .  |   |                |                       |             |  |
|   | <b>b</b> Investments—corporate stock (attach schedule) . . . . .  | 1448736   | 1236955        | 1236955               |             |  |
|   | <b>c</b> Investments—corporate bonds (attach schedule) . . . . .  |   |                |                       |             |  |
|   | <b>11</b> Investments—land, buildings, and equipment, basis ▶ . . . . .   |   |                |                       |             |  |
| Less: accumulated depreciation (attach schedule) ▶ . . . . .  |   |   |                |                       |             |  |
| <b>12</b> Investments—mortgage loans . . . . .  |   |   |                |                       |             |  |
| <b>13</b> Investments—other (attach schedule) . . . . .   |   |   |                |                       |             |  |
| <b>14</b> Land, buildings, and equipment, basis ▶ . . . . .   |   |   |                |                       |             |  |
| Less: accumulated depreciation (attach schedule) ▶ . . . . .  |   |   |                |                       |             |  |
| <b>15</b> Other assets (describe ▶ . . . . .)   |   |   |                |                       |             |  |
| <b>16 Total assets</b> (to be completed by all filers—see the instructions. Also, see page 1, item I) . . . . . | 1465960   | 1268005   | 1268005        |                       |             |  |
| <b>Liabilities</b>  | <b>17</b> Accounts payable and accrued expenses . . . . .   |   |                |                       |             |  |
|   | <b>18</b> Grants payable . . . . .  |   |                |                       |             |  |
|   | <b>19</b> Deferred revenue . . . . .  |   |                |                       |             |  |
|   | <b>20</b> Loans from officers, directors, trustees, and other disqualified persons . . . . .  |   |                |                       |             |  |
|   | <b>21</b> Mortgages and other notes payable (attach schedule) . . . . .   |   |                |                       |             |  |
|   | <b>22</b> Other liabilities (describe ▶ . . . . .)  |   |                |                       |             |  |
|   | <b>23 Total liabilities</b> (add lines 17 through 22) . . . . .   | - 0 -   | - 0 -          |                       |             |  |
| <b>Net Assets or Fund Balances</b>  | <b>Foundations that follow SFAS 117, check here ▶</b> <input type="checkbox"/> <b>and complete lines 24 through 26 and lines 30 and 31.</b> |   |                |                       |             |  |
|   | <b>24</b> Unrestricted . . . . .  |   |                |                       |             |  |
|   | <b>25</b> Temporarily restricted . . . . .  |   |                |                       |             |  |
|   | <b>26</b> Permanently restricted . . . . .  |   |                |                       |             |  |
|   | <b>Foundations that do not follow SFAS 117, check here ▶</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 31.</b>   |   |                |                       |             |  |
|   | <b>27</b> Capital stock, trust principal, or current funds . . . . .  | 1465960   | 1268005        |                       |             |  |
|   | <b>28</b> Paid-in or capital surplus, or land, bldg., and equipment fund . . . . .  |   |                |                       |             |  |
|   | <b>29</b> Retained earnings, accumulated income, endowment, or other funds . . . . .  |   |                |                       |             |  |
|   | <b>30 Total net assets or fund balances</b> (see instructions) . . . . .  | 1465960   | 1268005        |                       |             |  |
|   | <b>31 Total liabilities and net assets/fund balances</b> (see instructions) . . . . .   | 1465960   | 1268005        |                       |             |  |

**Part III Analysis of Changes in Net Assets or Fund Balances**

|   |          |          |
|---|----------|----------|
| <b>1</b> Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return) . . . . . | <b>1</b> | 1465960  |
| <b>2</b> Enter amount from Part I, line 27a . . . . .   | <b>2</b> | (1266)   |
| <b>3</b> Other increases not included in line 2 (itemize) ▶ <u>capital depreciation</u> . . . . .   | <b>3</b> | (196689) |
| <b>4</b> Add lines 1, 2, and 3 . . . . .  | <b>4</b> | 1268005  |
| <b>5</b> Decreases not included in line 2 (itemize) ▶ . . . . .   | <b>5</b> |          |
| <b>6</b> Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 . . . . .  | <b>6</b> | 1268005  |

