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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

Department of the Treasury

			be able to use a copy of this	return to satisfy state rept		
			1, 2011	, and ending	JAN 31, 2012	<u> </u>
		f foundation			A Employer identification	number
		RLES M. BAIR MEMORIAL T				
	:/0	ANDERSON ZURMUEHLEN &	CO., P.C.		81-0370774	:
Nu	mber a	and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
_1	60	1 LEWIS AVE		105	406-657-81	.39
Cit	y or t	own, state, and ZIP code			C If exemption application is p	ending, check here
E	BIL	LINGS, MT 59102				
G	Check	call that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	s, check here
		Final return	Amended return		Ì	
		Address change	Name change		Foreign organizations me 2. check here and attach co	eting the 85% test,
Н	Check	type of organization: X Section 501(c)(3) ex	cempt private foundation		E If private foundation sta	tus was terminated
] Se	ection 4947(a)(1) nonexempt charitable trust	Other taxable private founda	tion	under section 507(b)(1)	
I F	air ma	arket value of all assets at end of year J Accounti	ng method: X Cash	Accrual	F If the foundation is in a	• • •
(f	rom i	Part II, col. (c), line 16)	ther (specify)		under section 507(b)(1)	
	-\$	8,816,142. (Part I, colu	mn (d) must be on cash b	pasis.)		
P	art I	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	800,000.			
	2	Check X If the foundation is not required to attach Sch B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	117,832.	117,832.		STATEMENT 1
	5a	Gross rents				
	1 .	Net rental income or (loss)				
% © 2012 Revenue	62	Net gain or (loss) from sale of assets not on line 10	-8,134.			
	Ь	Gross sales price for all assets on line 6a 3,613,920.				
5	7	Capital gain net income (from Part IV, line 2)		0.		
	8	Net short-term capital gain				
×.	9	Income modifications				
	1	C				
	Ь	and allowances Less Cost of goods sold.				
		Gross profit or (loss)				
Ĩ	11	OLO INCOMPLIN 1 0 2012	4,555.	4,555.	0.	STATEMENT 2
Z	12	Total Add lines 1 through 11	914,253.	122,387.		
ころとう	13	Compensation of officers, directors, trustees, etc	51,370.	25,685.	0.	25,685.
ت	14	Other employee salaries and wages		· -		
T		Pension plans, employee benefits				
ses	16a	Legal fees STMT 3	765.	382.	0.	383.
en	ь	Accounting fees STMT 4	3,125.	1,563.	0.	1,562.
ă	C	Other professional fees				
Ş	17	Interest				
rat	18	Taxes STMT 5	2,260.	0.	0.	0.
ııst	19	Depreciation and depletion				
Ē	20	Occupancy				
Ρ	21	Travel, conferences, and meetings				
2	22	Printing and publications				
ğ	23	Other expenses STMT 6	978.	978.	0.	0.
atir	24	Total operating and administrative				
Operating and Administrative Expenses		expenses. Add lines 13 through 23	58,498.	28,608.	0.	27,630.
Õ	25	Contributions, gifts, grants paid	1,032,677.			1,032,677.
	26	Total expenses and disbursements.				
_		Add lines 24 and 25	1,091,175.	28,608.	0.	1,060,307.
	27	Subtract line 26 from line 12:				
	a	Excess of revenue over expenses and disbursements	-176,922.			
		Net investment income (if negative, enter -0-)		93,779.		
-		Adjusted net income (if negative, enter -0-)			0.	
1005						

