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## Form **990-PF**

## **Return of Private Foundation**

or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052 2014

Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.

▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

		dar year 2014 or tax year beginning	, 2014, and ending , 20			
		TES 4 WANDA HOLL ENSTE	11100 50	STN A Emplo	oyer identification numb	
		1 ES 4 W ANDA HOLL ENSTE d street (or PO box number if mail is not delivered to street address)			4-139583 hone number (see instruc	
7	2 9	293 ROLLINS LAKESHORE			6-844-2	
	ortown	n, state or province, country, and ZIP or foreign postal code	DK			
K	OL	LINS MT 59931			nption application is pen	ding, check here ▶ ∐
G	Check		n of a former public	charity D 1. For	eign organizations, check	here 🕨 🔲
		☐ Final return ☐ Amended		2. For	eign organizations meetir	ng the 85% test.
		Address change Name char		che	ck here and attach comp	outation ►
		type of organization: X Section 501(c)(3) exempt p n 4947(a)(1) nonexempt charitable trust		section	ate foundation status was n 507(b)(1)(A), check here	
_		arket value of all assets at   J Accounting method		corual	io	4b 4a
	end of	year (from Part II, col. (c), Other (specify)	-	) r n nie i	oundation is in a 60-mor section 507(b)(1)(B), chei	
	line 16	(Part I, column (d) must be	on cash basis )			
_	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	<u> </u>		(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per	(b) Net investmen income	t (c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instructions) )	books		incomo	(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)				
	2	Check ► ☐ if the foundation is <b>not</b> required to attach Sch B				
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities	60394	60394	60394	
	5a	Gross rents				
	b	Net rental income or (loss)				
<u>o</u>	6a	Net gain or (loss) from sale of assets not on line 10				
Ĕ	b	Gross sales price for all assets on line 6a				
Revenue	7	Capital gain net income (from Part IV, line 2)				
æ	8	Net short-term capital gain				
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	ь	Less <sup>.</sup> Cost of goods sold				
	С	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)				
_	12	Total. Add lines 1 through 11	60394	60394	60394	
Ø	13	Compensation of officers, directors, trustees, etc.	<b>`</b>			
Se	14	Other employee salaries and wages			<del></del>	
Expenses	15	Pension plans, employee genefits	~~~			<del> </del>
꿏	16a	Legal fees (attach schedule)	37	37_	37	37
_	b	Accounting fees (attach schedule)		ļ	<del> </del>	<del> </del>
Ĭ	17	Other professional fees (affach schedule)			+	<del> </del>
štri	17	Interest Taxes (attach schedule) (see instructions), UT	8/20	839	9.70	220
ï.	18 19	Depreciation (attach schedule) and depletion .	839	051	839	839
<u>Ē</u>	20			<del> </del>	<del> </del>	<del> </del>
Operating and Administrative	21	Travel, conferences, and meetings	9179	9179	9179	9179
п	22	Printing and publications	123	122	122	122
ğ	23	Other expenses (attach schedule)	592	592	552	593
ing	24	Total operating and administrative expenses.			<del>  ~ ~ ~ ~</del>	7.14
rat		Add lines 13 through 23	10769	10769	10769	10769
þ	25	Contributions, gifts, grants paid	118200		<del> </del>	118200
0	26	Total expenses and disbursements. Add lines 24 and 25	128969	10769	10769	128969
_	27	Subtract line 26 from line 12.		1	10.01	1,3 <del>2,2,1,4,1</del>
	- a	Excess of revenue over expenses and disbursements	(68575)		}	1
	b	Net investment income (if negative, enter -0-)	127	49625	T	
	C	Adjusted net income (if negative, enter -0-)		1,-~2	49625	

