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Form **990-PF**

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

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

OMB No 1545-0052
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On an Laurente College

Department of the Treasury Internal Revenue Service

Open to public Inspection

Ford	alen	dar year 2012 or tax year beginning MAY	1, 2012	, and ending	APR 30, 2013	
Nar	ne of	foundation			A Employer identification	number
M	au	de M. Schuetze Foundati	on			
C	<u>/0</u>	American State Bank &	Trust Co.		45-6063398	
Num	ber a	nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
P	0 :	Box 1446	_		(701) 774-	4100
City	or to	own, state, and ZIP code			C If exemption application is p	ending, check here
		liston, ND 58801				
G C	heck	all that apply Initial return	Initial return of a fo	ormer public charity	D 1 Foreign organizations	s, check here
		Final return	Amended return			
		Address change	Name change		2 Foreign organizations me check here and attach co	eting the 85% test, mputation
H C	heck	type of organization X Section 501(c)(3) ex	empt private foundation		E If private foundation sta	tus was terminated
] Se	ction 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation	under section 507(b)(1)	
I Fa	ır ma	arket value of all assets at end of year J Accounting	ng method: X Cash	Accrual	F If the foundation is in a (60-month termination
(fr	om l	Part II, col. (c), line 16)	her (specify)		under section 507(b)(1)	
_		376,805. (Part I, colui	mn (d) must be on cash l	basis)		
Pa	ırt l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
		necessarily equal the amounts in column (a)	expenses per books	income	income	(cash basis only)
	1	Contributions, gifts, grants, etc., received			N/A	
	2	Check X if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	2,155.	2,155.		Statement 1
	4	Dividends and interest from securities	1,625.	1,625.		Statement 2
	5a	Gross rents	11,935.	11,935.		Statement 3
	b	Net rental income or (loss) 10,774.				Statement 4
a)	6a	Net gain or (loss) from sale of assets not on line 10				
Revenue	b	Gross sales price for all assets on line 6a				
eve	7	Capital gain net income (from Part IV, line 2)		0.		
<u>~</u>	8	Net short-term capital gain			(15-1	1,-1)
	9	Income modifications	-,		1 1 2 2 2 2 2	-101
	10a	Gross sales less returns and allowances				ادی دروی
	b	Less Cost of goods sold			DEC 2	3 ZUIS
	C	Gross profit or (loss)			1.0	A SERVICE OF THE PARTY OF THE P
	11	Other income	14,797.	14,797.	1	Statement 5
	12	Total Add lines 1 through 11	30,512.	30,512.		*****
	13	Compensation of officers, directors, trustees, etc	14,110.	12,910.		1,200.
	14	Other employee salaries and wages	-			
s	i .	Pension plans, employee benefits				
ıse	16a	Legal fees	0.0.5			0.7.5
月の(こうぶいくひか and Administrative Expense	b	Accounting fees Stmt 6	875.	0.		875.
شَوْيِهِ	C	Other professional fees				
≾ુક	17	Interest	1 252	1 004		
∑. stra	18	Taxes Stmt 7	1,252.	1,084.		0.
्र ^क i	19	Depreciation and depletion	·			
Ç, E	20	Occupancy				
J∃(i ng and A	21	Travel, conferences, and meetings	120			120
E P	22	Printing and publications	129.	0.		129.
	23	Other expenses Stmt 8	445.	77.		43.
% € irat	24	Total operating and administrative	16 011	14 071		2 247
S co		expenses Add lines 13 through 23	16,811. 6,875.	14,071.	-	2,247. 6,875.
\$102 <i>L &</i> Operatin	25	Contributions, gifts, grants paid	0,0/3.			0,8/3.
ليون. ا	26	Total expenses and disbursements	23,686.	14,071.		9,122.
	-	Add lines 24 and 25	43,000.	14,0/1.		9,144.
		Subtract line 26 from line 12	6,826.			
		Excess of revenue over expenses and disbursements	0,040.	16,441.		
	1	Net investment income (if negative, enter -0-)		10,441.	N/A	
0006		Adjusted net income (if negative, enter -0-)	L	L	IN W	<u> </u>

Maude M. Schuetze Foundation
C/O American State Bank & Trust Co.