CHARLES M. BAIR MEMORIAL TRUST

Part l	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	t vear
	Coloniii Silone ne ioi ciin-oi-Acai suspanii2 onii	(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	-1.		
	Savings and temporary cash investments	18,951.	49,165.	49,165.
	Accounts receivable ►	1		
	Less: allowance for doubtful accounts ▶			
l l	Pledges receivable ►			
	Less: allowance for doubtful accounts ▶			
5	Grants receivable			
6	Receivables due from officers, directors, trustees, and other			
	disqualified persons			
7	Other notes and loans receivable			
	Less: allowance for doubtful accounts ▶			·
र्घ ८	Inventories for sale or use			
0,	Prepaid expenses and deferred charges	21,067.	18,807.	
Tua	Investments - U.S. and state government obligations STMT 7	303,307.	227,062.	
	Investments - corporate stock STMT 8	2,914,717.		
	Investments - corporate bonds STMT 9	957,584.	924,140.	1,019,155.
1	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation			
	Investments - mortgage loans	6,814.	6,814.	12 006
	Investments - other STMT 10	0,014.	0,014.	12,906.
i	Land, buildings, and equipment basis			
	Other assets (describe STATEMENT 11)	4,192,378.	4,192,378.	4,192,378.
13	Other assets (describe - STATISHIMI II)	4,152,570.	±,152,570.	4,172,370.
16	Total assets (to be completed by all filers)	8,414,817.	8,237,895.	8,816,142.
	Accounts payable and accrued expenses	0,222,027	0,20.,000	010201220
	Grants payable			
مدای	Deferred revenue			
. <u>e</u>	Loans from officers, directors, trustees, and other disqualified persons			
ਰ ਫ਼ 21	Mortgages and other notes payable			
⊐ ₂₂	Other liabilities (describe)			
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.			
၌ 24	Unrestricted			
<u>ā</u> 25	Temporarily restricted			
- To	Permanently restricted			
Ę	Foundations that do not follow SFAS 117, check here			
	and complete lines 27 through 31.	0.	0	
27 وي ا	Capital stock, trust principal, or current funds Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
76 (Retained earnings, accumulated income, endowment, or other funds	8,414,817.	8,237,895.	
!	Total net assets or fund balances	8,414,817.	8,237,895.	
2 30	Total list assets of fullu balances	0,414,0174	0,231,033.	
31	Total liabilities and net assets/fund balances	8,414,817.	8,237,895.	
Part				
	····			
	net assets or fund balances at beginning of year - Part II, column (a), line	30		0 111 017
	t agree with end-of-year figure reported on prior year's return) amount from Part I, line 27a		1 2	8,414,817. -176,922.
	amount from Part 1, line 27a Increases not included in line 2 (itemize)		3	-176,922.
	ines 1, 2, and 3		4	8,237,895.
	eases not included in line 2 (itemize)		5	0,237,033.
	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 30	6	8,237,895.

123511 12-02-11

	ANDERSON ZURMUE d Losses for Tax on Ir			<u>C.</u>		8	<u> 1-037</u>	0774	Page 3
(a) List and describe	the kind(s) of property sold (e.g louse; or common stock, 200 sh	, real estate,	t income	P	low acquired Purchase	(c) Date	acquired day, yr.)	(d) Dat (mo., da	e sold
1a VARIOUS SALES OF		5. IVILU UU.)		D	- Donation P	(1110., 1	Jay, yi.,	(1110., 0	<u> </u>
b TO BALANCE	INVESTMENTS		-		P				
С									
<u>d</u>				<u> </u>					
e	(0 D	(10		<u> </u>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cos plus e	st or other basis expense of sale				Gain or (loss) s (f) minus (
a 3,594,868.	· · · · · · · · · · · · · · · · · · ·	↓	3,622,05	4.					,186
ь 19,052.									,052
C									
d e		ļ	<u>.</u>						
Complete only for assets showing g	ain in column (h) and owned by	the foundation	on 12/31/69) Gains ((Col. (h) gaın ı	minus	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any			. (k), but	not less than (from col. (h	-0-) or	
a								-27	,186
b								19	,052
- C d									
e									
2 Capital gain net income or (net capital	If gain, also enter of the loss)	r in Part I, line - in Part I, line	7 7	}[2			-8	,134
3 Net short-term capital gain or (loss) a If gain, also enter in Part I, line 8, coli	as defined in sections 1222(5) ar								
If (loss), enter -0- in Part I, line 8 Part V Qualification Und	ler Section 4940(e) for	Daduard	Tay on Nat]	3		N/A	·	
(For optional use by domestic private for	····					ome			
		4340(a) tax uii	HET HIVESTHEIR HI	icomic.	•)				
If section 4940(d)(2) applies, leave this p	oart blank.								
Was the foundation liable for the section			•	rod?				Yes	X No
If "Yes," the foundation does not qualify to 1. Enter the appropriate amount in each				es			···		 -
(a) Base period years	(b)		g z., y o	(c)			Distrik	(d)	
Calendar year (or tax year beginning i	n) Adjusted qualifying dis		Net value of no		table-use assets		(col. (b) divid	ition ratio ded by col.	(c))
2010		7,786.			653,551				26157
2009 2008		7,781. 4,809.			436,691 936,194				24066
2007		7,924.			472,446				17395 13160
2006		4,418.			302,710				00629
2 Total of line 1, column (d)						2			11407
3 Average distribution ratio for the 5-ye	ear base period - divide the total o	on line 2 by 5,	or by the number	of yea	rs			1.7-	1140
the foundation has been in existence			-	-		3		.34	18281
4 Enter the net value of noncharitable-u	use assets for 2011 from Part X,	line 5				4	4	1,650,	223.
5 Multiply line 4 by line 3						5	1	.,619,	584.
6 Enter 1% of net investment income (1% of Part I, line 27b)					6			938.
7 Add lines 5 and 6						7	1	.,620,	522.
8 Enter qualifying distributions from Pa						8	1	,060,	307.
If line 8 is equal to or greater than line See the Part VI instructions.	e /, check the box in Part VI, line	1b, and comp	lete that part using	g a 1%	tax rate.				
Enter qualifying distributions from Pa		1b, and comp	lete that part using	g a 1%	o tax rate.				