Part II		Ralance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year		
Га		Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
-	1	Cash—non-interest-bearing	48336	52/54	52154		
İ	2	Savings and temporary cash investments					
	3	Accounts receivable ▶					
1		Less: allowance for doubtful accounts ▶					
	4	Pledges receivable ▶					
ļ		Less: allowance for doubtful accounts ▶					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see instructions)			[		
	7	Other notes and loans receivable (attach schedule) ▶					
		Less. allowance for doubtful accounts ▶					
ß	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
As	10a	Investments—U.S. and state government obligations (attach schedule)					
,	b		2522035	2384502	2384502		
	С	Investments—corporate bonds (attach schedule)			000000		
	11	Investments—land, buildings, and equipment: basis ▶					
		Less: accumulated depreciation (attach schedule) ▶					
	12	Investments-mortgage loans					
	13	Investments—other (attach schedule)					
	14	Land, buildings, and equipment. basis ▶					
		Less: accumulated depreciation (attach schedule) ▶		1			
	15						
	16	Other assets (describe   Total assets (to be completed by all filers—see the					
		instructions. Also, see page 1, item l)	2570371	2436656	2436656		
	17	Accounts payable and accrued expenses					
	18	Grants payable		•	1		
Liabilities	19	Deferred revenue	· · · · · · · · · · · · · · · · · · ·		1		
Ħ	20	Loans from officers, directors, trustees, and other disqualified persons			1		
ap	21	Mortgages and other notes payable (attach schedule) .			1		
<b>=</b>	22						
	23	Other liabilities (describe ►)  Total liabilities (add lines 17 through 22)	-0-	-0-	1		
		Foundations that follow SFAS 117, check here .			]		
alances		and complete lines 24 through 26 and lines 30 and 31.					
2	24	Unrestricted					
<u>ala</u>	25	Temporarily restricted					
ä	26	Permanently restricted					
Net Assets or Fund B	]	Foundations that do not follow SFAS 117, check here ▶ □					
Ţ		and complete lines 27 through 31.					
ŏ	27	Capital stock, trust principal, or current funds	2570371	2436656			
ţ	28	Paid-in or capital surplus, or land, bldg., and equipment fund					
šše	29	Retained earnings, accumulated income, endowment, or other funds			]		
Ř	30	Total net assets or fund balances (see instructions)	2570371	2436656	]		
<u>e</u>	31	Total liabilities and net assets/fund balances (see					
~		instructions)	2570371	2436656			
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances					
1		al net assets or fund balances at beginning of year-Part II, colu	ımn (a), lıne 30 (mu:	st agree with			
	end	-of-year figure reported on prior year's return)		1	2570371		
2		er amount from Part I, line 27a	· 1: 4 · 0 · ~	2	(8575)		
3	Oth	er increases not included in line 2 (itemize) ▶ 94ts of store	ck to chan	<u>3</u>	(45140)		
4		I lines 1, 2, and 3		4	2436656		
5	Dec	reases not included in line 2 (itemize) ▶		5			
_6	Tota	al net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), I	ne 30 <b>6</b>	2436656		
					Form 990-PF (2014)		

Part \		nstr	uctio	ns)				
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1.  Date of ruling or determination letter: (attach copy of letter if necessary—see instructions)							
b								
	here ▶ ☐ and enter 1% of Part I, line 27b							
С	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-)			<u></u>				
3		99	<u>a_</u>	ļ				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	<u> </u>		<del></del>				
5		99.	عــــــ	ļ				
6	Credits/Payments:							
a	2014 estimated tax payments and 2013 overpayment credited to 2014							
b	Tax paid with application for extension of time to file (Form 8868) . 6c							
ď	Backup withholding erroneously withheld 6d							
7	Total credits and payments. Add lines 6a through 6d							
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here  if Form 2220 is attached							
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9	90	12					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid <b>10</b>							
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax ▶ Refunded ▶ 11							
	VII-A Statements Regarding Activities	7	130	1 66 -				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1b		X				
	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	ļ	X				
C	· · · · · · · · · · · · · · · · · · ·							
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:  (1) On the foundation. ▶ \$  (2) On foundation managers ▶ \$							
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$							
2	Has the foundation engaged in any activities that have not previously been reported to the 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 incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X				
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	<u> </u>	L				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	<u> </u>	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 either:  • By language in the governing instrument, or	1	1					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>	1	1					
	conflict with the state law remain in the governing instrument?	6	Y					
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	\$					
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶							
	AWATUCM		}					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		ļ	<u>                                     </u>				
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	<u> </u>	X,				
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	ļ	<del> </del>	<b>├</b>				
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV	_		X				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	9	<del> </del>	<del>  ^</del> -				
10	names and addresses	10		X				
			n_DE	10011				