Form 990-PF (2012) C/O American State Bank		_	6063398 Page 2
Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing	102 222	100 710	100 710
2 Savings and temporary cash investments	182,233.	198,719.	198,719.
3 Accounts receivable ►			
Less: allowance for doubtful accounts			
4 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 >			
g 8 Inventories for sale or use			
9 Prepaid expenses and deferred charges			
10a investments - 0 3. and state government obligations			
b Investments - corporate stock		20 565	
c Investments - corporate bonds Stmt 9	0.	38,567.	37,980 <u>.</u>
11 Investments - land, buildings, and equipment basis			
Less accumulated depreciation			
12 Investments - mortgage loans			
13 Investments - other			
14 Land, buildings, and equipment. basis ► 58, 274.	F0 074	E0 274	00 465
Less accumulated depreciation	58,274.	58,274.	99,465. 40,641.
15 Other assets (describe ► <u>Mineral Interests</u>)	124,051.	124,051.	40,641.
	264 550	410 611	276 005
16 Total assets (to be completed by all filers)	364,558.	419,611.	<u>376,805.</u>
17 Accounts payable and accrued expenses			
18 Grants payable			
2 19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons		<u>-</u> .	
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable		41 000	
22 Other Habilities (describe ► Statement 10)	0.	41,000.	
00 T 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	۱	41 000	
23 Total liabilities (add lines 17 through 22)	0.	41,000.	
Foundations that follow SFAS 117, check here			
and complete lines 24 through 26 and lines 30 and 31.			
24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31 27 Control stock, trust principal, or surrout funds			
25 Temporarily restricted			
26 Permanently restricted Foundations that do not follow SFAS 117, check here		· · · · · · -	
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31	0.	0.	
27 Capital stock, trust principal, or current funds	0.	0.	
28 Paid-in or capital surplus, or land, bldg., and equipment fund	364,558.	378,611.	
28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances	364,558.		
30 Total net assets or fund balances	304,330.	378,611.	
24 Tatal liabilities and ask assats found belongs	364,558.	419,611.	
31 Total liabilities and net assets/fund balances		417,011.	
Part III Analysis of Changes in Net Assets or Fund E	Balances		
1 Total net assets or fund balances at beginning of year - Part II, column (a), line	30		
(must agree with end-of-year figure reported on prior year's return)	30		364,558.
2 Enter amount from Part I, line 27a		1	6,826.
- OI	Adingtment	3	7,227.
	va lascuent	4	378,611.
4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) ▶		5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b) line 30	6	378,611.
V Total field association balances at one or year (line 4 millios line of 2 falt li, b	ownin toly into oo		Form 990-PF (2012)

Maude M. Schuetze Foundation
C/O American State Bank & Trust Co.

_	rm 990 ⁻ PF (2012) C/O A	<u>merican State</u>	Bank &	Trust C	<u>.o.</u>		45-60	<u>63398</u>	Page 3
F	Part IV Capital Gains an	d Losses for Tax on I	nvestmen	t Income	1				
	(a) List and describe 2-story brick wareh	the kind(s) of property sold (e.gouse; or common stock, 200 sh	g., real estate, is. MLC Co.)		(b) D	How acquired - Purchase - Donation	(c) Date acquired (mo., day, yr.)		ite sold day, yr.)
1a	l				1.				
b	NONE								
d									
_ e					<u> </u>			<u> </u>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale			(h) Gain or (lo (e) plus (f) minu		
a	1		<u> </u>						
_b									
_ 0	3								
d							·		
е									
_	Complete only for assets showing g	ain in column (h) and owned by	the foundation	n on 12/31/69			(I) Gains (Col. (h) ga		
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		col (j), if any		C	ol. (k), but not less the Losses (from co	nan -0-) or (h)) 	
a	1								
b									
_6			<u> </u>						
2	Capital gain net income or (net capital	$\begin{cases} If gain, also enter \\ If (loss), enter -0 \end{cases}$	er in Part I, line O- in Part I, line	7 : 7	}	2			
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) a			٦				
F	If (loss), enter -0- in Part I, line 8	ler Section 4940(e) fo	r Reduced	d Tax on Net	l Inv	3 estment In	ıcome		
(E	or optional use by domestic private for			**		-			
•			10 /0(u) tui 10/			• •			
lf :	section 4940(d)(2) applies, leave this	part blank							
W	as the foundation liable for the section	4942 tax on the distributable ar	mount of any y	ear in the base pe	rıod?			Yes	X No
lf '	"Yes," the foundation does not qualify	under section 4940(e). Do not c	omplete this pa	art					
1	Enter the appropriate amount in each				entries	i.			
	(a) Base period years Calendar year (or tax year beginning i	(b) Adjusted qualifying dis	stributions	Net value of no	(c) onchai	ritable-use asse	Dist ts (col. (b)	(d) ribution ratio divided by col	l. (c))
	2011								
	2010								
	2009								
	2008								
_	2007								
2	Total of line 1, column (d)						2		
3	Average distribution ratio for the 5-ye	ear base period - divide the total	on line 2 by 5,	, or by the number	r of ye	ars			· ·
	the foundation has been in existence	if less than 5 years					3		
	Entar the met value of menchantable	was seems for 2012 from Port V	luna E						
4	Enter the net value of noncharitable-	use assets for 2012 from Part X,	, iiile 5				4		
5	Multiply line 4 by line 3						5		
6	Enter 1% of net investment income (1% of Part I, line 27b)					6		
7	Add lines 5 and 6						7		
8	Enter qualifying distributions from Pa	art XII, line 4					8		
	If line 8 is equal to or greater than lin	e 7, check the box in Part VI, lin	e 1b, and com	plete that part usir	ng a 1	% tax rate.			