**Part IV Capital Gains and Losses for Tax on Investment Income**

| (a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)   |   | (b) How acquired<br>P—Purchase<br>D—Donation    | (c) Date acquired<br>(mo., day, yr.)         | (d) Date sold<br>(mo., day, yr.)   |
|--|---|---|--|--|
| 1a   |   |   |  |  |
| b  |   |   |  |  |
| c  |   |   |  |  |
| d  |   |   |  |  |
| e  |   |   |  |  |
| (e) Gross sales price  | (f) Depreciation allowed<br>(or allowable)  | (g) Cost or other basis<br>plus expense of sale | (h) Gain or (loss)<br>(e) plus (f) minus (g) |  |
| a  |   |   |  |  |
| b  |   |   |  |  |
| c  |   |   |  |  |
| d  |   |   |  |  |
| e  |   |   |  |  |
| Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69  |   |   |  | (i) Gains (Col. (h) gain minus<br>col. (k), but not less than -0- or<br>Losses (from col. (h)) |
| (i) FMV as of 12/31/69   | (j) Adjusted basis<br>as of 12/31/69  | (k) Excess of col. (i)<br>over col. (j), if any |  |  |
| a  |   |   |  |  |
| b  |   |   |  |  |
| c  |   |   |  |  |
| d  |   |   |  |  |
| e  |   |   |  |  |
| 2 Capital gain net income or (net capital loss)  | <div style="border: 1px solid black; padding: 2px;">           If gain, also enter in Part I, line 7<br/>           If (loss), enter -0- in Part I, line 7         </div> |   | 2  |  |
| 3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):<br>If gain, also enter in Part I, line 8, column (c) (see instructions). If (loss), enter -0- in<br>Part I, line 8 |   |   | 3  |  |

**Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income**

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☐ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

| (a)<br>Base period years<br>Calendar year (or tax year beginning in)  | (b)<br>Adjusted qualifying distributions | (c)<br>Net value of noncharitable-use assets | (d)<br>Distribution ratio<br>(col. (b) divided by col. (c)) |
|---|--|--|---|
| 2010  |  |  |   |
| 2009  |  |  |   |
| 2008  |  |  |   |
| 2007  |  |  |   |
| 2006  |  |  |   |
| 2 Total of line 1, column (d)   |  |  | 2   |
| 3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the<br>number of years the foundation has been in existence if less than 5 years   |  |  | 3   |
| 4 Enter the net value of noncharitable-use assets for 2011 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 lines 5 and 6   |  |  | 7   |
| 8 Enter qualifying distributions from Part XII, line 4<br>If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the<br>Part VI instructions. |  |  | 8   |

**Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

|           |   |           |     |
|-----------|---|-----------|-----|
| <b>1a</b> | Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter. <b>(attach copy of letter if necessary—see instructions)</b> | <b>1</b>  | 695 |
| <b>b</b>  | Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b   |           |     |
| <b>c</b>  | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)   |           |     |
| <b>2</b>  | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  | <b>2</b>  |     |
| <b>3</b>  | Add lines 1 and 2   | <b>3</b>  | 695 |
| <b>4</b>  | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)  | <b>4</b>  |     |
| <b>5</b>  | <b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0-  | <b>5</b>  | 695 |
| <b>6</b>  | Credits/Payments:   |           |     |
| <b>a</b>  | 2011 estimated tax payments and 2010 overpayment credited to 2011   | <b>6a</b> |     |
| <b>b</b>  | Exempt foreign organizations—tax withheld at source   | <b>6b</b> |     |
| <b>c</b>  | Tax paid with application for extension of time to file (Form 8868)   | <b>6c</b> |     |
| <b>d</b>  | Backup withholding erroneously withheld   | <b>6d</b> |     |
| <b>7</b>  | Total credits and payments. Add lines 6a through 6d   | <b>7</b>  |     |
| <b>8</b>  | Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached  | <b>8</b>  |     |
| <b>9</b>  | <b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b>   | <b>9</b>  | 695 |
| <b>10</b> | <b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b>   | <b>10</b> |     |
| <b>11</b> | Enter the amount of line 10 to be <b>Credited to 2012 estimated tax</b> <b>Refunded</b>   | <b>11</b> |     |

**Part VII-A Statements Regarding Activities**

|  | Yes | No |
|--|-----|----|
| <b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?   |     | X  |
| <b>b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the instructions for definition)?<br><i>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.</i> |     | X  |
| <b>c</b> Did the foundation file <b>Form 1120-POL</b> for this year?   |     | X  |
| <b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:<br><b>(1)</b> On the foundation ▶ \$ <b>(2)</b> On foundation managers. ▶ \$   |     |    |
| <b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$  |     |    |
| <b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS?<br><i>If "Yes," attach a detailed description of the activities.</i>  |     | X  |
| <b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>   |     | X  |
| <b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year?  |     | X  |
| <b>b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?   |     | X  |
| <b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year?<br><i>If "Yes," attach the statement required by General Instruction T.</i>  |     | X  |
| <b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:<br>• By language in the governing instrument, or<br>• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?                            | X   |    |
| <b>7</b> Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col. (c), and Part XV</i>  | X   |    |
| <b>8a</b> Enter the states to which the foundation reports or with which it is registered (see instructions) ▶<br><b>MONTANA</b>   |     |    |
| <b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? <i>If "No," attach explanation.</i>   |     | X  |
| <b>9</b> 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 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>   |     | X  |
| <b>10</b> Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses.</i> <b>See Schedule B.</b>  | X   |    |