Part	V Capital Gains and	Losses for Tax on Investm	nent Income			
		kind(s) of property sold (e.g., real estate, or common stock, 200 shs MLC Co.)		(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold, (mo , day, yr )
1a						
b_						
с						
<u>d</u>						
<u>e</u>		<del></del>				<u> </u>
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		n or (loss) (f) minus (g)
<u>a</u>		-				<del></del>
<u>        b</u> _						
<u>c</u> _			<del></del>			<del></del>
<u> </u>			<del></del>			<del></del>
<u>е</u>	Complete only for assets show	ving gaın ın column (h) and owned	by the foundation	on 12/31/60		
	Complete only for assets show	(i) Adjusted basis				h) gain minus t less than -0-) <b>or</b>
	(i) F M V as of 12/31/69	as of 12/31/69	(k) Excess	(j), if any		rom col (h))
a_						
<u>b</u> _						
<u>c</u> _						
<u>u</u> _						
		( If gain.	also enter in Pa	rt I. line 7		
2	Capital gain net income or		enter -0- in Par		2	
3	Net short-term capital gain	or (loss) as defined in sections		1	-	
•		, line 8, column (c) (see instruc				
	D			· · . }	3	
Part	V Qualification Unde	er Section 4940(e) for Redu	iced Tax on N	et Investment	Income	
		ate foundations subject to the	section 4940(a)	tax on net invest	ment income.)	
•	•		.,		,	
If sect	tion 4940(d)(2) applies, leave	this part blank.				
		ection 4942 tax on the distribution and the distribution and the distribution 4940(e). D			pase period?	☐ Yes ☐ No
1	Enter the appropriate amou	unt in each column for each yea	ar; see the instru	ictions before ma	aking any entries.	
	(a)	(b)		(c)		(d)
Cale	Base period years endar year (or tax year beginning in)	Adjusted qualifying distributions	s Net value of	noncharitable-use as		ribution ratio divided by col (c))
	2013					<del></del>
	2012					
	2011					
	2010			_		
	2009	/ / . 1				
		•				
2	Total of line 1, column (d)				. 2	
3		or the 5-year base period—divi			the	
	number of years the founda	ation has been in existence if le	ess than 5 years		. 3	
	_					
4	Enter the net value of nonc	charitable-use assets for 2014 f	rom Part X, line	5	. 4	
					1 1	
5	Multiply line 4 by line 3				. 5	
6	Enter 1% of net investmen	t income (1% of Part I, line 27b	)		. 6	
7	Add lines 5 and 6				. 7	
8		ns from Part XII, line 4			. 8	<u></u>
	If line 8 is equal to or great Part VI instructions.	ter than line 7, check the box in	i raπ VI, line 1b	, and complete t	nat part using a 1	% tax rate. See the