Maude M. Schuetze Foundation Form 990-PF (2012) C/O American State Bank & Trust Co. Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) Part VI 1a Exempt operating foundations described in section 4940(d)(2), check here \(\subseteq \subseteq \) and enter "N/A" on line 1. (attach copy of letter if necessary-see instructions) Date of ruling or determination letter: b Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1% 329. 1 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-) 2 329. 3 4 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 329. 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 6 Credits/Payments: a 2012 estimated tax payments and 2011 overpayment credited to 2012 6a 6b b Exempt foreign organizations - tax withheld at source 1,761 6c c Tax paid with application for extension of time to file (Form 8868) d Backup withholding erroneously withheld 1,761. 7 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 8 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 1,432. 10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 , 432 . Refunded ▶ 11 Enter the amount of line 10 to be: Credited to 2013 estimated tax 11 Part VII-A Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in 1a X any political campaign? X b 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 1c Х c Did the foundation file Form 1120-POL for this year? d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0. (1) On the foundation. > \$ ___ 0 • (2) On foundation managers. ▶ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation 0. managers. > \$ Х 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 If "Yes," attach a detailed description of the activities Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or 3 bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a N/A b If "Yes," has it filed a tax return on Form 990-T for this year? 4b Х 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? 5 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 legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law

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)

year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes," complete Part XIV 10 Did any persons become substantial contributors during the tax year? If Yes, attach a schedule listing their names and addresses

8b Х 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

10

6

7

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Х

Х

remain in the governing instrument?

If "Yes," complete Part II, col (c), and Part XV

7 Did the foundation have at least \$5,000 in assets at any time during the year?

8a Enter the states to which the foundation reports or with which it is registered (see instructions)

of each state as required by General Instruction G? If "No," attach explanation

Maude M. Schuetze Foundation

orm	990-PF(2012) C/O American State Bank & Trust Co. 45-6063	3398		Page 5
	art VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?		_	
	If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ Scott Snow - American State Bank Tr Telephone no ▶ (701) 7	74-	410	0
	Located at ▶PO Box 1446, Williston, ND ZIP+4 ▶58	801		
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,	. 1	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			
	country	<u> </u>		
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Y <u>e</u> s	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(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 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.)			
t	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		_X_
	Organizations relying on a current notice regarding disaster assistance check here			
•	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?	1c		_X_
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation	l i		
	defined in section 4942(j)(3) or 4942(j)(5)):			
í	a 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			
ı	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	0.		
	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	1		
٠.	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
3				
	·			
	b If "Yes," did it have excess business holdings in 2012 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2012) N/A	3b		
4	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	74		41
•	had not been removed from jeopardy before the first day of the tax year beginning in 2012?	4b		Х
	nad not book formoved from populary botters the motivary of the tax year beginning in 2012			

Maude M. Schuetze Founda					
Form 990-PF (2012) C/O American State Bank	& Trust Co.	Samulan da	<u>45-60633</u>	98	Page
Part VII-B Statements Regarding Activities for Which F	orm 4/20 May Be I	Requirea (contin	ued)		
• 5a During the year did the foundation pay or incur any amount to:	4045(-))0		s X No		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	, ,,		S LAL NO		
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indir		s X No		
any voter registration drive?	n	X Ye			
(3) Provide a grant to an individual for travel, study, or other similar purposes'		LAL TE	S L NO		
(4) Provide a grant to an organization other than a charitable, etc., organization	i described in section	₩.v.	s No		
509(a)(1), (2), or (3), or section 4940(d)(2)?	an advantaged averages of		S L NO		
(5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals?	or educational purposes, or		s X No		
•	lar the eventions described		S LAJ NU		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify unc section 53.4945 or in a current notice regarding disaster assistance (see instru		iii negulations		5b 3	x
Organizations relying on a current notice regarding disaster assistance check h	•			30 4	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		inad			-
expenditure responsibility for the grant?	UIII IIIE IAX DECAUSE II IIIAIIIIA		s X No		
If "Yes," attach the statement required by Regulations section 53 4945	5-5 <i>(d</i>)		15 L22 NO		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to j					
a personal benefit contract?	ody promisino on	☐ Ve	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870				-	
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	☐ Ye	s X No		
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	
Part VIII Information About Officers, Directors, Trusto	es, Foundation Ma	nagers, Highly			•
1 List all officers, directors, trustees, foundation managers and their		1	(D)		
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	(e)	Expense ount, othe
(a) Name and address	to position	enter -0-)	compensation	allo	owances
- · · · - · · · · · · · · · · · · · · ·					_
See Statement 11		14,110.	0.		0
			i.		
					
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
1 Name and address of each analysis and mark than PCO 000	(b) Title, and average		(d) Contributions to employee benefit plans	(e)	Expense ount, othe
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	alle	owances
NONE					
		-		ļ	
		1		1	

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

► 0 Form **990-PF** (2012)

Maude M. Schuetze Foundation C/O American State Bank & Trust Co. Form 990-PF (2012) 45-6063398 Page 7 Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued) 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 Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the Expenses number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 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

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1 N/A

Total. Add lines 1 through 3

All other program-related investments. See instructions

P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign four	ndations, s	see 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	17,109.
	Average of monthly cash balances	1b	179,053.
	Fair market value of all other assets	1c	140,106.
d	Total (add lines 1a, b, and c)	1d	336,268.
	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	336,268.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5,044.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4	5	331,224.
6	Minimum investment return Enter 5% of line 5	6	16,561.
P	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	16,561.
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012 (This does not include the tax from Part VI.)		
С	Add lines 2a and 2b	2c	329.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	16,232.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	16,232.
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	16,232.
Ρ	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	9,122.
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	9,122
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	9,122.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies for	

