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Form **990-P.F**Department of the Treasury Internal Revenue Service

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

I reated as a Private Foundation

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

2012

For calendar year 2012 or tax year beginning , and ending Name of foundation A Employer identification number E A HINDERMAN SCHOLARSHIP MEMORIAL 81-0392053 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number P O BOX 236 (406)862-3650 City or town, state, and ZIP code C If exemption application is pending, check here WHITEFISH, MT 59937 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation Check type of organization: E if private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust (Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Cash Accrual F If the foundation is in a 60-month termination (from Part II, col. (c), line 16) Other (specify) under section 507(b)(1)(B), check here 914,534. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (c) Adjusted net (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income N/A Contributions, gifts, grants, etc., received Check X If the foundation is not required to attach Sch B Interest on savings and temporary cash investments 21 21 STATEMENT 40,805. 40,595 STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) SCANNED SEL & KUTS Revenue 8,592. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 195,524. 8,592 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold IGDEN, c Gross profit or (loss) 11 Other income 49,208 49,418 Total Add lines 1 through 11 0. 0 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 555 0. **b** Accounting fees STMT 3 0 c Other professional fees 9. 9. 0. and Administrative 17 Interest 560 154 0. STMT 4 18 Taxes 19 Depreciation and depletion 20 Occupancy Travel, conferences, and meetings 21 22 Printing and publications 0. 254 0 23 Other expenses STMT 5 24 Total operating and administrative 1,378 163 0. expenses. Add lines 13 through 23 38,250 250. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 39,628 163 38,250. Add lines 24 and 25 27 Subtract line 26 from line 12: 9,790. 8 Excess of revenue over expenses and disbursements 49,045b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see instructions.

Б	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
	art	Balance Sheets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing		752.	752.
	2	Savings and temporary cash investments	23,506.	17,715.	17,715.
	3	Accounts receivable ►			
		Less: allowance for doubtful accounts ▶			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts ▶			
	5	Grants receivable			
	-	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
	′	Less: allowance for doubtful accounts			
		Inventories for sale or use			
Assets	-				
Ass		Prepaid expenses and deferred charges	55,725.	45,882.	45,882.
_	l	Investments - U.S. and state government obligations STMT 6			
	ı	Investments - corporate stock STMT 7	194,897.	141,905.	141,905.
	l	Investments - corporate bonds STMT 8	146,052.	116,026.	116,026.
	11	Investments - land, buildings, and equipment basis		i	
		Less accumulated depreciation			
	12	Investments - mortgage loans	404 500	500 054	500 054
	13	Investments - other STMT 9	434,709.	592,254.	592,254.
	14	Land, buildings, and equipment; basis ▶			
		Less accumulated depreciation			
	15	Other assets (describe			
_	16	Total assets (to be completed by all filers)	854,889.	914,534.	914,534.
	17	Accounts payable and accrued expenses			
	18	Grants payable			
Ş	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
⋍	22	Other liabilities (describe)			
				1	
	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.			
Š	24	Unrestricted			
ä	25	Temporarily restricted			
Bal		Permanently restricted			
Net Assets or Fund Balanc		Foundations that do not follow SFAS 117, check here			
교		and complete lines 27 through 31.			
ò	27	Capital stock, trust principal, or current funds	0.	0.	
et Se	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
Ass	29	Retained earnings, accumulated income, endowment, or other funds	854,889.	914,534.	
e E	30	Total net assets or fund balances	854,889.	914,534.	
Z	30	Total liet assets of fully paramoes	00270030		
	21	Total liabilities and net assets/fund balances	854,889.	914,534.	
=				<u> </u>	
P	art	III Analysis of Changes in Net Assets or Fund Ba	alances		
-	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30		
1		st agree with end-of-year figure reported on prior year's return)	•	1	854,889.
9	•	r amount from Part I, line 27a		2	9,790.
		r increases not included in line 2 (itemize) UNREALIZED	CATN/(LOSS)	3	49,855.
-		lines 1, 2, and 3	71111/ \ HODD /	4	914,534.
		eases not included in line 2 (itemize)		5	0.
-			Jumn (h) line 30	6	914,534.
0	rota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	namm (v), mie ov	101	714,704.