CHARLES M. BAIR MEMORIAL TRUST

3 1,87/4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- C Teaths/Payments: a 2011 estimated tax payments and 2010 overpayment credited to 2011 b Exempt foreign organizations - tax withheld at source C Tax paid with application for extension of time to file (Form 8868) B Backup withholding erroneously withheld T Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached Enter any penalty for underpayment of estimated tax ≥ the amount owerpaid There the amount of line 10 to be: Credited to 2012 estimated tax ≥ 16, 931. Refunded ≥ 11 Part VII-A Statements Regarding Activities 1a 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? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 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 c Did the foundation file Form 1120-POL for this year? 1b 1 2 d Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0. e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0. e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ 0. e Enter the reimbursement (if any) paid by	
Date of ruling of determination letter:	
b Domeshic foundations that meet the section 4940(e) requirements in Part V, check here	
of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b). 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 3 Add lines 1 and 2 3 1, 87. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 1ax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments: a 2011 estimated tax payments and 2010 overpayment credited to 2011 6 Exempt foreign organizations - tax withheld at source 6 Cax paid with application for extension of time to file (Form 8868) 6 Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here fold the file of the start	6.
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3 Add lines 1 and 2 4 Subtitle A (Income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- 6 Credits/Payments: a 2011 estimated tax payments and 2010 overpayment credited to 2011 b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Finer the amount of line 10 to be. Credited to 2012 estimated tax ▶ 16,931. Refunded ▶ 11 CPART VII-A Statements Regardling Activities 1a 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? b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 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 1 b C 1 d the foundation hie Form 1120-POL for this year? 1 d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 1 1 on the foundation engaged in any activities that have not previously been reported to the IRS? 1 2 Yes, " attach a detailed description of the activities 3 Has the foundation magaged in any activities that have not previously been reported to the IRS? 1 4 Statement and the foundation magaged in any activities that have not previously been reported to the IRS? 1 4 Statement and entire the foundation magaged in any activities that have not	
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b Exempt foreign organizations - tax withheld at source c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 To Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 11 Enter the amount of line 10 to be: Credited to 2012 estimated tax Part VII-A Statements Regarding Activities 1a 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? 1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b 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 c Did the foundation file Form 1120-POL for this year? 1c Did the foundation file Form 1120-POL for this year? 1c Did the foundation in connection with the activities c Did the foundation file Form 1120-POL for this year? 1c Did the foundation file Form 1120-POL for this year? 1c Did the foundation file Form 1120-POL for this year? 1c Did the foundation file Form 1120-POL for this year? 1c Did the foundation file Form 1120-POL for this year? 1c Did the foundation file Form 1120-POL for this year? 2 Did the foundation engaged in any activities that have not previously been reported to the IRS? 2 Did the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4 Did the foundation have unrelated	
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4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a 2	
	<u>X</u>
o ii yes, nas ii iieo a tax feturn on form 990-1 for this year/ N/A 4b	
	<u>X</u>
If "Yes," attach the statement required by General Instruction T.	
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:	
By language in the governing instrument, or By state logislation that effectively amonds the governing instrument so that no mandatory dispetience that conflict with the state logislation.	
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? 6 X	
remain in the governing instrument? 7 Did the foundation have at least \$5,000 in assets at any time during the year? 7 X	
If "Yes," complete Part II, col. (c), and Part XV. 8a Enter the states to which the foundation reports or with which it is registered (see instructions) NONE	
TAOTATE	
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 General Instruction G? If "No," attach explanation 8b X	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar	—
	7
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	<u>ζ</u> ζ