Form 990-PF (2012)

Part XIII Undistributed Income (see instructions)

Form 990-PF (2012)

	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
1 Distributable amount for 2012 from Part XI,				
line 7				16,232.
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:				
a From 2007				
b From 2008				
c From 2009				
d From 2010				
e From 2011				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2012 from			_	
Part XII, line 4: ►\$ 9,122.				
a Applied to 2011, 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 2012 distributable amount				9,122.
e Remaining amount distributed out of corpus	0.			7,122.
5 Excess distributions carryover applied to 2012	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below.				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
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				7,110.
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	0.			
9 Excess distributions carryover to 2013				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9 ⁻				
a Excess from 2008				
b Excess from 2009				
c Excess from 2010				
d Excess from 2011				
e Excess from 2012	_	<u> </u>		
				Form 990-PF (2012)

American State Bank & Trust Dept., 701-774-4120 PO Box 1446, Williston, ND 58802-1446

a The name, address, and telephone number or e-mail of the person to whom applications should be addressed

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

Written Application

c Any submission deadlines

N/A

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

Benefits Culbertson, MT and area residents.

Form 990-PF (2012) C/O American State Bank & Trust Co. 45-6063398 Page 11

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation status of recipient Purpose of grant or contribution show any relationship to Amount any foundation manager Name and address (home or business) or substantial contributor a Paid during the year Alanna Stadstad None N/A Scholarship 414 Poplar St Plentywood, MT 59254 175. Scholarship Alene Crowder None N/A P.O. Box 506 Culbertson, MT 59218 150. Allison Stadstad None N/A Scholarship 414 Popar St Plentywood, MT 59254 175. Amy Johnson None N/A Scholarship 517 Sunnyside Ave 175. Plentywood, MT 59254 Bailey Nickoloff None N/A Scholarship P.O. Box 227 Culbertson, MT 59218 300. See continuation sheet(s) Total ➤ 3a 6.875. b Approved for future payment None Total

Form **990-PF** (2012)

Unrelated business income

Part XVI-A

Analysis of Income-Producing Activities

Excluded by section 512, 513, or 514

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ded by 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
a	_				·
b	_				
C	l I				
d	_ [
e	! !				
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					· · · · · ·
investments			14	2,155.	
4 Dividends and interest from securities			14	2,155. 1,625.	
5 Net rental income or (loss) from real estate		<u> </u>			
a Debt-financed property					
b Not debt-financed property			16	10,774.	•
6 Net rental income or (loss) from personal					· · · · · · · · · · · · · · · · · · ·
property					
7 Other investment income			15	14,797.	
8 Gain or (loss) from sales of assets other	- 1	·· - ··			
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
ab	, ,				
	1				
d					
de	- +			***	 ,
12 Subtotal. Add columns (b), (d), and (e)		0.		29,351.	0.
13 Total Add line 12, columns (b), (d), and (e)				13	
(See worksheet in line 13 instructions to verify calculations	١				
Part XVI-B Relationship of Activities		mplishment of Ex	cemp	t Purposes	
Line No Explain below how each activity for which in	come is reported in	n column (e) of Part XVI-A	contrib	uted importantly to the accomp	olishment of
▼ the foundation's exempt purposes (other the	an by providing fun	ds for such purposes)			
					
	_				
					· - · · · · · · · · · · · · · · · · · ·
					
		 			
223621	-				5 000 DE /***
223621 12-05-12					Form 990-PF (2012)

Form 990-PF (2012)

C/O American State Bank & Trust Co.

Part XVII			sfers To a	nd Transactions a	nd Relations	ships With No	ncharitable	9	
	Exempt Organ							V	
				g with any other organization		tion 501(c) of		Yes	NO
	•			7, relating to political organ	izations?				ı
	from the reporting founda	ation to a noncharita	ıble exempt org	ganization of:					ı
(1) Cash							1a(1)	Х	
(2) Other	assets						1a(2)		_X_
b Other trans									
. ,	of assets to a noncharita	· -					1b(1)		_ <u>X</u> _
(2) Purc	hases of assets from a no	ncharitable exempt o	organization				1b(2)		<u>X</u>
V - 7	al of facilities, equipment,						16(3)		<u>X</u>
(4) Reim	bursement arrangements						1b(4)		<u>X</u> _
(5) Loan	s or loan guarantees						1b(5)		<u>X</u>
(6) Perfo	ormance of services or me	mbership or fundrai	sing solicitation	ns			1b(6)		X
-	if facilities, equipment, ma	- ·		•			1c		<u>X</u>
	•		-	dule. Column (b) should alv				sets,	
	• •			ed less than fair market valu	ie in any transactio	n or sharing arrange	ement, show in		
	d) the value of the goods,				1			<u></u>	
(a) Line no	(b) Amount involved			exempt organization	<u>``</u>	on of transfers, transaction		rangeme	nts
<u>a1</u>				Post #81	See St	<u>atement 1</u>	.2		
a1				Auxiliary					
a1	<u> 100.</u>	Cub Scout	Pack	4239					
				·					
			 						