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	HINDERMAN SCH			L		81-039	2053 Page 3
(a) List and descr	the the kind(s) of property sold rehouse; or common stock, 20	l (e.g., real estate,	i income	(b) How acquir P - Purchase D - Donation	red (c	Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a							
b SEE ATTACHED	STATEMENT						
<u>c</u>				<u> </u>			
<u>d</u>							
<u>e</u>	(f) Depresioner allowed	(a) Coo	at or other book			(h) Coup or (loce)	·
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain or (loss) (e) plus (f) minus (
a b							
C			•				
d	<u> </u>						
e 195,524.			186,93	2.			8,592.
Complete only for assets showing	g gain in column (h) and owne	d by the foundation	on 12/31/69			ains (Col. (h) gain	
(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			(), but not less than Losses (from col. ()	
a							
<u>b</u>							
<u>c</u>			 			-	
<u>d</u>							8,592.
e	C 14		7	<u> </u>			0,352.
2 Capital gain net income or (net cap	oital loss) 🐧 If (loss), ent	enter in Part I, line er -0- in Part I, line) 2			8,592.
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,		(5) and (6):		}		/-	
If (loss), enter -0- in Part I, line 8	nder Section 4940(e)	for Poducod	Tay on Not	lovestmer	t Inco	N/A	- ·
					it iiico	ille	
(For optional use by domestic private	toundations subject to the sec	tion 4940(a) tax on	i net investment ii	icome.)			
If section 4940(d)(2) applies, leave th	ıs part blank.						
Was the foundation liable for the sect				riod?			Yes X No
1 Enter the appropriate amount in e				ntries.			
(a) Base period years Calendar year (or tax year beginnir	(b) Adjusted qualifyin		Net value of no	(c) ncharitable-use	assets	Distrib (col. (b) div	(d) ution ratio ided by col. (c))
2011		35,034.		853,	868.		.041030
2010		37,949.			251.		.047010
2009		29,615.			<u>470.</u>		.040878
2008		31,053.			<u>753.</u>		.041307
2007		29,404.		828,	992.	 	.035470
2 Total of line 1, column (d)						2	.205695
3 Average distribution ratio for the 5 the foundation has been in exister		total on line 2 by 5,	or by the number	of years		3	.041139
4 Enter the net value of noncharitab	le-use assets for 2012 from Pa	art X, line 5				4	889,232.
5 Multiply line 4 by line 3						5	36,582.
6 Enter 1% of net investment incom	ie (1% of Part I, line 27b)					6	490.
7 Add lines 5 and 6	· · · · · · · ·					7	37,072.
8 Enter qualifying distributions from	n Part XII. line 4					8	38,250.
If line 8 is equal to or greater than		l, line 1b, and comp	olete that part usir	ıg a 1% tax rate.		· · · · · · · · · · · · · · · · · · ·	
See the Part VI instructions.						F	orm 990-PF (2012)

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	rt VI Excise Tax Based on Investment Income (Section 494		· 4948 -	see instr	uctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and e					
	Date of ruling or determination letter: (attach copy of letter if ned					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► X and enter 1%	1		4	90.
	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). 丿				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. O	Others enter -O-)	2			<u>0.</u>
3	Add lines 1 and 2		3		4	90.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. C	Others enter -0-)	4			<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5		4	90.
6	Credits/Payments:					
а	2012 estimated tax payments and 2011 overpayment credited to 2012	6a 360	<u> </u>			
b	Exempt foreign organizations - tax withheld at source	6b				
	Tax paid with application for extension of time to file (Form 8868)	6c				
	Backup withholding erroneously withheld	6d				
	Total credits and payments. Add lines 6a through 6d		7		3	60.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	ached	8			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	•	- 9		1	30.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10			
11	_ '.'	Refunded	- 11			
	nrt VII-A Statements Regarding Activities					
1a	During the tax year, did the foundation attempt to influence any national, state, or local legis	slation or did it participate or interve	ne in		Yes	No
	any political campaign?			1a		X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purpo	oses (see instructions for definition)	?	1b		X
_	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities an					
	distributed by the foundation in connection with the activities.	, ,				
c	Did the foundation file Form 1120-POL for this year?			10		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	e vear:				
·	(1) On the foundation. > \$ 0. (2) On foundation managers).			
	Enter the reimbursement (if any) paid by the foundation during the year for political expend					
·	managers. ▶ \$0 .			1		
2	Has the foundation engaged in any activities that have not previously been reported to the I	IRS?		2	ļ	X
_	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing	instrument, articles of incorporatio	n. or			}
·	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the chang			3		X
As	Did the foundation have unrelated business gross income of \$1,000 or more during the year			4a		X
	of "Yes," has it filed a tax return on Form 990-T for this year?		N	/A 4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year's	?		5		X
·	If "Yes," attach the statement required by General Instruction T.					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied e	either:				
·	By language in the governing instrument, or	-				
	By state legislation that effectively amends the governing instrument so that no mandator	ry directions that conflict with the s	tate law			
	remain in the governing instrument?	.,		6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	Х	
•	If "Yes," complete Part II, col. (c), and Part XV.				1	
Q a	Enter the states to which the foundation reports or with which it is registered (see instruction	ons) ►				
98	MT	-··- , -				
	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	Attorney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation			86	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of se	ection 4942(i)(3) or 4942(i)(5) for a	alendar	"	† <u></u> -	\vdash
J	year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," or			9	1	_X_
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a scheduler of the tax year? If "Yes," attach a scheduler of the tax year? If "Yes," attach a scheduler of the tax year? If "Yes," attach a scheduler of the tax year? If "Yes," attach a scheduler of the tax year? If "Yes," attach a scheduler of the tax year? If "Yes," attach a scheduler of the tax year? If "Yes," attach a scheduler of the tax year? If "Yes," attach a scheduler of the tax year? If "Yes," attach a scheduler of tax year?			10		X
	and because opposite opposition positions against any law in 100's attached contra					