. : CHARLES M. BAIR MEMORIAL TRUST

	n 990-PF (2011) C/O ANDERSON ZURMUEHLEN & CO., P.C. 81-037 ert VII-A Statements Regarding Activities (continued)	0774		Page 5
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	T	Γ	Γ
••	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		v
12	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13		X
	Website address ► NA		L	
1.4	The books are in care of ► US BANK TRUST NAT'L ASSOC MT Telephone no. ► 406-6	57-8	127	
17	Located at ▶P.O. BOX 30678, BILLINGS, MT ZIP+4 ▶5			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	<u> </u>		$\overline{\Box}$
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
10	securities, or other financial account in a foreign country?	16	• • •	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			
	country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	ــــــــــــــــــــــــــــــــــــــ		
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(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?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)		i	
b	o 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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 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? Yes X No			
	If "Yes," list the years >			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	: If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>		·	
3 <i>a</i>	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	o 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,		ļ	
	Form 4720, to determine if the foundation had excess business holdings in 2011) N/A	3ь		
4 a	a 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 leopardy before the first day of the tax year beginning in 2011?	4h		x

Form **990-PF** (2011)

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

CHARLES M. BAIR MEMORIAL TRUST

Form 990-PF (2011) C/O ANDERSON ZURMUEHLEN & CO., P.	.C. 81-0)370774 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	"NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	4	
	-	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	***************************************	<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic	ral information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produ	ced, etc.	Expenses
1 N/A		
		
2		
3		
		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lin	nes 1 and 2.	Amount
1 <u>N/A</u>		
2		
All other program-related investments. See instructions.		
3		

Form **990-PF** (2011

Total. Add lines 1 through 3

<u>For</u>	m 990-PF (2011) C/O ANDERSON ZURMUEHLEN & CO., P.C.	81-0	0370774	Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	ee instructions)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
а	Average monthly fair market value of securities	1a	4,674	<u>,113.</u>
b	Average of monthly cash balances	1b	34	,058.
C	Fair market value of all other assets	1c		<u>,868.</u>
đ	Total (add lines 1a, b, and c)	1d	4,721	,039.
е	Reduction claimed for blockage or other factors reported on lines 1a and			
	1c (attach detailed explanation) SEE STATEMENT 12 1e 4,192,378.			
2	Acquisition indebtedness applicable to line 1 assets	2		0.
3	Subtract line 2 from line 1d	3	4,721	,039.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	70	,816.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	4,650	,223.
6	Minimum investment return. Enter 5% of line 5	6	232	,511.
P	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here in and do not complete this part.)	d certain		
1	Minimum investment return from Part X, line 6	1	232	,511.
2a	Tax on investment income for 2011 from Part VI, line 5			-
b				
C		2c	1	876.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	230	,635.
4	Recoveries of amounts treated as qualifying distributions	4		0.
5	Add lines 3 and 4	5	230	,635.
6	Deduction from distributable amount (see instructions)	6		0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	230	635.
Р	Part XII Qualifying Distributions (see instructions)			
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,060	<u>,307.</u>
b		1b		0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2		
3	Amounts set aside for specific charitable projects that satisfy the:			
а	Suitability test (prior IRS approval required)	3a		
b	Cash distribution test (attach the required schedule)	3b		
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	1,060	307.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment			
	income. Enter 1% of Part I, line 27b	5		0.

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

Form **990-PF** (2011)

1,060,

6 Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

CHARLES M. BAIR MEMORIAL TRUST C/O ANDERSON ZURMUEHLEN & CO., P.C.