						···· — ···· ·			
		ļ. <u>. </u>			-				
									
				 					
									
		<u> </u>							
	•		•	or more tax-exempt organi	izations described		r	[٦
	n 501(c) of the Code (othe	•	:)(3)) or in sect	ion 527?			Yes	LX	No
b If "Yes," o	complete the following sch			() T	T	() D			
	(a) Name of org	ganization		(b) Type of organization		(c) Description of r	elationship		
	N/A								
			<u>-</u>				_ -		
									
		that I have examined the molete Oeclaration of p	repar (other the	a ccompanying schedules and (axpayer) is based on all inform	i statements, and to th nation of which prepar	e best of my knowledge er has any knowledge	May the IRS return with the		
Sign	pricega	grate		1.10			shown below	(see ins	
Here	by full	Soul Jours	ТУУЦО	1 12/16/13	Trust	ee	X Yes	; L	J No I
Sig	nature of officer or trustee	· · ·	1	Date /	Title	Cheel C	LDTIN		
	Print/Type preparer's n	ame	Preparer's s	ignature	Date	Checkif	PTIN		
D-11			L		4044045	self- employed			
Paid				a White, CP	12/12/13		P00851		
Preparer		E BAILLY	$_{ m LLP}$			Firm's EIN ► 4	15-02509	58	
Use Only									
				E, PO BOX 13	387				_
	l WI	LLISTON,	ND 588	<u>02-1387</u>		Phone no 7	<u> 701-577-</u>	<u> 215</u>	<u>7</u>

Part XV Supplementary Informati				
Grants and Contributions Paid During the		7		 -
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (nome or business)	or substantial contributor	recipient		
Ben Stromberg	None	N/A	Scholarship	
P.O. Box 660				
Culbertson, MT 59218				175
Brett Nielsen	None	N/A	Scholarship	
15240 94th St			ľ	
Westby, MT 59275				150
Caitlan Stadstad	None	N/A	Scholarship	
414 Poplar St.				
Plentywood, MT 59254				150,
Caitland Hoffman	None	N/A	Scholarship	
500 University Ave.				
Minot, ND 58707				150.
Carissa Sorenson	None	N/A	Scholarship	}
617 W. Laurel Ave				
Plentywood, MT 59254				150.
Carl Clarito	None	N/A	Scholarship	
102 Randy Lane				
Plentywood, MT 59254		-		150
Cody Linblom	None	N/A	Scholarship	
506 Polly Ave.				150
Plentywood, MT 59254				150
Coltin Hurst	None	N/A	Scholarship	
6 Canyon Dr.				1
Plentywood, MT 59254		 	 	150
Colton Hellegaard	None	N/A	Scholarship	
255 Ueland Road				195
Westby, MT 59275				175
Culbertson Museum	None	Public Charity	Propane Heat	
P.O. Box 96 Culbertson MT 59218				100
Total from continuation sheets				5 900
			 	

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or Amount status of any foundation manager contribution Name and address (home or business) or substantial contributor recipient Culbertson Volunteer Fire Depart. Public Charity Narrow Band None P.O. Box 689 Culbertson, MT 59218 125. Darby Kessner N/A Scholarship None P.O. Box 626 Culbertson, MT 59218 150. None N/A Scholarship Emily Hendrickson 401 5th Ave East 175. Culbertson MT 59218 Hallie Westgard None N/A Scholarship 939 North Westby Road Westby, MT 59275 150. Hanna Friedrich None N/A Scholarship 30 Ator Creek Antelope MT 59211 150. Hunter Schmitz None N/A Scholarship 316 Railroad Ave Medicine Lake, MT 59247 150. Jacey O'Neill None N/A Scholarship 1511 Poly Dr. Billings MT 59102 150. Jarett Pedersen None N/A Scholarship 616 East 3rd Ave. Plentywood MT 59254 150. Justin Rueb None N/A Scholarship 116 West First Ave Plentywood, MT 59254 150. Kacıe Hove None N/A Scholarship 3646 Lobo Dr. Homestead MT 59242 150. Total from continuation sheets

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to status of Amount any foundation manager Name and address (home or business) or substantial contributor recipient Karli Peterson None N/A Scholarship 201 N. Adams St 175. Plentywood, MT 59254 Kenda Lindblom N/A Scholarship None 506 Polly Ave 175. Plentywood, MT 59254 N/A Scholarship Kirsen Tryan None 771 James Dr. 175. Plentywood, MT 59254 Scholarship Kyle Nielsen None N/A P.O. Box 65 Culbertson, MT 59218 150. N/A Scholarship Linsey Nelson None P.O. Box 87 175. Bainville, MT 59212 Maria Sunsted None N/A Scholarship 3880 Garden View Drive, Apt. 411 175. Grand forks, ND 58201 Scholarship Megan Berndt None N/A 1411 20th St. S, Apt 3 175. Moorhead, MN 56560 Megan Shoal None N/A Scholarship 783 James Dr. 175. Plentywood MT 59254 Melissa Clark None N/A Scholarship 4206 Clark Dr. 150. Froid, MT 59226 Scholarship Nicholas Oelkers None N/A P.O. Box 742 175. Culbertson MT 59218 Total from continuation sheets