**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 make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)  | 12 |     | X                          |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?<br>Website address ►  | 13 | X   |                            |
| 14 | The books are in care of ► <b>WANDA HOLLENSTEINER</b> Telephone no. ► <b>406-844-2976</b><br>Located at ► <b>22993 ROLLINS LAKESHORE DR. ROLLINS MT</b> ZIP+4 ► <b>59931</b>  |    |     |                            |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here.<br>and enter the amount of tax-exempt interest received or accrued during the year . . . . .   | 15 |     | ► <input type="checkbox"/> |
| 16 | At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?<br>See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign country ► | 16 | Yes | No<br>X                    |

**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 |
|---|---|-----|----|
| 1a  | During the year did the foundation (either directly or indirectly):   |     |    |
| (1)   | Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |     |    |
| (2)   | Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |     |    |
| (3)   | Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |     |    |
| (4)   | Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> 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 instructions)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Organizations relying on a current notice regarding disaster assistance check here <input type="checkbox"/>   | 1b  |    |
| 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 2011? . . . . .   | 1c  | 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 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>If "Yes," list the years ► 20 , 20 , 20 , 20   |     |    |
| b   | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.) . . . . .  | 2b  | X  |
| c   | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here<br>► 20 , 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |     |    |
| b   | If "Yes," did it have excess business holdings in 2011 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 2011.) . . . . . | 3b  | X  |
| 4a  | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?   | 4a  | X  |
| b   | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?   | 4b  | X  |

**Part VII-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

|  |  |                              |  |           |
|--|--|------------------------------|--|-----------|
| <b>5a</b> During the year did the foundation pay or incur any amount to:   |  |                              |  |           |
| (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  |  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |           |
| (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  |  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |           |
| (3) Provide a grant to an individual for travel, study, or other similar purposes?   |  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |           |
| (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions)  |  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |           |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?  |  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |           |
| <b>b</b> If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? |  |                              |  | <b>5b</b> |
| Organizations relying on a current notice regarding disaster assistance check here   |  | <input type="checkbox"/>     |  |           |
| <b>c</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?  |  | <input type="checkbox"/> Yes | <input type="checkbox"/> No            |           |
| If "Yes," attach the statement required by Regulations section 53.4945–5(d).   |  |                              |  |           |
| <b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?  |  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |           |
| <b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?  |  |                              |  | <b>6b</b> |
| If "Yes" to 6b, file Form 8870.  |  |                              |  |           |
| <b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?   |  | <input type="checkbox"/> Yes | <input checked="" type="checkbox"/> No |           |
| <b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?   |  |                              |  | <b>7b</b> |

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

| (a) Name and address | (b) Title, and average hours per week devoted to position | (c) Compensation (if not paid, enter -0-) | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances                                |
|----------------------|---|---|---|--|
| See Exhibit A        | minimal   | -0-                                       | -0-   | \$300 per meeting for travel & other expenses incurred as a Director |
|                      |   |   |   |  |
|                      |   |   |   |  |
|                      |   |   |   |  |
|                      |   |   |   |  |

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

| (a) Name and address of each employee paid more than \$50,000 | (b) Title, and average hours per week devoted to position | (c) Compensation | (d) Contributions to employee benefit plans and deferred compensation | (e) Expense account, other allowances |
|---|---|------------------|---|---------------------------------------|
|   |   |                  |   |                                       |
|   |   |                  |   |                                       |
|   |   |                  |   |                                       |
|   |   |                  |   |                                       |
|   |   |                  |   |                                       |

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

**Part VIII** Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)***3** Five highest-paid independent contractors for professional services (see instructions). If none, enter "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 |                     | ▶                |

**Part IX-A** Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

|           | Expenses |
|-----------|----------|
| 1<br>NONE |          |
| 2<br>NONE |          |
| 3         |          |
| 4         |          |

**Part IX-B** Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

|  |      |   |
|--|------|---|
| 1  |      |   |
| 2  | NONE |   |
| All other program-related investments See instructions |      |   |
| 3  |      |   |
| Total. Add lines 1 through 3                           |      | ▶ |



**Part X Minimum Investment Return** (All domestic foundations must complete this part. Foreign foundations, see instructions.)

|          |   |           |         |
|----------|---|-----------|---------|
| <b>1</b> | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.           |           |         |
| <b>a</b> | Average monthly fair market value of securities . . . . .   | <b>1a</b> | 1336220 |
| <b>b</b> | Average of monthly cash balances . . . . .  | <b>1b</b> | 13960   |
| <b>c</b> | Fair market value of all other assets (see instructions) . . . . .  | <b>1c</b> |         |
| <b>d</b> | <b>Total</b> (add lines 1a, b, and c) . . . . .   | <b>1d</b> | 1350180 |
| <b>e</b> | Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . . . . .   | <b>1e</b> |         |
| <b>2</b> | Acquisition indebtedness applicable to line 1 assets . . . . .  | <b>2</b>  | - 0 -   |
| <b>3</b> | Subtract line 2 from line 1d . . . . .  | <b>3</b>  | 1350180 |
| <b>4</b> | Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see instructions) . . . . .  | <b>4</b>  | 20252   |
| <b>5</b> | <b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3. Enter here and on Part V, line 4 . . . . . | <b>5</b>  | 1329928 |
| <b>6</b> | <b>Minimum investment return.</b> Enter 5% of line 5 . . . . .  | <b>6</b>  | 66005   |