Part XIII Undistributed Income (see instructions)

		· · · · · · · · · · · · · · · · · · ·	····-	
	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,	30,700	100.0 prior to 2010	2010	
line 7				230,635.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
b Total for prior years:				
, ,		0.		
3 Excess distributions carryover, if any, to 2011:				
a From 2006				
b From 2007				
c From 2008				
d From 2009				
e From 2010 1,060,057.				
f Total of lines 3a through e	1,060,057.			
4 Qualifying distributions for 2011 from				
Part XII, line 4: ► \$ 1,060,307.				
a Applied to 2010, but not more than line 2a			0.	· · · · · · · · · · · · · · · · · ·
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2011 distributable amount				230,635.
e Remaining amount distributed out of corpus	829,672.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	1,889,729.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2010. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract				
lines 4d and 5 from line 1. This amount must				_
be distributed in 2012				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by	4 04 5 000			
section 170(b)(1)(F) or 4942(g)(3)	1,015,000.		· !!=	· · · · · · · · · · · · · · · · · · ·
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012.	074 700			
Subtract lines 7 and 8 from line 6a	874,729.			
O Analysis of line 9:				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009				
d Excess from 2010 45,057. e Excess from 2011 829,672.		İ		
e Excess from 2011 829,672.				Form QQQ-DF (2011)

C/O ANDERSON ZURMUEHLEN & CO.

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81-0370774

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Form 990-PF (2011)

C/O ANDERSON ZURMUEHLEN & CO., P.C.

81-0370774 Page 11

Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution Foundation show any relationship to Amount status of any foundation manager Name and address (home or business) or substantial contributor recipient a Paid during the year NONE BILLINGS CLINIC FOUNDATION PUBLIC GENERAL EXPENSE OR 2917 10TH AVENUE NORTH CAPITAL EXPENDITURES BILLINGS MT 59101 275,000. FIRST CHURCH CHRIST SCIENTIST NONE PUBLIC GENERAL EXPENSE OR CAPITAL EXPENDITURES 7 BURLINGTON AVENUE 15,000. BILLINGS MT 59101 FIRST CHURCH CHRIST SCIENTIST NONE PUBLIC GENERAL EXPENSE OR CAPITAL EXPENDITURES 175 HUNTINGTON AVE 40,000. BOSTON, MA 021153117 NONE PUBLIC GENERAL EXPENSE OR MOUNTAINVIEW MEDICAL CENTER 16 WEST MAIN CAPITAL EXPENDITURES WHITE SULPHUR SPRINGS, MT 59645 60,000. SCHOLARSHIP SCHOLARSHIPS TO VARIOUS RECIPIENTS NONE N/A PO BOX 30678 BILLINGS MT 59101 582 677. CONTINUATION SHEET(S) Total 032 677 b Approved for future payment NONE Total

Form 990-PF (2011)

Form 990-PF (2011)

Part XVI-A Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated.	Unrelat	ed business income		ded by section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	Code		1 3000		· · · · · · · · · · · · · · · · · · ·
a	-		+		
b	ŧ		·		
d	ì				····
e	1		11		· · · · · · · · · · · · · · · · · · ·
1					·····
g Fees and contracts from government agencies	_				
2 Membership dues and assessments			11		· · · · · · · · · · · · · · · · · · ·
Interest on savings and temporary cash					
investments			<u> </u>		
Dividends and interest from securities			14	117,832.	
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					·
6 Net rental income or (loss) from personal					
property			1		
7 Other investment income			15	4,555.	
8 Gain or (loss) from sales of assets other					
than inventory			18	-8,134.	
9 Net income or (loss) from special events			+		
Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a	· ·	1	+ +		
b			+		
C			+	-	
c		0		114 253	
c d e Subtotal. Add columns (b), (d), and (e)		0	•	114,253.	114.253
c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e)		0			114,253
c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)			13	114,253
c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities	to the Acc	omplishment of E	xemp	13 t Purposes	114,253
c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acc	omplishment of E	xemp t	t Purposes uted importantly to the accomp	114,253
c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities	s to the Acc	omplishment of E	xemp t	t Purposes uted importantly to the accomp	114,253
c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acc	omplishment of E	xemp t	t Purposes uted importantly to the accomp	114,253
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acc	omplishment of E	xemp t	t Purposes uted importantly to the accomp	114,253
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acc	omplishment of E	xemp t	t Purposes uted importantly to the accomp	114,253
c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acc	omplishment of E	xemp t	t Purposes uted importantly to the accomp	114,253
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c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acc	omplishment of E	xemp t	t Purposes uted importantly to the accomp	114,253
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c d e Subtotal. Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acc	omplishment of E	xemp t	t Purposes uted importantly to the accomp	114,25
c d e 2 Subtotal. Add columns (b), (d), and (e) 3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities Line No. Explain below how each activity for which in	s to the Acc	omplishment of E	xemp t	t Purposes uted importantly to the accomp	114,253