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Pa	rt 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		<u>X</u>
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?	13	X	
	Website address ► NONE			
14	The books are in care of ▶ PAT JARVI Telephone no. ▶ (406)	862-	365	0
	Located at ▶PO BOX 236, WHITEFISH, MT			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A	
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	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	1.0		
	country	ŀ		
De	irt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	I		
1 0			Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	-	103	140
18	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? Yes X No	-		
	(1) 4.19-9 0-1 0-1 0-1 1	ĺ		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	ŀ		
	(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"		1	
	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.)	1		
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)?	1b	<u> </u>	
	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 2012?	10	İ	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)):			
	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
•	before 2012?			
	If "Yes," list the years \triangleright			
	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
L	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
		2b	ľ	
		20	 	
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time	İ		İ
38				
t	of "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after	1		1
	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		1	
	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 2012.) N/A	3b	1	
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	_4a_	↓ —	X
t	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			<u> </u>
	had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		<u> X</u>
	F	orm 99 0)-PF	(2012)

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Part VII-B Statements	Regarding Activities for Which I	orm 4720 May Be I	Required (continu	ued)		
5a During the year did the founda	ation pay or incur any amount to:					ļ
(1) Carry on propaganda, or	otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No		
(2) Influence the outcome of	any specific public election (see section 4955); o	r to carry on, directly or indire				
any voter registration driv	/e?			8 X No		
	vidual for travel, study, or other similar purposes		Ye	s X No		
	anization other than a charitable, etc., organization	n described in section				
509(a)(1), (2), or (3), or s				s X No		
	other than religious, charitable, scientific, literary,	or educational purposes, or t				
the prevention of cruelty				s X No		
	-(5), did any of the transactions fail to qualify und		in Regulations	/-		
	nt notice regarding disaster assistance (see instru	· ·		N/A	5b	
	rent notice regarding disaster assistance check h					
•	ion 5a(4), does the foundation claim exemption fi					
expenditure responsibility for	<u> </u>		I/A	s L No		
	ent required by Regulations section 53.494					1
•	year, receive any funds, directly or indirectly, to	pay premiums on		. 		
a personal benefit contract?			Ye	s X No	<u></u>	
	year, pay premiums, directly or indirectly, on a p	ersonal denetit contract?		-	6b	X
If "Yes" to 6b, file Form 88		h-li i		s X No		
	r, was the foundation a party to a prohibited tax s				7b	
Information	eive any proceeds or have any net income attribute About Officers, Directors, Trust	nable to the transaction?	nagers Highly		70	
Part VIII Paid Emplo	yees, and Contractors	ees, i oulldation inc	magers, riigin			
-	trustees, foundation managers and their	compensation.				
		(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deterred	(e)	Expense ount, other
(a) [[]	Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	acco	ount, other owances
SEE STATEMENT 10)		0.	0.		0.
					ļ	
			<u></u>		<u> </u>	
2 Compensation of five high	est-paid employees (other than those inc		enter "NONE."	(d) Contributions to		
(a) Name and address of	each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit plans and deferred	acci	Expense ount, other
(2) 12		devoted to position	(-, - · · · · · · · · · · · · · · · · · ·	compensation	all	owances
NONE						
					ļ	
			<u> </u>			
		-				
				 		