ı	Page	6

<u>Part</u>	VII-B	Statements Regarding	g Activities for W	Vhich Form	4720 M	lay Be R	equire	<b>d</b> (contin	ued)		
5a	During the year did the foundation pay or incur any amount to:  (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?  Yes No										
	(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes (4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions)										
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?										
b											
С	If the an	tions relying on a current no swer is "Yes" to question 5 it maintained expenditure r	a(4), does the fou	ndation claim	exempt				<ul><li>▶ □</li><li>□ No</li></ul>		
6a	Did the f		receive any funds,	directly or in	directly, t			☐ Yes	X No		
b		oundation, during the year, o 6b, file Form 8870.	pay premiums, dire	ectly or indire	ctly, on a	a personal	benefit	contract?	? .	6b	
		ne during the tax year, was the did the foundation receive a							D No 2	7b	
		Information About Office									
T ai		and Contractors	)C13, D11C0t013,	11451000, 1	Janaati	OII WIGHT	.gc. 0,	· ···g····y ·	uiu Li	проус	,03,
1		fficers, directors, trustees	. foundation man	agers and th	eir com	pensation	ı (see ir	nstruction	ıs).		
		(a) Name and address	(b) Titl	le, and average urs per week ted to position	(c) Com (If no	pensation of paid, er -0-)	(d) (d) emplo	Contributions yee benefit perred comper	to plans		nse account, illowances
	See	- Exhibit A	Mu	numal	-0	) _	<b>-</b>	) <b>–</b>	4	450 Me	per do
										Trave	Q+othe
										- Xper	nses
										mou	redos
									ļ	abi	rector
	Compor	sation of five highest-pa	id ampleyees (ath	or than the	e inclu	ded on li	no 1 0	eee inetri	ıctions	) If po	no ontor
2	"NONE.		iu employees (ou	iei ulan ulo	se niciu	ueu on n	116 1 —	see msu t	ICUOIS	s <i>j</i> . II IIO	nie, enter
		d address of each employee paid m	nore than \$50,000	(b) Title, and a hours per v devoted to p	veek	(c) Comper	nsation	(d) Contributemployee by plans and documpens	penefit eferred	(e) Exper other a	nse account, illowances
		$-\lambda$	NE								
										·	
Total	number o	fother employees paid over	\$50,000		·	· <u>·</u> ·	<u> </u>		F	orm <b>990</b>	)-PF (2014)

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements fourts annual returns and exemption application?	13	X	
14	Website address ➤ local nature published in Lake County Leader 7/3/14  The books are in care of WANDA HOLLENSTEINER Telephone no. ► 406-  Located at ►22993 ROLLINS LAKESHORE DR ZIP+4 ➤ 5993	840	/ - X	970
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		•	<b>▶</b> ∐
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority	,	Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	"Yes," enter the name of the foreign country ▶			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	L		<u> </u>
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? .   (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	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 2014?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014?			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions.)	2b	į	<b>x</b>
С	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  ▶ 20, 20, 20,			
3a ,	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2014 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 2014.)	3b	77 7777 —	~ `X`
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		 }
		m <b>99</b>	0-PF	(2014)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	E."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensatio
AAB	
tal number of others receiving over \$50,000 for professional services	
art 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
3	
4	
art IX-B Summary of Program-Related Investments (see instructions)	<u> </u>
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
$\Lambda$	
2	
All other program-related investments See instructions	
3	
	i
otal. Add lines 1 through 3	

Part	Minimum Investment Return (All domestic foundations must complete this part. Forei see instructions.)	gn to	undations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	Γ	<u> </u>
•	purposes:		
а	Average monthly fair market value of securities	1a	2366101
b	Average of monthly cash balances	1b	52372
С	Fair market value of all other assets (see instructions)	1c	
d	<b>Total</b> (add lines 1a, b, and c)	1d	2418473
е	Reduction claimed for blockage or other factors reported on lines 1a and		,
	1c (attach detailed explanation)	L	
2	Acquisition indebtedness applicable to line 1 assets	2	-0-
3	Subtract line 2 from line 1d	3	2418473
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		2/277
_	instructions)	4	36277
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	3382136
6	Minimum investment return. Enter 5% of line 5	6	119110
Part	and certain foreign organizations check here ► □ and do not complete this part.)	ouna	auons
1	Minimum investment return from Part X, line 6	1	119110
2a	Tax on investment income for 2014 from Part VI, line 5   2a   9 9 2		1110
b	Income tax for 2014. (This does not include the tax from Part VI.) 2b	,='	
c	Add lines 2a and 2b	2c	<u> የ</u> ዋ2
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	118(18
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	118118
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,		
	line 1	7_	118118
Part	XII Qualifying Distributions (see instructions)		
		г—–	<del></del>
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:  Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26	1a	128969
a b	Program-related investments—total from Part IX-B	1b	120101
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	15	
_	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	128969
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 (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	128969
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	g whe	ther the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		5 000 DE (004.0)