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Part 2)-PF (2011)				URMUEH				= 81− ships With No	0370774	Page 13
Fart			negardir anization		isiers to a	and Irans	actions a	ina neiation	siiibs witti ido	пспаптавіе	
4 Did					of the follows	a with any off	or organizatio	n described in sec	tion 501(c) of		Yes No
		-				-	-		30 (c) O		163 140
	Code (other th			•			political organi	izations:			
	nsfers from the	reporting to	unoalion to a	noncharita	ioie exempt ori	yanızadon ol.				4-40	\ \ v
	Cash									1a(1)	<u> </u>
	Other assets									1a(2)	X
_	er transactions										
٠.	Sales of asset		-	_						16(1)	X
	Purchases of				organization					1b(2)	X
(3)	Rental of facil	ties, equipm	ent, or other a	ssets						1b(3)	X
(4)	Reimburseme	nt arrangem	ents							1b(4)	X
(5)	Loans or loan	guarantees								1b(5)	X
(6)	Performance	of services o	r membership	or fundra	ısıng solıcıtatıo	ons				1b(6)	X
c Sha	aring of facilities	s, equipment	, mailing lists,	other asso	ets, or paid em	ployees				1c	<u> </u>
d If th	ne answer to an	y of the abov	/e is "Yes," cor	nplete the	following sche	dule. Column	(b) should alv	vays show the fair	market value of the	goods, other asse	ets,
ors	services given b	y the reporti	ng foundation	. If the fou	ndation receive	ed less than fa	ıır market valu	e in any transactio	on or sharing arrange	ement, show in	
col	umn (d) the val	ue of the god	ds, other asse	ets, or serv	vices received.			· · · · · · · · · · · · · · · · · · ·			
(a) Line n	o (b) Ama	unt involved	(c) Name o	f noncharitable	e exempt orga	nızatıon	(d) Description	on of transfers, transaction	ons, and sharing arra	angements
					N/A						
									· · · · · · · · · · · · · · · · · · ·		
				·							
				·							
	-										
						. ,					
ın s	he foundation of section 501(c) of Yes," complete	of the Code (other than sec				exempt organi	zations described		Yes	X No
		(a) Name o	f organization			(b) Type of	organization		(c) Description of re	elationship	
		N/	A				,				
											_
Sign Here	and belief, it is t	rue, correct, ar Wyn	U.S. Bank	laration of p	reparer (other that	n taxpayer) is ba	schedules and sed on all inform	TRUST	e best of my knowledge er has any knowledge EE	May the IRS d return with the shown below (preparer
			Sized Signa	ature	Preparer's s	Date		Title Date	Check If	PTIN	
	Printi	ype preparer	2 HATTIE		richaiei 8 8	igilatüle A		2 / /	self- employed	7° 1 11W	
D-:-			D-00	~~~	1/2	<i>~</i>	a a=	1/8/2	Sen- employed	D00001	7.4.2
Paid	DAV	TD S.	RIGG,	CPA	DAATD	S. RIG	G, CP			P00031	/45

Form **990-PF** (2011)

406-245-5136

Preparer

Use Only

Firm's name ► ANDERSON ZURMUEHLEN & CO., P.C.

Firm's address ▶ 1601 LEWIS AVE, STE 105 BILLINGS, MT 59102

Firm's EIN

Phone no.

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution show any relationship to Foundation Amount any foundation manager or substantial contributor status of Name and address (home or business) recipient WHEATLAND MEMORIAL HOSPITAL AND NONE PUBLIC GENERAL EXPENSE OR CAPITAL EXPENDITURES NURSING CENTER 530 3 NORTHWEST 60,000. HARLOWTON MT 59036 60,000. Total from continuation sheets

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

CHARLES M. BAIR MEMORIAL TRUST

OMB No 1545-0047

Employer identification number

2011

	C/O ANDERSON ZURMUEHLEN & CO., P.C.	81-0370774						
Organization type (check	cone)·							
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	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
Note. Only a section 501	n is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ri	ule. See instructions.						
General Rule								
•	ion filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in more) and II.	noney or property) from any one						
Special Rules								
509(a)(1) and 17	1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the reg 0(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the n (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.	=						
total contributio	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 <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.							
contributions for If this box is che purpose. Do not	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.							
-	o that is not covered by the General Rule and/or the Special Rules does not file Schedule	• • • • • • • • • • • • • • • • • • • •						
	on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part set the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	ा, IIIIE 2 01 IIS FORM 990-PF, 10						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization

CHARLES M. BAIR MEMORIAL TRUST

C/O ANDERSON ZURMUEHLEN & CO., P.C.