Maude M. Schuetze Foundation

C/O American State Bank & Trust Co. 45-6063398

Part XV | Supplementary Information

Show any relationship to any foundation manager of substantial contributor substantial contributor of recipient states of contribution of recipient states of recipien	3 Grants and Contributions Paid During th		<u> </u>		
Schelby O'Toole	Recipient	If recipient is an individual, show any relationship to any foundation manager		Purpose of grant or contribution	Amount
Proid MT 59226 Proid MT 59226 None None None N/A Scholarship Plentywood, MT 59254 Plentywood, MT 59254 None None N/A Scholarship Podd Stromberg P.O. Box 660 Pulbertson, MT 59218 Prinity Lutheran Church P.O. Box 62 Pulbertson, MT 59218 Prinity Lutheran Church P.O. Box 62 Pulbertson, MT 59218 Prinity Lutheran Church Pool Scholarship Provided Stromberg Public Charity Public Ch	Name and address (home or business)	or substantial contributor			
15					
15 15 15 15 15 15 15 15		None	N/A	Scholarship	
Skyler Thompson None N/A Scholarship 10 Hoover St. Ilentywood, MT 59254 15 Ressa Wagner					
Silo Hoover St. Silo Hoove	Froid, MT 59226				15
Silo Hoover St. Silo Hoove	Thular Thompson	None	NI / A	Scholarship	
		, one			
Pessa Wagner P.O. Box 98 Plentywood, MT 59254 Prodd Stromberg P.O. Box 660 Pulbertson, MT 59218 Prinity Lutheran Church P.O. Box 62 Pulbertson, MT 59218 Pristan Schipman P.O. Box 153 Westby, MT 59273 Whitney Anderson None N/A Scholarship Pool, MT 59226 None N/A Scholarship					15
P.O. Box 98 Plentywood, MT 59254 Prodd Stromberg P.O. Box 660 Pulbertson, MT 59218 Prinity Lutheran Church Public Charity Snow Break P.O. Box 62 Pulbertson, MT 59218 Pristan Schipman Pro. Box 153 Pestby, MT 59273 Post 153 Pestby, MT 59273 Proid, MT 59226 None None N/A Scholarship Proid, MT 59226 None N/A Scholarship Scholarship Scholarship None N/A Scholarship Scholarship Proid, MT 59226 None N/A Scholarship Scholarship Scholarship None N/A Scholarship					
Plentywood, MT 59254 Prinity Lutheran Church Pol. Box 62 Culbertson, MT 59218 Prinity Lutheran Church Pol. Box 62 Culbertson, MT 59218 Prinity Lutheran Church Pol. Box 62 Culbertson, MT 59218 Prinity Lutheran Church Pol. Box 62 Culbertson, MT 59218 Prinity Lutheran Church Pol. Box 62 Culbertson, MT 59218 Prinity Lutheran Church Pol. Box 62 Culbertson, MT 59218 Prinity Lutheran Church Pol. Box 62 Culbertson, MT 59218 Prinity Lutheran Church Pollic Charity Snow Break P	Cessa Wagner	None	N/A	Scholarship	
None N/A Scholarship Polity Lutheran Church None Public Charity Snow Break Polity Box 52 Pulbertson, MT 59218 Pristan Schipman None N/A Scholarship Polity MT 59273 None N/A Scholarship Polity MT 59226 None N/A Scholarship Polity MT 59226 None N/A Scholarship Polity MT 59226	P.O. Box 98				
Public Charity Snow Break Prinity Lutheran Church Pollic Charity Snow Break Proceedings of the Street West None Public Charity Snow Break Prinity Lutheran Church Public Charity Snow Break Proceedings of Lutheran Church Public Charity Snow Break Proceedings of Lutheran Church Public Charity Snow Break Proceedings of Lutheran Church Public Charity Snow Break Prinity Lutheran Church Public Charity Snow Break Proceedings of Lutheran Church Public Charity Snow Break Public Charity Snow Br	Plentywood, MT 59254				17
Public Charity Snow Break Prinity Lutheran Church Pollic Charity Snow Break Proceedings of the Street West None Public Charity Snow Break Prinity Lutheran Church Public Charity Snow Break Proceedings of Lutheran Church Public Charity Snow Break Proceedings of Lutheran Church Public Charity Snow Break Proceedings of Lutheran Church Public Charity Snow Break Prinity Lutheran Church Public Charity Snow Break Proceedings of Lutheran Church Public Charity Snow Break Public Charity Snow Br	n. 11 gr		7/2	Cahalanahin	
Culbertson, MT 59218 Crinity Lutheran Church Public Charity Snow Break P.O. Box 62 Culbertson, MT 59218 Cristan Schipman P.O. Box 153 Westby, MT 59273 Whitney Anderson Mone M/A Scholarship Mone M/A Scholarship A532 Road 1030 Froid, MT 59226 Cach McCoy None N/A Scholarship Mone N/A Scholarship Mone N/A Scholarship Mone N/A Scholarship Mone N/A Scholarship		none	N/A	Scholarship	
Prinity Lutheran Church P.O. Box 62 Culbertson, MT 59218 Pristan Schipman P.O. Box 153 Westby, MT 59273 Whitney Anderson Mone M/A Scholarship None M/A Scholarship Scholarship Mone M/A Scholarship Mone M/A Scholarship Mone M/A Scholarship Mone M/A Scholarship Scholarship Mone M/A Scholarship Scholarship Mone M/A Scholarship Mone M/A Scholarship					15
Culbertson, MT 59218 Culbertson, MT 59218 10 Cristan Schipman P.O. Box 153 Westby, MT 59273 Whitney Anderson Vone N/A Scholarship Whitney Anderson Froid, MT 59226 Cach McCoy None N/A Scholarship None N/A Scholarship Scholarship					
Culbertson, MT 59218 Cristan Schipman P.O. Box 153 Westby, MT 59273 Whitney Anderson Whitney Anderson Whitney And 1030 Proid, MT 59226 Zach McCoy None N/A Scholarship Scholarship None N/A Scholarship	Frinity Lutheran Church	None	Public Charity	Snow Break	
Tristan Schipman None N/A Scholarship P.O. Box 153 Westby, MT 59273 Whitney Anderson None N/A Scholarship 4532 Road 1030 Froid, MT 59226 Zach McCoy None N/A Scholarship 870 5th Street West	P.O. Box 62		i		
Westby, MT 59273 Whitney Anderson Whitney Anderson Whitney Anderson Whitney Anderson None N/A Scholarship Tach McCoy None N/A Scholarship None N/A Scholarship	Culbertson, MT 59218				10
Westby, MT 59273 Whitney Anderson Whitney Anderson Whitney Anderson Whitney Anderson None N/A Scholarship Tach McCoy None N/A Scholarship None N/A Scholarship	Tristan Schinman	None	N/A	Scholarship	
Whitney Anderson Whitne			,,,	Bonorar Binip	
A532 Road 1030 Froid, MT 59226 Zach McCoy 870 5th Street West	Westby MT 59273				15
A532 Road 1030 Froid, MT 59226 Zach McCoy 870 5th Street West					
Froid, MT 59226 Zach McCoy None N/A Scholarship 870 5th Street West		None	N/A	Scholarship	
Zach McCoy None N/A Scholarship 870 5th Street West					15
870 5th Street West	F1010, MT 39220				15
870 5th Street West	Zach McCoy	None	N/A	Scholarship	
Dickinson, ND 58601 17					
	Dickinson, ND 58601				17