**Part XI Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

|           |   |           |       |
|-----------|---|-----------|-------|
| <b>1</b>  | Minimum investment return from Part X, line 6 . . . . .   | <b>1</b>  | 66005 |
| <b>2a</b> | Tax on investment income for 2011 from Part VI, line 5 . . . . .  | <b>2a</b> | 695   |
| <b>b</b>  | Income tax for 2011. (This does not include the tax from Part VI.) . . . . .  | <b>2b</b> |       |
| <b>c</b>  | Add lines 2a and 2b . . . . .   | <b>2c</b> | 695   |
| <b>3</b>  | Distributable amount before adjustments. Subtract line 2c from line 1 . . . . .                                     | <b>3</b>  | 65310 |
| <b>4</b>  | Recoveries of amounts treated as qualifying distributions . . . . .   | <b>4</b>  |       |
| <b>5</b>  | Add lines 3 and 4 . . . . .   | <b>5</b>  | 65310 |
| <b>6</b>  | Deduction from distributable amount (see instructions) . . . . .  | <b>6</b>  |       |
| <b>7</b>  | <b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 . . . . . | <b>7</b>  | 65310 |

**Part XII Qualifying Distributions** (see instructions)

|          |  |           |       |
|----------|--|-----------|-------|
| <b>1</b> | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:   |           |       |
| <b>a</b> | Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26 . . . . .  | <b>1a</b> | 58352 |
| <b>b</b> | Program-related investments—total from Part IX-B . . . . .   | <b>1b</b> |       |
| <b>2</b> | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes . . . . .  | <b>2</b>  |       |
| <b>3</b> | Amounts set aside for specific charitable projects that satisfy the:   |           |       |
| <b>a</b> | Suitability test (prior IRS approval required) . . . . .   | <b>3a</b> |       |
| <b>b</b> | Cash distribution test (attach the required schedule) . . . . .  | <b>3b</b> |       |
| <b>4</b> | <b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 . . . . .                                    | <b>4</b>  | 58352 |
| <b>5</b> | 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) . . . . . | <b>5</b>  |       |
| <b>6</b> | <b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4 . . . . .  | <b>6</b>  | 58352 |

**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.

**Part XIII Undistributed Income** (see instructions)

|   | (a)<br>Corpus | (b)<br>Years prior to 2010 | (c)<br>2010 | (d)<br>2011 |
|---|---------------|----------------------------|-------------|-------------|
| <b>1</b> Distributable amount for 2011 from Part XI, line 7 . . . . .   |               |                            |             | 65310       |
| <b>2</b> Undistributed income, if any, as of the end of 2011:   |               |                            |             |             |
| <b>a</b> Enter amount for 2010 only . . . . .   |               |                            |             |             |
| <b>b</b> Total for prior years: 20____, 20____, 20____  |               |                            |             |             |
| <b>3</b> Excess distributions carryover, if any, to 2011:   |               |                            |             |             |
| <b>a</b> From 2006 . . . . .  |               |                            |             |             |
| <b>b</b> From 2007 . . . . .  |               |                            |             |             |
| <b>c</b> From 2008 . . . . .  |               |                            |             |             |
| <b>d</b> From 2009 . . . . .  |               |                            |             |             |
| <b>e</b> From 2010 . . . . .  |               |                            |             | 14148       |
| <b>f</b> <b>Total</b> of lines 3a through e . . . . .   | 14148         |                            |             |             |
| <b>4</b> Qualifying distributions for 2011 from Part XII, line 4: ▶ \$ <u>58352</u>   |               |                            |             |             |
| <b>a</b> Applied to 2010, but not more than line 2a   |               |                            |             |             |
| <b>b</b> Applied to undistributed income of prior years (Election required—see instructions) . . . . .  |               |                            |             |             |
| <b>c</b> Treated as distributions out of corpus (Election required—see instructions) . . . . .  |               |                            |             |             |
| <b>d</b> Applied to 2011 distributable amount . . . . .   |               |                            |             | 58352       |
| <b>e</b> Remaining amount distributed out of corpus   |               |                            |             |             |
| <b>5</b> Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a).)  | 14148         |                            |             | 14148       |
| <b>6</b> Enter the net total of each column as indicated below:   |               |                            |             |             |
| <b>a</b> Corpus. Add lines 3f, 4c, and 4e. Subtract line 5  | - 0 -         |                            |             |             |
| <b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b . . . . .   |               |                            |             |             |
| <b>c</b> Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed . . . . . |               |                            |             |             |
| <b>d</b> Subtract line 6c from line 6b. Taxable amount—see instructions . . . . .   |               |                            |             |             |
| <b>e</b> Undistributed income for 2010. Subtract line 4a from line 2a. Taxable amount—see instructions . . . . .  |               |                            |             |             |
| <b>f</b> Undistributed income for 2011. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2012 . . . . .  |               |                            |             | 7190        |
| <b>7</b> Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) . . . . .                                  |               |                            |             |             |
| <b>8</b> Excess distributions carryover from 2006 not applied on line 5 or line 7 (see instructions) . . . . .  |               |                            |             |             |
| <b>9</b> <b>Excess distributions carryover to 2012.</b> Subtract lines 7 and 8 from line 6a . . . . .   |               |                            |             |             |
| <b>10</b> Analysis of line 9:   |               |                            |             |             |
| <b>a</b> Excess from 2007 . . . . .   |               |                            |             |             |
| <b>b</b> Excess from 2008 . . . . .   |               |                            |             |             |
| <b>c</b> Excess from 2009 . . . . .   |               |                            |             |             |
| <b>d</b> Excess from 2010 . . . . .   |               |                            |             |             |
| <b>e</b> Excess from 2011 . . . . .   |               |                            |             | 7190        |