Employer identification number

81-0370774

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

· uiti	Continuators (see instructions). Osc duplicate copies or l'art in additions	a space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	BAIR RANCH FOUNDATION C/O U.S. BANK P.O. BOX 30678 BILLINGS, MT 591150678	\$800,000.	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Occash (Complete Part II if there Is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II if there is a noncash contribution.)

Name of organization

CHARLES M. BAIR MEMORIAL TRUST

Employer identification number

C/O ANDERSON ZURMUEHLEN & CO., P.C.

81-0370774

Part II	Noncash Property (see instructions) Use duplicate copies of Par	t II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
No. from	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	00 F7 000 BF\ (2011)

		Employer identification number
the total of <i>exclusively</i> religious, charitable, etc	c., contributions of \$1,000 or less for	ns completing Part III. etitet
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gif	t
Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gif	
Transferee's name, address, al	nd ZIP + 4	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gif	t
Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gif	t
Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee
	S. M. BAIR MEMORIAL TRU IDERSON ZURMUEHLEN & CO Exclusively religious, charitable, etc., indivers. Complete columns (a) through (e) and the total of exclusively religious, charitable, et Use duplicate copies of Part III if addition (b) Purpose of gift Transferee's name, address, and (b) Purpose of gift (b) Purpose of gift Transferee's name, address, and (b) Purpose of gift (b) Purpose of gift	AS M. BAIR MEMORIAL TRUST IDERSON ZURMUEHLEN & CO., P.C. Exclusively religious, charitable, etc., undividual contributions to section 501(c) year. Complete columns (a) through (e) and the following line entry. For organization the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for Use duplicate copies of Part III if additional space is needed (b) Purpose of gift (c) Use of gift Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 (b) Purpose of gift (c) Use of gift (c) Use of gift (e) Transfer of gift (f) Use of gift (g) Use of gift (h) Purpose of gift

FORM 990-PF DIVIDEN	DS AND	INTER	EST FR	OM SEC	JRITIES	STATEMENT	1
SOURCE		GROSS	AMOUN		PITAL GAINS DIVIDENDS	COLUMN (A AMOUNT)
DIVIDENDS FROM SECURITIES	_		65,45		0.	65,4	
INTEREST FROM SECURITIES			52,38	1 .	0.	52,3	81.
TOTAL TO FM 990-PF, PART I,	LN 4 =	<u> </u>	117,83	2.		117,8	32
FORM 990-PF	ΓO	HER I	NCOME			STATEMENT	2
DESCRIPTION		:	(A) REVEN PER BO		(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOI	
ROYALTY INCOME			4,555.		4,555.	. 0	
TOTAL TO FORM 990-PF, PART I	, LINE	11		4,555.	4,555.		0.
FORM 990-PF		LEGAL	FEES			STATEMENT	3
	(<i>P</i>	A)	(в)	(C)	(D)	
DESCRIPTION	EXPEN PER E	NSES BOOKS		NVEST- INCOME		CHARITA	
-					NET INCOME	CHARITAI PURPOSI	
DESCRIPTION LEGAL FEES TO FM 990-PF, PG 1, LN 16A		BOOKS		INCOME	NET INCOME	CHARITAI PURPOSI	ES
LEGAL FEES TO FM 990-PF, PG 1, LN 16A	PER E	765.		382 382	NET INCOME	CHARITAI PURPOSI	ES 83.
LEGAL FEES	PER E	765. 765. COUNTI	MENT NG FEE	382 382	NET INCOME	CHARITAL PURPOSI 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3	83. 83.
LEGAL FEES TO FM 990-PF, PG 1, LN 16A FORM 990-PF	ACC (A EXPEN PER E	765. 765. COUNTI	MENT NG FEE	382 382 S B) NVEST-	NET INCOME (C) ADJUSTED NET INCOME	CHARITAL PURPOSI 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3	83. 83.