Part	. Undistributed Income (see instruction	ons)			
1 '	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	<b>(c)</b> 2013	(d) 2014
	line 7	<u> </u>			118118
2	Undistributed income, if any, as of the end of 2014:				
а	Enter amount for 2013 only				
b	Total for prior years: 20 ,20 ,20				
3	Excess distributions carryover, if any, to 2014:				
а	From 2009				
b	From 2010				
_	From 2011				
ں ۔	From 2012				•
d					
e	From 2013	-1			
f	Total of lines 3a through e		-\		
4	Qualifying distributions for 2014 from Part XII,				
	line 4. ► \$ 128969	•			
а	Applied to 2013, but not more than line 2a .				1
b	Applied to undistributed income of prior years				
	(Election required—see instructions)				1
С	Treated as distributions out of corpus (Election				
	required—see instructions)				
d	Applied to 2014 distributable amount				118919
e	Remaining amount distributed out of corpus				130 141
5	Excess distributions carryover applied to 2014		<del> </del>		<del></del>
5	(If an amount appears in column (d), the same				<del> </del>
	amount must be shown in column (a), the same				
6	Enter the net total of each column as				
b	indicated below:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b				
С	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		1		1
d	Subtract line 6c from line 6b Taxable				<del>                                     </del>
_	amount—see instructions		1		
_	Undistributed income for 2013. Subtract line		+		
е	4a from line 2a Taxable amount—see				
					į
	instructions				<del> </del>
f	Undistributed income for 2014. Subtract lines				
	4d and 5 from line 1 This amount must be		1		
	distributed in 2015				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2009 not				
	applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2015.				
-	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9:		<del>                                     </del>		<del> </del>
a	5 fram 0010	(			
_	Evenes from 2011	1			
b	<u> </u>	1	]		
C	Excess from 2012				
d	Excess from 2013				
е	Excess from 2014 / 0 ¥ 5 1		1		1

	0-PF (2014)					Page 10
art	<del></del>				)	
1a	If the foundation has received a ruling foundation, and the ruling is effective for					*
<b>L</b>	Check box to indicate whether the four		<del>-</del>		etion [] 4942(i	)(3) or  4942(j)(5)
b 2a	Enter the lesser of the adjusted net	Tax year	The operating lounds	Prior 3 years	-CION [] 4942(J	(3) 01 4942()(3)
	income from Part I or the minimum	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total
	investment return from Part X for each year listed	(-)				
b	85% of line 2a	<del></del>		_		
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon.		A) A			
а	"Assets" alternative test – enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
ь	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
C	"Support" alternative test-enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization			ļ		<u> </u>
	(4) Gross investment income	(0)	Abia and and if	No formulation b	- J &E 000	
Par	Supplementary Information			the foundation n	aa <del>a</del> s,uuu or m	iore in assets at
4	any time during the year- Information Regarding Foundation		0115.7			
1 a	List any managers of the foundation of before the close of any tax year (but of	who have contr				by the foundation
			TEINER	, , ,	(-/(-/-/	
b	List any managers of the foundation	who own 10%	or more of the sto	ck of a corporation	or an equally la	arge portion of the
	ownership of a partnership or other er					<b>.</b>
2	Information Regarding Contribution					
	Check here ► X if the foundation	only makes co	ntributions to prese	elected charitable o	organizations and	d does not accept
	unsolicited requests for funds. If the f		es gifts, grants, etc.	(see instructions) to	o individuals or o	rganızations under
	other conditions, complete items 2a, t					
а	The name, address, and telephone nu	mber or e-mail	address of the pers	on to whom applica	ations should be a	addressed:
b	The form in which applications should	be submitted a	and information and	materials they shou	uld include:	
_						
С	Any submission deadlines:					

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

_	Part XV Supplementary Information (continued)								
	3 Grants and Contributions Paid During the Year or Approved for Future Payment								
	Recipient	r business)	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount			
	Name and address (home of Paid during the year	Dusiness)	or substantial contributor	recipient					
а		<i>C</i> 0			Tf				
	See.	716	ILT C		Heneral +				
			NONE	MONE	General + Un ristricted				
			·						
	Total	·			▶ 3a				
b	Approved for future payment								
	Total			<del></del> _	▶ 3b				