**Part XIV Private Operating Foundations** (see instructions and Part VII-A, question 9)

**1a** If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling . . . . . ▶

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

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

| Tax year  | Prior 3 years |          |          | (e) Total |
|---|---------------|----------|----------|-----------|
| (a) 2011  | (b) 2010      | (c) 2009 | (d) 2008 |           |
| 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 . . . . .                                   |               |          |          |           |
| <b>3</b> Complete 3a, b, or c for the alternative test relied upon:   |               |          |          |           |
| a "Assets" alternative test—enter:  |               |          |          |           |
| (1) Value of all assets   |               |          |          |           |
| (2) Value of assets qualifying under section 4942(j)(3)(B)(i) . . . . .   |               |          |          |           |
| b "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed . . . . .                                |               |          |          |           |
| c "Support" alternative test—enter:   |               |          |          |           |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) . . . . . |               |          |          |           |
| (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) . . . . .                                      |               |          |          |           |
| (3) Largest amount of support from an exempt organization . . . . .   |               |          |          |           |
| (4) Gross investment income . . . . .   |               |          |          |           |

**Part XV Supplementary Information** (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

**1 Information Regarding Foundation Managers:**

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

JAMES HOLLENSTEINER

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

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

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

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

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

**c** Any submission deadlines:

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

### 3 Grants and Contributions Paid During the Year or Approved for Future Payment

Form **990-PF** (2011)

## Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

[illegible]

|   |           |
|---|-----------|
| <b>13 Total.</b> Add line 12, columns (b), (d), and (e) | <b>13</b> |
|---|-----------|

(See worksheet in line 13 instructions to verify calculations.)

## Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

| Line No.<br>▼ | Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions.) |
|---------------|--|
|               | N.A  |

**Part XVII** Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

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

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule.

| (a) Name of organization | (b) Type of organization | (c) Description of relationship |
|--------------------------|--------------------------|---------------------------------|
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |
|                          |                          |                                 |

**Sign Here** Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

*James A. Hollenstern* | *May 10* | *President*

Signature of officer or trustee      Date      Title

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

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

|                                       |                            |                      |      |   |      |
|---------------------------------------|----------------------------|----------------------|------|---|------|
| <b>Paid<br/>Preparer<br/>Use Only</b> | Print/Type preparer's name | Preparer's signature | Date | Check <input type="checkbox"/> if self-employed | PTIN |
|                                       | Firm's name ▶              |                      |      | Firm's EIN ▶                                    |      |
|                                       | Firm's address ▶           |                      |      | Phone no  |      |

**Schedule B**(Form 990, 990-EZ,  
or 990-PF)Department of the Treasury  
Internal Revenue Service**Schedule of Contributors**

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

OMB No 1545-0047

**2011**

Name of the organization

JAMES &amp; WANDA HOLLNSTEINER FNDN

Employer identification number

84-1395820

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)( ) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundationCheck 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, total 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 total 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 Part I, 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).

|                      |                                |
|----------------------|--------------------------------|
| Name of organization | Employer identification number |
|----------------------|--------------------------------|

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

| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                      | (c)<br>Total contributions | (d)<br>Type of contribution   |
|------------|--|----------------------------|---|
|            | JAMES A. HOLLENSTEINER<br>186 KIMBERLY RD.<br>BARRINGTON IL 60010      | \$ 5000 <sup>00</sup>      | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |
|            | HELEN H. DIGGS T/U/A 7-18-94<br>186 KIMBERLY RD<br>BARRINGTON IL 60010 | \$ 10000 <sup>00</sup>     | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |
|            |  | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |
|            |  | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |
|            |  | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |
|            |  | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |
|            |  | \$                         | Person <input type="checkbox"/><br>Payroll <input type="checkbox"/><br>Noncash <input type="checkbox"/><br>(Complete Part II if there is a noncash contribution.) |



**SCHEDULES TO ACCOMPANY 990-PF FOR THE JAMES & WANDA HOLLENSTEINER FOUNDATION  
(84-1395820)**

Line 18: Excise taxes of \$617 were paid with the 2010 return

Line 23: Other expenses totaled \$390 which included \$140 for a post office box and \$250 for a variety of administrative expenses such as postage, printing, phone calls, etc.