		-				
					 	
		-		1		
Table number of other conditions	poid over \$50,000		L		Ь	0
Total number of other employees	paid over \$50,000					<u>v</u>

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High Paid Employees, and Contractors (continued)	ly		
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 ser	vice	(c) Com	pensation
NONE			
Total number of others receiving over \$50,000 for professional services		<u> </u>	0
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 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 lines 1 and 2.		Amount	
1 N/A			
2			
All other program-related investments. See instructions.			
3			
Total. Add lines 1 through 3	•		0.
		Form 990-l	PF (2012)

Part XII Qualifying Distributions (see instructions)

4940(e) reduction of tax in those years.

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:

а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	38,250.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	38,250.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	1 1	
	income. Enter 1% of Part I, line 27b	5	490.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	_6	37,760.

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

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
Distributable amount for 2012 from Part XI, line 7				43,972.
2 Undistributed income, if any, as of the end of 2012				
a Enter amount for 2011 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2012:		0.		
a From 2007 30,000.				
b From 2008				
c From 2009				
d From 2010				
e From 2011				
	30,000.			
f Total of lines 3a through e	30,000.			
4 Qualifying distributions for 2012 from Part XII, line 4: ▶\$ 38, 250.				
			0.	
a Applied to 2011, but not more than line 2a				
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)				·
c Treated as distributions out of corpus	0.			
(Election required - see instructions)				38,250.
d Applied to 2012 distributable amount	0.			30,230.
e Remaining amount distributed out of corpus	5,722.			5,722.
Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a))	5,122.			5,722.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	24,278.			
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 2011. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2012. Subtract			· -··	
lines 4d and 5 from line 1. This amount must				
be distributed in 2013				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2007				
not applied on line 5 or line 7	24,278.			
9 Excess distributions carryover to 2013.				
Subtract lines 7 and 8 from line 6a	0.			
Analysis of line 9:				
a Excess from 2008	1			
b Excess from 2009				
c Excess from 2010				
d Excess from 2011	İ			
e Excess from 2012				
		·		Form 990-PF (2012)

Form 990-PF (2012) E A HIN Part XIV Private Operating F	DERMAN SCHO	LARSHIP MEI	MORIAL	81-03	92053 Page 10
1 a If the foundation has received a ruling of			II-A, question 9)	N/A	
foundation, and the ruling is effective for			_		
b Check box to indicate whether the found			un section	4942(j)(3) or 49	42(1)(5)
2 a Enter the lesser of the adjusted net	Tax year	ing touridation described	Prior 3 years	4542(])(3) 01 45	42())(3)
income from Part I or the minimum	(a) 2012	(b) 2011	(c) 2010	(d) 2009	(e) Total
	(4) 2012	(0)2011	(0) 20 10	(4) 2000	(c) total
investment return from Part X for					
each year listed		<u> </u>	 		
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed		ļ		ļ	
d Amounts included in line 2c not					
used directly for active conduct of exempt activities		}		1	
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets					
(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:					<u> </u>
(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 Info	rmation (Comple	ete this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during t	he year-see inst	ructions.)			
Information Regarding Foundation List any managers of the foundation whyear (but only if they have contributed in NONE	o have contributed more		tributions received by the	foundation before the clos	e of any tax
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large portion	on of the ownership of a pa	irtnership or
NONE					
2 Information Regarding Contribution Check here ☐ If the foundation o	only makes contributions	to preselected charitable	organizations and does r	ot accept unsolicited requ	
the foundation makes gifts, grants, etc.	(see instructions) to indi	viduals or organizations	under other conditions, co	omplete items 2a, b, c, and	d
a The name, address, and telephone num HINDERMAN SCHOLARSHI GUIDANCE COUNSELOR,	P COMMITTEE	E, (406)862			
b The form in which applications should be WRITTEN APPLICATION,	e submitted and informa	ition and materials they s		E APPLICATE	ON
c Any submission deadlines:	111011 DC1100	- IIIIIOCKI	, <u> </u>	LILLYBIL	
APRIL 30		al avena sharatela fall	Lundo of institutions	ather feeters:	
d Any restrictions or limitations on awards WHITEFISH HIGH SCHOO				other factors:	