Ente	r gross amounts unless otherwise indicated.		isiness income	Excluded by secti	on 512, 513, or 514	1 (0)
		(a) Business code	<b>(b)</b> Amount	(c) Exclusion code	(d) Amount	Related or exemp function income (See instructions)
1	Program service revenue:			<del>  </del>		<del> </del>
	a b					<del> </del>
		-		<del> </del>		<del> </del>
	d	- <del>                                    </del>		<del>                                     </del>		<del> </del>
		-	<u> </u>	-	·	<del>                                     </del>
	f	-	1	<del>                                     </del>		<del> </del>
	The said contracts from a survey mont according	<u>-                                    </u>	<del>/                                    </del>	<u> </u>		<del></del>
^	g Fees and contracts from government agencie					<del>                                     </del>
_	Membership dues and assessments			<del></del>		<del></del>
3 4	Interest on savings and temporary cash investments Dividends and interest from securities	' <del> </del>		<del>                                     </del>		
	- · · · ·					
5	Net rental income or (loss) from real estate:			<del></del>		<u> </u>
	a Debt-financed property			+		
c	<b>b</b> Not debt-financed property			<del> </del>		
_	Net rental income or (loss) from personal property Other investment income			<del> </del>		
7				+		ļ
8	Gain or (loss) from sales of assets other than inventor			<del> </del>		<del>                                     </del>
9	Net income or (loss) from special events			<del>                                     </del>		<u> </u>
10	, , ,			-		<del></del>
11						<del>                                     </del>
	b			1		
	<u> </u>			+		
	d	- }		<del> </del>		<del> </del>
40	Subtotal. Add columns (b), (d), and (e)	-				<del> </del>
12	<b>Total.</b> Add line 12, columns (b), (d), and (e)		L	1	13	
					13	
500	worksheet in line 13 instructions to verify calculat	one l			_	
·	worksheet in line 13 instructions to verify calculated at XVIBS. Relationship of Activities to the		ent of Exemp	ot Purnoses		
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Pa	rt XVI-B Relationship of Activities to the	Accomplishm			-A contributed oses). (See instru	mportantly to the

	90-PF (2014		<del></del>										ige 13
Part	XVII		n Regarding Tr ganizations	ansfers 1	o and Trar	nsactio	ns and R	elationsh	ips With	Noncha	ritabl	е	
1	Did the	organization on 501(c) of the	directly or indirect ne Code (other tha									Yes	No
а	_		porting foundation	n to a nonc	haritable exe	empt ora	anization d	of:				i	
_		1	_			p. 0.g					1a(1)	-	X
	(2) Othe	er assets .			. ,						1a(2)		X
b	Other tr	ansactions:											
			a nonchantable e								1b(1)		X
	•		ets from a noncha			ation .					1b(2)		X
	• •		, equipment, or ot		• • •					•	1b(3)		X
			rrangements	•							1b(4)		λ λ
		ns or loan gua									1b(5)		
_			ervices or member					•		•	1b(6)		X
C			equipment, mailing of the above is "\					oluma (h)	ماماط ماد	waxa abaw	1c		
d			ther assets, or se										
			on or sharing arra										
(a) Lin		Amount involved			kempt organizati			tion of transfe					
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2a b	describ	ed in section (	ectly or indirectly 501(c) of the Code e following schedu	e (other tha						zations	Yes	<b>X</b>	No
		(a) Name of organ	ization		(b) Type of org	anization	$ \top$		(c) Descripti	on of relation	ship		
٥.	1 / 1	enalties of perjury,	I declare that I have exar laration of preparar (other	mined this retui	m, including accor	mpanying so	chedules and s	statements, and	to the best o	of my knowled	ge and b	elief, it	ıs true,
Sigr Her	e M	pyvo (	2 Hollans	$\sim$	5-13-	\ \	KE21E			May the IR with the pr (see instruc	eparer s	shown (	below
	- A	rint/Type prepare		Prepare	er's signature			Date			TIN		
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December 29, 2014

Mr. and Mrs. James A. Hollensteiner P.O. Box 295 Barrington, IL 60010

Dear Jim and Wanda,

On behalf of the Kalispell Regional Medical Center Foundation, thank you very much for your pledge payment of \$66,000.00 toward your 2014 pledge of \$500,000.00, designated for the New Emergency Services Center Campaign Fund. Your new pledge balance is \$424,000.00. This generous gift was made possible through the sale of 2,500 shares of Glacier Bancorp (GBCI) on December 17, 2014. The high value of the stock was \$26.98 and the low value was \$25.82, which made the average \$26.40. When multiplied times the 2,500 shares, the gift was \$66,000.00.