For Line 16, not out-of-pocket costs were incurred for legal, accounting, or professional fees. I am a licensed attorney and banker and am comfortable preparing this return which I do without compensation.

Part II: See enclosed statements from Charles Schwab & Co for detailed information as to the amounts of corporate stock owned by the Foundation as of the beginning and end of the year.

Part VII-A, Line 8b. See enclosed letter from the Montana Department of Revenue dated July 9, 1998 indicating that our Foundation is exempt from state tax (Exhibit B)

See Exhibit A for a listing of directors and officers; Schedule B for a listing of donors (Part 1, Line 1), and Exhibit C for a listing of contributions for 2011 (Part XV)

Exhibit A

**JAMES & WANDA HOLLENSTEINER FOUNDATION (84-1395820)**

**Names and addresses of officers and directors**

**James A. Hollensteiner,, President**  
**22993 Rollins Lakeshore Drive**  
**Rollins MT 59931**

**Wanda Hollensteiner, Vice President**  
**22993 Rollins Lakeshore Drive**  
**Rollins MT 59931**

**Jena Hollensteiner, Treasurer**  
**5903 N. Kostner**  
**Chicago IL 60646**

**John Hollensteiner, Secretary**  
**3409 Lower Valley Road**  
**Kalispell MT 59901**

**Lisa Hollensteiner Egger, Director**  
**4006 Grimes Ave. S.**  
**Edina MN 55416**

**James F. Hollensteiner, Director**  
**25585 Wagon Wheel Drive**  
**Barrington IL 60010**

**Andrew Hollensteiner, Director**  
**10460 North Fork Road**  
**Polebridge MT 59928**

**Steve Cummings, Director**  
**1150 N. Somers Rd.**  
**Kalispell MT 59901**

Exhibit C

CONTRIBUTIONS TO CHARITABLE ORGANIZATIONS FROM THE  
JAMES & WANDA HOLLENSTEINER FOUNDATION (84-1305820)

FOR 2011

|  |          |
|--|----------|
| Northwest Montana Historical Society<br>P.O. Box 2293<br>Kalispell MT 59903        | \$ 15000 |
| Flathead Land Trust<br>P.O. Box 1913<br>Kalispell MT 59903                         | 2000     |
| Crossroads Christian Fellowship Church<br>7454 Hwy 35<br>Bigfork MT 59911          | 1500     |
| Northwest Healthcare Foundation: Alert<br>310 Sunnyview Lane<br>Kalispell MT 59901 | 2500     |
| Flathead Lakers<br>P.O. Box 70<br>Polson MT 59860                                  | 2000     |
| Night Ministry<br>4711 Ravenswood Ave.<br>Chicago IL 60640                         | 500      |
| Lyric Opera of Chicago<br>20 N. Wacker<br>Chicago 60610                            | 1000     |
| Flathead County Search & Rescue<br>P.O. Box 358<br>Kalispell MT 59903              |          |
| Glacier Institute<br>P.O. Box 1887<br>Kalispell MT 59903                           | 1000     |
| Glacier National Park Fund<br>P.O. Box 2749<br>Columbia Falls MT 59912             | 2000     |

**Doctors Without Borders**  
333 7<sup>th</sup> Ave., 2<sup>nd</sup> Floor  
New York NY 10001

1000

**Rush University Medical Center**  
Office of Philanthropy  
1700 W. Van Buren, Suite 250  
Chicago IL 60612

5000

**Upper West Shore Quick Response Unit**  
P.O. Box 911  
Lakeside MT 59922

500

**Feed My Starving Children**  
401 93<sup>rd</sup> Ave. N.W.  
Coon Rapids MN 55423

500

**City of Lakes Nordic Ski Foundation**  
P.O. Box 50304  
Minneapolis MN 55405

1000

**Glacier Symphony & Chorale**  
P.O. Box 2491  
Kalispell MT 59903

1000

**Witnessing Ministries of Christ**  
4717 N. Barton Ave.  
Fresno CA 93726

**Eagle Nature Foundation**  
300 E. Hickory St.  
Apple River IL 61001

250

**Willow Creek Community Church**  
67 E. Algonquin Rd.  
South Barrington IL 60010

**University of Montana Foundation**  
P.O. Box 7159  
Missoula MT 59807

1000

**Humane Society of Northwest Montana**  
P.O. Box 221  
Kalispell MT 59903

250

Conrad Mansion Museum  
P.O. Box 1041  
Kalispell MT 59903

500

Dayton Presbyterian Church  
P.O. Box 188  
Dayton MT 59914

250

CBRE Foundation  
100 N. Sepulveda, Suite 1100  
El Segundo CA 90425

LEAP After School Program  
P.O. Box 147  
Bigfork MT 59911

Foys To Blacktail Bike Trail  
P.O. Box 81  
Kalispell MT 59903

2006

DREAM Adaptive Recreation Inc.  
P.O. Box 4084  
Whitefish MT 59937

350

Michael J. Fox Foundation  
Church Street Station  
P.O. Box 780  
New York NY 10008