Part XV

Supplementary Information (continued)

Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to status of recipient Amount any foundation manager Name and address (home or business) or substantial contributor a Paid during the year CARROLL COLLEGE/ASHLEY MILLARD NONE COLLEGE SCHOLARSHIP 9 PARK AVENUE 9,000 WHITEFISH MT 59937 UNIVERSITY OF MONTANA/TAYLOR HAVENS NONE COLLEGE SCHOLARSHIP 311 PARK AVENUE 9.000. WHITEFISH, MT 59937 COLLEGE SCHOLARSHIP FVCC/MICAH GROSCHUPF NONE 216 BEAR TRAIL 4,500. WHITEFISH MT 59937 COLLEGE SCHOLARSHIP NONE MONTANA STATE UNIVERSITY/LAUREN STEVENS 344 BLANCHARD HOLLOW LANE WHITEFISH, MT 59937 1,500. COLLEGE SCHOLARSHIP NONE MONTANA STATE UNIVERSITY/MARGARET FRANKINO 177 SANDY RIVER WAY WHITEFISH MT 59937 9,000. SEE CONTINUATION SHEET(S) **▶** 3a 38,250, Total b Approved for future payment NONE **▶** 3b <u>Total</u>

Part XVI-A Analysis of Income-	Producing Activitie	S			
Enter gross amounts unless otherwise indicated.		usiness income		section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
8					
b					
C					
d					
e					
f					
g Fees and contracts from government agencies	s				
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	21.	
4 Dividends and interest from securities			14	40,805.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property		·····			
6 Net rental income or (loss) from personal			1		
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other			10	0 502	
than inventory			18	8,592.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
8				-	
b					
c	[[- 		
d					
12 Subtotal. Add columns (b), (d), and (e)		().	49,418.	0 .
13 Total. Add line 12, columns (b), (d), and (e)			<u> </u>		49,418
(See worksheet in line 13 instructions to verify calcu	lations.)				
Part XVI-B Relationship of Acti		plishment of	Exempt Pu	ırposes	
Line No. Explain below how each activity for v					nlishment of
the foundation's exempt purposes (other than by providing funds	for such purposes).		importantly to the decom	pholimone of
	, , , , , , , , , , , , , , , , , , ,				
				 	
				· ··-	
					

81-0392053 Page 13 Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No 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? a Transfers from the reporting foundation to a noncharitable exempt organization of: X (1) Cash 1a(1) (2) Other assets 1a(2) X **b** Other transactions: 16(1) (1) Sales of assets to a noncharitable exempt organization X 1b(2) (2) Purchases of assets from a noncharitable exempt organization 1b(3) (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements 15(4) X 1b(5) (5) Loans or loan guarantees X (6) Performance of services or membership or fundraising solicitations 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees d 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. (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) Line no N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/AUnder penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge return with the preparer shown below (see instr Sign Here X Yes Signature of officer or trustee Check [Preparer's signature Date Print/Type preparer's name self- employed SALLIE A. FOLEY,

CPX 08/27/13

Firm's name > JUNKERMIER, CLARK, CAMPANELLA, STEVENS P.C Firm's EIN > 81-0348775

Form **990-PF** (2012)

P00895220

406-862-2597

Phone no.