Form 990-PF Interest on Savings	and Temporary C	ash Investments	Statement	1
Source			Amount	
Bank Interest			2,155	
Total to Form 990-PF, Part I, li	ne 3, Column A		2,1	55.
Form 990-PF Dividends a	nd Interest from	Securities	Statement	2
Source	Gross Amount	Capital Gains Dividends	Column (A Amount)
Reinvested Dividends & Interest	1,625.	0.	1,6	25.
Total to Fm 990-PF, Part I, ln 4	1,625.	0.	1,6	25.
Form 990-PF R	ental Income		Statement	
Kind and Location of Property		Activity Number	Gross Rental Inc	ome
Farm Rental		1	11,9	35.
Total to Form 990-PF, Part I, li	ne 5a		11,9	35.
Form 990-PF Re	ntal Expenses		Statement	4
Description	Activity Number	Amount	Total	
Insurance Real Estate Taxes - SubT	otal - 1	77. 1,084.	1,1	61.
Total rental expenses			1,1	
Net rental Income to Form 990-PF	', Part I, line 5	b	10,7	
	•			

Form 990-PF	Other 1	Income		Statement 5
Description		(a) Revenue Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income
Oil Royalties, Net		14,797.	14,797.	
Total to Form 990-PF, Part I,	line 11	14,797.	14,797.	
Form 990-PF	Accounti	ing Fees		Statement 6
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	
Accounting	875.	. 0	•	875.
To Form 990-PF, Pg 1, ln 16b	875.	0	•	875.
Form 990-PF	Tax	kes	Statement	
Description	(a) Expenses Per Books		(c) Adjusted Net Income	
Excise Tax Real Estate Taxes	168. 1,084.			0.
To Form 990-PF, Pg 1, ln 18 =	1,252.	1,084	•	0.
Form 990-PF	Other F	Expenses		Statement 8
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Miscellaneous American Legion American Legion Auxiliary Cub Scout Pack 4239 Insurance	43. 100. 125. 100.	. 0 . 0	• • •	43. 0. 0. 0.
To Form 990-PF, Pg 1, ln 23	445.	. 77	•	43.
		-		=====================================

Form 990-PF	Corporate Bonds		Statement	9
Description		Book Value	Fair Market Value	
Harbor Bond Fund #104 Vanguard GNCA Fund #36 Vanguard Short-Term Investm	nent-Grade Fund #39	13,170. 12,727. 12,670.	12,77 12,59 12,61	7.
Total to Form 990-PF, Part	II, line 10c	38,567.	37,98	0.
Form 990-PF	Other Liabilities		Statement	10
Description		BOY Amount	EOY Amount	
Earnest money received on 1 not completed by fiscal year		0.	41,00	0.
Total to Form 990-PF, Part	II, line 22	0.	41,00	0.