500

Big Mountain Firefighters Assn.  
3790 Big Mountain Road  
Whitefish MT 59937

250

Benilde St. Margaret's School  
2501 Highway 100 South  
St. Louis Park MN 55416

1000

Brothers Keepers Program  
Barrington High School  
Barrington IL 60010

250

Bodhi Tree Foundation  
12613 Pinnacle Loop  
Truckee CA 96161

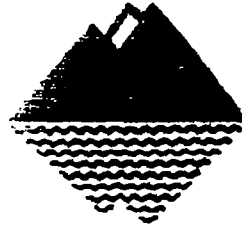
1000

|   |       |
|---|-------|
| Calvin Christian School<br>4015 Inglewood Ave. S.<br>Edina MN 55416                               | 1 000 |
| Opportunity International<br>P.O. Box 3695<br>Oakbrook IL 60522                                   | 1 00  |
| Parkinson's Disease Foundation<br>1359 Broadway, Suite 1509<br>New York NY 10018                  | 1 00  |
| Clearing Folk School<br>P.O. Box 65<br>12171 Garrett Bay Rd<br>Ellison Bay WI 54210               | 800   |
| Peninsula School of Art<br>P.O. Box 304<br>Fish Creek WI 54212                                    | 1 00  |
| Kiva Micro Funds<br>875 Howard St., Suite 340<br>San Francisco CA 94103                           | 1 500 |
| United Methodist Church Camp<br>2139 Methodist Camp Rd.<br>Rollins MT 59931                       | 1 000 |
| Flathead Valley Community College<br>School of Nursing<br>777 Grandview Dr.<br>Kalispell MT 59901 | 5 00  |
| Adventures in Missions<br>P.O. Box 534470<br>Atlanta GA 30353                                     | 1 000 |
| Outreach 360<br>6611 W. Robert E. Lee St.<br>Glendale AZ 85308                                    | 2 50  |
| Stillwater Christian School<br>255 FFA Dr.<br>Kalispell MT 59901                                  | 5 50  |

Total 2011 Gifts

\$ 51 000

Exhibit B



Natural Resource &  
Corporation Tax Division  
Sam W. Mitchell Building

Montana Department of  
**REVENUE**

P. O. Box 202701  
Helena, Montana 59620-2701

July 9, 1998

FEIN 041335820

JAMES AND WANDA HOLLENSTEINER FOUNDATION  
299 LAKESHORE DR  
ROLLINS, MT 59931

Re Nonprofit Tax Exempt Status for JAMES AND WANDA HOLLENSTEINER  
FOUNDATION

Dear Taxpayer:

This letter will acknowledge receipt of your request for non-profit exempt status for your organization. Upon review of the submitted information, we have determined JAMES AND WANDA HOLLENSTEINER FOUNDATION to be a nonprofit corporation under Montana Code Annotated (MCA), §15-31-102(1)(d).

An organization exempt from tax is only required to file a return when it has any unrelated business income earned which results in a federal unrelated business income tax liability of more than \$100. An exempt corporation subject to tax on unrelated business income must file a copy of its federal exempt organization business income tax return on which it reports its unrelated business income with the Department of Revenue (§15-31-102(3), MCA).

Please feel free to contact our office at (406) 444-3574, if you have any further questions.

Sincerely,

Sharon Blunn, Administrative Assistant  
Corporate Tax Bureau



\*G000044800204\*

SCHWAB

Schwab One® Account of  
JAMES & WANDA HOLLENSTEINER FNAccount Number  
7068-8215  
Statement Period  
January 1-31, 2011

## Change in Account Value

|   | This Period            | Year to Date           |
|---|------------------------|------------------------|
| <b>Starting Value</b>                   | <b>\$ 1,448,736.20</b> | <b>\$ 1,448,736.20</b> |
| Cash Value of Purchases & Sales         | 0.00                   | 0.00                   |
| Investments Purchased/Sold              | 0.00                   | 0.00                   |
| Deposits & Withdrawals                  | 0.00                   | 0.00                   |
| Dividends & Interest                    | 7,952.24               | 7,952.24               |
| Fees & Charges                          | 0.00                   | 0.00                   |
| Transfers                               | 0.00                   | 0.00                   |
| Income Reinvested                       | 0.00                   | 0.00                   |
| Change in Value of Investments          | (35,744.71)            | (35,744.71)            |
| <b>Ending Value on 01/31/2011</b>       | <b>\$ 1,420,943.73</b> | <b>\$ 1,420,943.73</b> |
| <b>Total Change in Account Value</b>    | <b>\$ (27,792.47)</b>  | <b>\$ (27,792.47)</b>  |
| (Totals include Deposits & Withdrawals) | (1.92)%                | (1.92)%                |