Paid

Preparer **Use Only**

Firm's address ▶ P. O. BOX 1398

WHITEFISH, MT 59937-1398

Part IV Capital Gains and Los	ses for Tax on Investment Income				
' (a) List and 2-story br	describe the kind(s) of property so ick warehouse; or common stock, 2	ld, e.g., real estate, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a GROWTH FUND OF		2 SHARES)	P	ļ	01/19/12
b GLACIER BANKCO			P		02/01/12
c ZIONS BANKCORPO		RES)	P		06/15/12
d BLOCK FINANCIA			P		08/02/12
	GO BONDS (10000	SHARES)	P		04/18/12
GMAC SMART NOT			P		08/15/12
g SOUTHWEST AIRL		RES)	P		07/11/12
h CBS CORP (1000	O SHARES)		P		04/18/12
I ZIONS BANKCORPO	DRATION (2000 SH	IARES)	P	VARIOUS	06/15/12
J FNR 1992-149 H	REMIC (PRINCIPA	L PAYMENTS)	P	VARIOUS	VARIOUS
k CAPITAL GAINS	DIVIDENDS				
1					
m					
n					
0					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale) Gain or (loss) plus (f) minus (g)	
a 20,995.		24,066.			-3,071.
b 42,035.		31,796.	_ 		10,239.
c 12,500.		13,521.			<u>-1,021.</u>
d 26,082.		25,548.			534.
e 10,395.		9,705.			690.
10,000.		8,970.			1,030.
g 11,095.		10,238.			857.
h 10,845.		9,755.			1,090.
50,000.		52,948.	· · · · · · · · · · · · · · · · · · ·		-2,948.
385.		385.	···		0.
k 1,192.					1,192.
l					
m					
n			<u></u>		
Complete only for assets showin	g gain in column (h) and owned by	the foundation on 12/31/69	/I) L oc	sses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	Gains (excess of	of col. (h) gain ove not less than "-0-")	
a					-3,071.
b					10,239.
C					-1,021.
d					534.
е					690.
ſ					1,030.
g					857.
h					1,090.
1					<u>-2,948.</u>
1					0.
k					1,192.
<u>L</u>					
m					
<u>n</u>			···		
0					
2 Capital gain net income or (net ca	pital loss) { If gain, also ente If (loss), enter "-	r in Part I, line 7 0-" in Part I, line 7	2		8,592.
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,		nd (6):	3	N/A	

E A HINDERMAN SCHOLARSHIP MEMORIAL 81-0392053

Part XV Supplementary Information

Part XV Supplementary Information	<u> </u>			
3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	oom build	
UNIVERSITY OF MONTANA/ABIGAIL	NONE		COLLEGE SCHOLARSHIP	
STRELLNAUER				
357 PLANTATION DRIVE				
WHITEFISH MT 59937				750
UNIVERSITY OF MONTANA/MICHELA	NONE		COLLEGE SCHOLARSHIP	
MILLETTE				
323 BLANCHARD HOLLOW				1,500
WHITEFISH, MT 59937				1,500
			COLL TOD GOVERNMENT	
LONI HANSON/UNIVERSITY OF GREAT FALLS 4870 HWY 93 SOUTH NO 73	NONE		COLLEGE SCHOLARSHIP	
WHITEFISH MT 59937				1,500
UNIVERSITY OF MONTANA/COURTNEY VON	NONE		COLLEGE SCHOLARSHIP	
LINDERN				
32 BRADY WAY WHITEFISH, MT 59937				1,500
				• • • •
Total from continuation sheets		L	1	5 250

FORM 990-PF INTEREST ON SAVI	NGS AND TE	MPORARY CAS	H IN	VESTMENTS	STATEMENT	1
SOURCE					AMOUNT	
DA DAVIDSON WHITEFISH CREDIT UNION						7. 14.
TOTAL TO FORM 990-PF, PART I,	LINE 3, C	OLUMN A				21.
FORM 990~PF DIVIDENT	S AND INTE	REST FROM S	ECUR	RITIES	STATEMENT	2
SOURCE	GROS	S AMOUNT		TAL GAINS	COLUMN (A AMOUNT)
DA DAVIDSON		41,997.		1,192.	40,805	
TOTAL TO FM 990-PF, PART I, I	.N 4	41,997.		1,192.	40,8	05.
FORM 990-PF	ACCOUNT	ING FEES			STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVES MENT INCO		(C) ADJUSTED NET INCOM		
ACCOUNTING FEES	555	•	0.			0.
TO FORM 990-PF, PG 1, LN 16B	555	•	0.			0.
FORM 990-PF	TA	XES			STATEMENT	4
DESCRIPTION		(B) NET INVES MENT INCO	T-		CHARITA	
EXCISE TAXES FOREIGN TAXES PAID	406 154		0.54.			0.
TO FORM 990-PF, PG 1, LN 18	560	. 1	54.			0.