FORM 990-PF	TAX	ES		STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM			
FEDERAL TAXES	2,260.		0.	0.	0.
TO FORM 990-PF, PG 1, LN 18	2,260.		0.	0.	0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM			
MINERAL FEES MISCELLANEOUS	606. 372.	60		0.	0.
TO FORM 990-PF, PG 1, LN 23	978.		8.	0.	0.
FORM 990-PF U.S. AND S	STATE/CITY G	OVERNMENT O	BLIGATIONS	STATEMENT	7
DESCRIPTION	U.S GOV'		BOOK VALUE	FAIR MARKET	<u> </u>
DESCRIPTION	GOV'		BOOK VALUE 227,062.		
	$\frac{\text{GOV'}}{\text{X}}$			VALUE	57.
VARIOUS US GOVERNMENT OBLIGAT	GOV' TIONS X TIONS	T GOV'T 1	227,062.	VALUE 236,65	57.

FORM 990-PF C	ORPORATE STOCK		STATEMENT	8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	ı
VARIOUS CORPORATE STOCK HOLDINGS	2,819,529.	3,287,07	4.	
TOTAL TO FORM 990-PF, PART II, LI	NE 10B	2,819,529.	3,287,07	4.
FORM 990-PF C	ORPORATE BONDS		STATEMENT	9
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE	ı
VARIOUS CORPORATE BONDS	924,140.	1,019,15	5.	
TOTAL TO FORM 990-PF, PART II, LI	924,140.	1,019,15	5.	
FORM 990-PF OT	HER INVESTMENTS		STATEMENT	10
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE	ı
ROYALTY INTERESTS	COST	6,814.	12,90	6.
TOTAL TO FORM 990-PF, PART II, LI	NE 13	6,814.	12,90	6.
FORM 990-PF	OTHER ASSETS		STATEMENT	11
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE	ı
BAIR RANCH FOUNDATION MEMBERSHIP				
INTEREST	4,192,378.	4,192,378.	4,192,37	8.

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FORM 990-PF

REDUCTION EXPLANATION PART X, LINE 1E

STATEMENT

EXPLANATION FOR REDUCTION CLAIMED FOR BLOCKAGE OR OTHER FACTORS

THE CHARLES M BAIR MEMORIAL TRUST HAS A MEMBERSHIP INTEREST IN ANOTHER PRIVATE FOUNDATION, THE BAIR RANCH FOUNDATION. THE BAIR RANCH FOUNDATION MAKES ANNUAL DISTRIBUTIONS BASED ON THE VALUE OF ITS ASSETS. THE CONTRIBUTIONS MADE TO THE CHARLES M BAIR MEMORIAL TRUST FROM THE BAIR RANCH FOUNDATION ARE TREATED AS PASS THROUGH CONTRIBUTIONS. ACCORDINGLY, THE VALUE OF THE MEMBERSHIP INTEREST IS NOT INCLUDED AS IT IS CONSIDERED AN EXEMPT ASSET AND TO INCLUDE THE VALUE HERE WOULD RESULT IN DUPLICATION.

AS TO THE VALUE OF THE MEMBERSHIP INTERESTS, BOOK VALUE HAS BEEN UTILIZED. THE MEMBERSHIPS INTEREST IS NOT TRANSFERABLE OR SELLABLE AND THESE RESTRICTIONS CREATE A SITUATION WHEREBY THE TRUE VALUE IS NOT EASILY DETERMINABLE. SINCE IT IS AN EXEMPT ASSET THE VALUE IS NOT A SIGNIFICANT ISSUE. ACCORDINGLY, BOOK VALUE HAS BEEN UTILIZED.

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 13

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

US BANK TRUST NATIONAL ASSOCIATION OF MONTANA BOX 30678

BILLINGS, MT 59115

TELEPHONE NUMBER NAME OF GRANT PROGRAM

(406)-657-8134

THE CHARLES M. BAIR MEMORIAL TRUST

FORM AND CONTENT OF APPLICATIONS

SEE STMT 14

ANY SUBMISSION DEADLINES

THE TRUSTEES WILL PROCESS SCHOLARSHIP APPLICATIONS RECEIVED AT ANY TIME PRIOR TO APRIL FIFTEENTH. SEE STMT 12 & 13 FOR GRANT SUBMISSION DEADLINES

RESTRICTIONS AND LIMITATIONS ON AWARDS

SEE STMT 14