With this gift, we proudly recognize your current membership in our annual Ella Webber Founders Club at the North Star level and the Wall of Honor at the Special Benefactor level. Your recognition listing will appear as follows, unless we hear differently from you.

James & Wanda Hollensteiner

houte for your incredible support! Happy Wear !

Gifts like yours help further the mission of Kalispell Regional Healthcare – to improve health, comfort and life. On behalf of the patients and families who will benefit from your caring gift, thank you again.

Sincerely,

Tagen Vine President

Kalispell Regional Healthcare Foundation

TV:sd

#### Required Disclosure - Please retain this receipt for your records

This disclosure is intended to comply with the provisions of the Internal Revenue Code enacted as part of the 1993 Tax Act. Unless otherwise stated on this receipt, you have received no goods and services in exchange for this contribution. The IRS requires you to keep this receipt to substantiate charitable gifts of \$250.00 and above. You can no longer rely solely on your cancelled check to substantiate your contribution.

Tax ID No. 31-1703013

Please remember Kalispell Regional Healthcare Foundation in your estate planning.

Kalispell Regional Healthcare Foundation respects your privacy. We protect your personal information and adhere to all privacy regulations. We do not rent, sell, or trade mailing lists.

From SNOTN



EXMISIT R

Natural Resource & Compration Tax Olvision Sam W. Mitchell Building

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

July 9,, 19981

FEIN: 841335820

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

Re:

Nonprofit Tax Exempt Status for JAMES AND WANDA HOLLENSTEINER

**FOUNDATION** 

Dear Taxpayer:

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

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

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

Sincerely.

Sharon Blunn, Administrative Assistant

haron Blurn

Corporate Tax Bureau

Exhat C

## Museums Association

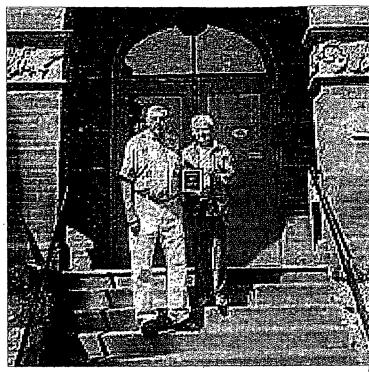
Jim and Wanda Hollenstiner of Rollins have been named by the Museums Association of Montana as the recipients of the Peter Yegen, Jr Award of Achievement for their significant contributions to the Museum at Central School in Kalispell.

Rick Riley, long time member of the Northwest Montana Historical Society and a leader of the effort to save Central School from demolition, said, "If Jim and Wanda had not stepped forward nearly 10 years ago with a pledge of major financial support, and which they have continued over the subsequent years, the Museum at Central School would not have been able to achieve its present level of prominence as one of the outstanding museums in Montana,"

Preserving Central School was an important objective for Jim as his forefathers were the people who made the brick and laid the brick for the 1894 building as well as many of the other early brick buildings in the Flathead Valley Jim, as well as his father, and many other family members attended Central School.

The Peter Yegen, Jr. Award of Achievement is a prestigious award given periodically by the Museums Association of Montana to individuals for their exemplary service and support of Montana's museums. Peter Yegen was an early Montana pioneer, arriving in Billings in the 1880s. He was a strong supporter of the importance of preserving Montana history and is recognized as the person most responsible for the organizations of many of the county museums in the state.

The Museum at Central School in Kalispell has a wide collection of Northwest Montana history. This includes the story of Kalispell from its founding the late 1880s, authentic Indian artifacts, an early 1900 era sawmill, a major Forest Service exhibit including it a 1933 forest fire lookout and a special exhibit covering the



Jim and Wanda Hollenstiner are pictured in front of the Centra School Museum in Kalispell. The Rollins couple was instrumenta in the effort to preserve the historic building.