	OTHER EXPENSES				STATEMENT	
DESCRIPTION	(A) (B) EXPENSES NET IN PER BOOKS MENT II			(C) ADJUSTED NET INCOM		
MEETING EXPENSE OFFICE SUPPLIES	225. 29.	0.				0.
TO FORM 990-PF, PG 1, LN 23	254.		0.			0.
FORM 990-PF U.S. AND	STATE/CITY G	OVERNMENT	OBL	GATIONS	STATEMENT	6
DESCRIPTION	U.S GOV''		вос	OK VALUE	FAIR MARKET VALUE	
DA DAVIDSON INVESTMENT ACCOUNT DA DAVIDSON INVESTMENT ACCOUNT		x		2,280. 43,602.	2,28 43,60	
TOTAL U.S. GOVERNMENT OBLIGAT	rions	•		2,280.	2,28	30.
TOTAL STATE AND MUNICIPAL GOV	VERNMENT OBL	IGATIONS		43,602.	43,60)2.
TOTAL TO FORM 990-PF, PART I	I, LINE 10A	:		45,882.	45,88	32.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	7
DESCRIPTION			вос	OK VALUE	FAIR MARKET VALUE	?
DA DAVIDSON INVESTMENT ACCOUNT	NT			141,905.	141,90)5.

FORM 990-PF	CORPORATE BONDS		STATI	EMENT	8	
DESCRIPTION		BOOK VALUE		MARKET ALUE	,	
DA DAVIDSON INVESTMENT ACCOUNT	-	116,02	6.	116,02	6.	
TOTAL TO FORM 990-PF, PART II, L	INE 10C	116,02	6.	116,02	6.	
FORM 990-PF O	THER INVESTMENTS		STATI	EMENT	9	
DESCRIPTION	VALUATION METHOD			FAIR MARKET VALUE		
DA DAVIDSON INVESTMENT ACCOUNT	FMV	592,25	4.	592,25	4.	
TOTAL TO FORM 990-PF, PART II, LINE 13		592,25	4.	592,254.		
	ST OF OFFICERS, DEED FOUNDATION MANAGE		STATI	EMENT	10	
		GERS	STATI EMPLOYEE BEN PLAN CONTRIB	EXPENS	E E	
TRUSTEES AN	D FOUNDATION MANA	GERS COMPEN-	EMPLOYEE BEN PLAN	EXPENS ACCOUN	E E	
NAME AND ADDRESS FRANK BARNES 1415 VOERMANS ROAD	TITLE AND AVRG HRS/WK PRESIDENT	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENS ACCOUN	SE IT O.	
NAME AND ADDRESS FRANK BARNES 1415 VOERMANS ROAD WHITEFISH, MT 59937 MARY YEATS 1005 9TH STREET EAST	TITLE AND AVRG HRS/WK PRESIDENT 1.00 SECRETARY	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENS	E IT	
NAME AND ADDRESS FRANK BARNES 1415 VOERMANS ROAD WHITEFISH, MT 59937 MARY YEATS 1005 9TH STREET EAST WHITEFISH, MT 59937 PAT JARVI PO BOX 506	TITLE AND AVRG HRS/WK PRESIDENT 1.00 SECRETARY 1.00 TREASURER	COMPEN- SATION 0.	EMPLOYEE BEN PLAN CONTRIB 0.	EXPENS	0.	

E A HINDERMAN SCHOLARSHIP	MEMORIAL		81	0392053
HEIDI HAUGEN PO BOX 127 WEST GLACIER, MT 59936	DIRECTOR 0.50	0.	0.	0.
BILL LABRIE 2040 LION MOUNTAIN LOOP WHITEFISH, MT 59937	DIRECTOR 0.50	0.	0.	0.
DOUG REED 520 SOMERS AVENUE WHITEFISH, MT 59937	DIRECTOR 0.50	0.	0.	0.
KRISTA SCHULZ 337 SHADY RIVER LANE WHITEFISH, MT 59937	DIRECTOR 0.50	0.	0.	0.
TOTALS INCLUDED ON 990-PF, F	AGE 6, PART VIII	0.	0.	0.