Form 990-PF Part VIII - List of Officers, Directors

11

Statement

Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense Account
American State Bank PO Box 1446 Williston, ND 58801	Trustee 2.00	3,194.	0.	0.
Louise Cooper PO Box 1446 Williston, ND 58801	Director 1.00	750.	0.	0.
Muriel Park PO Box 1446 Williston, ND 58801	Advisor 1.00	250.	0.	0.
Fred C. Rathert 111 E BROADWAY Williston, ND 58801	Advisor 1.00	9,716.	0.	0.
Dorothy Gonitzke PO Box 1446 Williston, ND 58801	Advisor 1.00	200.	0.	0.
Totals included on 990-PF, F	Page 6, Part VIII	14,110.	0.	0.

990-PF Involvement With Noncharitable Organizations Statement 12
Part XVII, Line 1, Column (d)

Name of Noncharitable Exempt Organization

American Legion Post #81

Description of Transfers, Transactions, and Sharing Arrangements

Cash Donation

Name of Noncharitable Exempt Organization

American Legion Auxiliary

Description of Transfers, Transactions, and Sharing Arrangements

Cash Donation

Name of Noncharitable Exempt Organization

Cub Scout Pack 4239

Description of Transfers, Transactions, and Sharing Arrangements

Cash Donation

Form **8868**

(Rev. January 2013)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545-1709

Form 8868 (Rev 1-2013)

• If yo	u are filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box			\triangleright X		
• If yo	are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of	this form)				
Do not	complete Part II unless you have already been granted	an automa	atic 3-month extension on a previous	sly filed Fo	rm 8868			
Electro	onic filing (e-file). You can electronically file Form 8868 if	you need a	a 3-month automatic extension of tir	ne to file (6	6 months for a c	orporation		
require	d to file Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically f	ile Form 8	868 to request a	an extension		
of time	to file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for	Fransfers /	Associated With	ı Certain		
Person	al Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions) For more details	on the elec	ctronic filing of t	his form,		
visit wi	www.irs.gov/efile.and.click.on.e-file.for.Charities.&Nonprofits	5						
Part	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies ne	eded).				
A corp	oration required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and	complete				
Part I c	nly					ightharpoons		
All othe	er corporations (including 1120-C filers), partnerships, REN	1ICs, and t	rusts must use Form 7004 to reques	t an exten	sion of time			
to file ii	ncome tax returns							
Туре о	Type or Name of exempt organization or other filer, see instructions Employer identification number							
print	Maude M. Schuetze Foundation	on						
	C/O American State Bank & '	<u>Trust</u>	Co.		45-6063	53398		
					Social security number (SSN)			
return Se	e TO DOX 1440		lyon no material and					
instructio	City, town or post office, state, and ZIP code For a few Williston, ND 58801	oreign add	iress, see instructions					
	WIIIISCOII, ND 30001		 					
Enter t	as Patura and for the return that this application is for /file	0 0 000010	to application for each return)			0 4		
Entert	ne Return code for the return that this application is for (file	e a separa	te application for each return)			0 4		
Applic	ation	Return	Application			Return		
Is For	ation	Code				Code		
	90 or Form 990·EZ	01	Is For			07		
Form 9		02	Form 990-T (corporation) Form 1041-A			08		
	720 (individual)	03	Form 4720			09		
Form 9		04	Form 5227			10		
	90-T (sec 401(a) or 408(a) trust)	05	Form 6069			11		
	90-T (trust other than above)	06	Form 8870			12		
1 01111 2			an State Bank Trus	t Den	artment	1		
• The	books are in the care of ▶ PO Box 1446 - N			с Бер	arcmenc			
	phone No \triangleright (701)774-4100	*****	FAX No ▶					
	e organization does not have an office or place of busines	s in the Ur	· · · · · · · · · · · · · · · · · · ·					
	is is for a Group Return, enter the organization's four digit			f this is fo	r the whole grou	in check this		
box >	,—	_	ach a list with the names and EINs o		-	-		
	request an automatic 3-month (6 months for a corporation				ing exterior	1110101		
	December 15, 2013, to file the exemp				The extension			
-	s for the organization's return for		and the control of garment of the control of the co	30 02010	THE EXCEPTION			
i	► calendar year or							
i	X tax year beginning MAY 1, 2012	. ar	id ending APR 30, 2013					
•								
2 1	f the tax year entered in line 1 is for less than 12 months, o	heck reas	on Initial return	Final retur	'n			
_	Change in accounting period							
	onange in accounting period							
3a I	f this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069. e	enter the tentative tax less any					
	nonrefundable credits See instructions	0. 0000, 0		3a	\$	1,425.		
b If this application is for Form 990-PF, 990-T, 4720, or 6069,		enter any	refundable credits and		-			
	estimated tax payments made. Include any prior year over			3b	\$	0.		
-	Balance due. Subtract line 3b from line 3a Include your pa				*	<u> </u>		
	by using EFTPS (Electronic Federal Tax Payment System)			3с	s	_1,425.		
	n. If you are going to make an electronic fund withdrawal				EO for navment			

For Privacy Act and Paperwork Reduction Act Notice, see instructions.