Account Value (\$) Over Last 12 Months [in Thousands]

|      |      |      |      |      |      |      |      |      |       |       |       |      |
|------|------|------|------|------|------|------|------|------|-------|-------|-------|------|
| 2100 | 2/10 | 3/10 | 4/10 | 5/10 | 6/10 | 7/10 | 8/10 | 9/10 | 10/10 | 11/10 | 12/10 | 1/11 |
| 1750 |      |      |      |      |      |      |      |      |       |       |       |      |
| 1400 |      |      |      |      |      |      |      |      |       |       |       |      |
| 1050 |      |      |      |      |      |      |      |      |       |       |       |      |
| 700  |      |      |      |      |      |      |      |      |       |       |       |      |
| 350  |      |      |      |      |      |      |      |      |       |       |       |      |
| 0    |      |      |      |      |      |      |      |      |       |       |       |      |

## Asset Composition

|                             | Market Value           | % of Account Assets |
|-----------------------------|------------------------|---------------------|
| Cash and Money Market Funds |                        |                     |
| [Sweep]                     | \$ 9,414.74            | <1%                 |
| Equities                    | 1,411,528.99           | 99%                 |
| <b>Total Assets Long</b>    | <b>\$ 1,420,943.73</b> |                     |
| <b>Total Account Value</b>  | <b>\$ 1,420,943.73</b> | <b>100%</b>         |

## Gain or (Loss) Summary

| Realized Gain or (Loss) This Period              |                         |
|--|-------------------------|
| Short Term                                       | \$0.00                  |
| Long Term  | \$0.00                  |
| <b>Unrealized Gain or (Loss)</b>                 |                         |
| All Investments                                  | \$2,316.60 <sup>1</sup> |
| Values may not reflect all of your gains/losses. |                         |

Schwab has provided accurate gain and loss information wherever possible for most investments. Cost basis data may be incomplete or unavailable for some of your holdings. Please see "Endnotes for Your Account" section for an explanation of the endnote codes and symbols on this statement.

C11R4805-004480 340637

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Schwab

Schwab One® Account of  
JAMES & WANDA HOLLENSTEINER FN

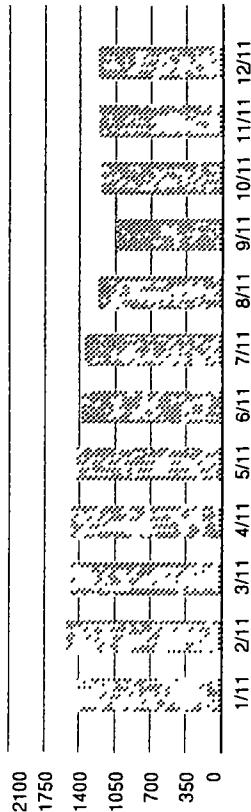
Account Number  
7068-8215

Statement Period  
December 1-31, 2011

## Change in Account Value

|   | This Period            | Year to Date           |
|---|------------------------|------------------------|
| <b>Starting Value</b>                   | <b>\$ 1,214,870.42</b> | <b>\$ 1,448,736.20</b> |
| Cash Value of Purchases & Sales         | 0.00                   | 0.00                   |
| Investments Purchased/Sold              | 0.00                   | 0.00                   |
| Deposits & Withdrawals                  | (13,294.13)            | (42,448.00)            |
| Dividends & Interest                    | 1,240.73               | 42,086.23              |
| Fees & Charges                          | 0.00                   | 0.00                   |
| Transfers                               | 0.00                   | 0.00                   |
| Income Reinvested                       | (0.73)                 | (6.47)                 |
| Change in Value of Investments          | 34,138.81              | (211,412.86)           |
| <b>Ending Value on 12/31/2011</b>       | <b>\$ 1,236,955.10</b> | <b>\$ 1,236,955.10</b> |
| <b>Total Change in Account Value</b>    | <b>\$ 22,084.68</b>    | <b>\$ (211,781.10)</b> |
| (Totals include Deposits & Withdrawals) | 1.82%                  | (14.62)%               |

Account Value (\$) Over Last 12 Months [in Thousands]



## Asset Composition

|                            | Market Value           | % of Account Assets |
|----------------------------|------------------------|---------------------|
| Money Market Funds [Sweep] | \$ 1,100.73            | <1%                 |
| Equities                   | 1,235,854.37           | 100%                |
| <b>Total Assets Long</b>   | <b>\$ 1,236,955.10</b> |                     |
| <b>Total Account Value</b> | <b>\$ 1,236,955.10</b> | <b>100%</b>         |

## Gain or (Loss) Summary

### Realized Gain or (Loss) This Period

|            |        |
|------------|--------|
| Short Term | \$0.00 |
| Long Term  | \$0.00 |

### Unrealized Gain or (Loss)

|   |            |
|---|------------|
| All Investments                                 | \$5,425.60 |
| Values may not reflect all of your gains/losses |            |