Estimated Tax on Unrelated Business Taxable 990-W OMB No. 1545-0976 **Income for Tax-Exempt Organizations 2013** (Worksheet) (and on Investment Income for Private Foundations) FORM 990-PF Department of the Treasury Internal Revenue Service (Keep for your records. Do not send to the Internal Revenue Service.) Unrelated business taxable income expected in the tax year Tax on the amount on line 1. See instructions for tax computation Alternative minimum tax (see instructions) 3 Total, Add lines 2 and 3 Estimated tax credits (see instructions) Subtract line 5 from line 4 6 Other taxes (see instructions) Total, Add lines 6 and 7 8 Credit for federal tax paid on fuels (see instructions) 9 10a Subtract line 9 from line 8. Note. If less than \$500, the organization is not required to make estimated tax payments. Private foundations, see instructions 10a b Enter the tax shown on the 2012 return (see instructions). Caution. If zero or the tax year was for less than 12 months, skip this line 490 and enter the amount from line 10a on line 10c c 2013 Estimated Tax. Enter the smaller of line 10a or line 10b. If the organization is required to skip line 10b, enter the amount ADJUSTED TO 520. from line 10a on line 10c 10c (d) (a) (b) (c) 09/16/13 12/16/13 Installment due dates (see instructions) 11 Required installments. Enter 25% of line 10c in columns (a) through (d) unless the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a 0 390. 130. 12 0 "large organization" (see instructions) 2012 Overpayment (see instructions) 13

Payment due. (Subtract line 13 from line 12.)

390

Form 886	8 (Rev. 1-2013)					Page 2		
If you a	are filing for an Additional (Not Automatic) 3-Month Ex	ctension,	complete only Part II and check this	box .		▶ X		
Note. On	ly complete Part II if you have already been granted an a	automatic	3-month extension on a previously f	led Form	8868.			
	are filing for an Automatic 3-Month Extension, comple							
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies ne	eded).		
			Enter filer's	identifyii	ng number	, see instructions		
						oyer identification number (EIN) or		
print								
File by the						392053		
ning your D. O. DOY, O.3.6				Social se	cunty num	ber (SSN)		
return See instructions	City, town or post office, state, and ZIP code. For a fe	oreign add	trace see instructions					
	WHITEFISH, MT 59937	oroigir auc	1000, 000 11011001010					
	, <u></u>					·-·-		
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4		
Applicati	on	Return	Application			Return		
Is For		Code	Is For			Code		
Form 990	or Form 990-EZ	01						
Form 990	-BL	02	Form 1041-A			08		
Form 472	0 (ındivıdual)	03	Form 4720			09		
Form 990	PF	04	Form 5227			10		
Form 990	Form 990-T (sec. 401(a) or 408(a) trust) 05 Form 6069				11			
Form 990	Form 990-T (trust other than above) 06 Form 8870				12			
STOP! D	o not complete Part II if you were not already granted	d an autor	natic 3-month extension on a prev	iously file	ed Form 88	68.		
	PAT JARVI							
		<u>HITEF</u>	ISH, MT 59937					
	none No. ► (406)862-3650		FAX No. ▶			. —		
	organization does not have an office or place of busines					. ▶ 📖		
• If this	is for a Group Return, enter the organization's four digit	_	· · · · · · · · · · · · · · · · · · ·					
box 🕨	. If it is for part of the group, check this box		ach a list with the names and EINs of	all memb	ers the ext	ension is for.		
		NOVEM	BER 15, 2013.					
	calendar year 2012 , or other tax year beginning		, and endin					
6 If th	ne tax year entered in line 5 is for less than 12 months, o	check reas	on: Initial return	Final ı	etum			
	Change in accounting period							
	tte in detail why you need the extension	C A MILLER	D THEODWANTON NO D	מגמפוס	TR 3 C	OWDI EME		
		GATHE	R INFORMATION TO P	REPAR	E A C	OMPLETE		
AI	ID ACCURATE RETURN.							
On If the	pis application is for Form 990.BL 990.BE 990.T 4720	or 6069 e	enter the tentative tay less any	<u> </u>	I			
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions				8a	\$	0.		
-	nis application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated		-			
	payments made. Include any prior year overpayment a			-	,			
	eviously with Form 8868.		a orosit and any amount paid	8b	s	94.		
	lance due. Subtract line 8b from line 8a. Include your pa	avment wi	th this form, if required, by using		•			
	TPS (Electronic Federal Tax Payment System). See instr	-	ar and form, in required, by doing	8c	s	0.		
			st be completed for Part II		· · · · · · · · · · · · · · · · · · ·	<u></u>		
	alties of perjury, I declare that I have examined this form, include orrect, and complete, and that I am authorized to prepare this f	ding accom	•	-	of my knowle	dge and belief,		
Signature				Date	•			
Orginature	THE			- Jun		8868 (Rev. 1-2013)		