Exhat C

# CONTRIBUTIONS TO CHARITABLE ORGANIZATIONS FROM THE JAMES & WANDA HOLLENSTEINER FOUNDATION (84-1305820) $\chi$ O I $\,$

Northwest Montana Historical Society P.O. Box 2293 Kalispell MT 59903	6450
Flathead Land Trust P.O. Box 1913 Kalispell MT 59903	2000
Northwest Healthcare Foundation: Alert 310 Sunnyview Lane Kalispell MT 59901	600
Flathead Lakers P.O. Box 70 Polson MT 59860	2000
Glacier Institute P.O. Box 1887 Kalispell MT 59903	1000
Glacier National Park Conservancy P.O. Box 2749 Columbia Falls MT 59912	2000 250
Doctors Without Borders 333 7 <sup>th</sup> Ave., 2 <sup>nd</sup> Floor New York NY 10001	1000
Rush University Medical Center Office of Philanthropy 1700 W. Van Buren, Suite 250	5 000
Chicago IL 60612  Glacier Symphony & Chorale  P.O. Box 2491  Kalispell MT 59903	2000
Conrad Mansion Museum P.O. Box 1041 Kalispell MT 59903	500

Flathead Lake Biological Station 32125 Bio Station Lane	1000
Polson MT 59860	
Crossroads Christian Fellowship Church	500
7454 Hwy 35	3 0 0
Bigfork MT 59911	
Dayton Presbyterian Church	0 ~~
P.O. Box 188	250
Dayton MT 59914	250
Somers Middle School	500
Big Creek Project	
Somers MT 59932	
Parkinson's Disease Foundation	250
1359 Broadway, Suite 1509	250
New York NY 10018	
Kalispell Montesorri Elementary	500
349 Willow Glen Dr.	0 00
Kalispell MT 59901	
Big Mountain Firefighters Assn.	250
3790 Big Mountain Rd.	
Whitefish MT 59937	
Stumptown Art Studiios	500
145 Central Ave.	500
Whitefish MT 59937	
Calling All Crows	250
1330 Beacon St., Suite 231	-
Brookline MA 02446	
Lakeview Food Pantry	250
3831 N. Broadway	~ • •
Chicago IL 60613	
Somers Company Town Project	250
P.O. Box 130	
Somers MT 59932	

Foys to Blacktail Bike Trail	100)
P.O. Box 81	7 0 0 0
Kalispell MT 59903	
University of Montana Foundation	1000
P.O. Box 7159	, 00
Missoula MT 59807	
Kalispell Regional Medical Center Foundation	76340
310 Sunnyview Lane	( • 1 •
Kalispell MT 59901	
Loppet Foundation	5000
1301 Theodore Wirth Parkway	
Minneapolis MN 55422	
Wounded Warriors	
4899 Belfort Rd., Suite 300	
Jacksonville FL 32256	
Lyric Opera of Chicago	1075
20 N. Wacker	1013
Chicago IL 60610	
Night Ministry	1000
4711 Ravenswood Ave.	7 000
Chicago IL 60640	
Eagle Nature Foundation	250
300 E. Hickory	~00
Apple River IL 61001	
Citizens for a Better Flathead	250
P.O. Box 771	
Kalispell MT 59903	
Upper West Shore Quick Response Unit	500
P.O. Box 911	
Lakeside MT 59922	9 00
Humane Society of Northwest Montana	250
P.O. Box 221	
Kalispell MT 59903	

Boy Scout Troop 123 Shepherd of the Hills Lutheran Church 500 Blake Road S. Edina MN 55343	1000
Glacier Nordic Club P.O. Box 403 Whitefish MT 59937	100
Bob Marshall Wilderness Foundation P.O. Box 190688 Hungry Horse MT 59919	2000
National Parkinson Foundation 200 SE 1 <sup>st</sup> St., Suite 800 Miami FL 33131	250
DREAM Adaptive Recreation Inc. P.O. Box 4084 Whitefish MT 59937	100
Fairview Hospital Foundation 2200 Riverside Ave. Minneapolis MN 55454	500
A Child's Dream KALISPELL MT 59901	1-00
Flathead County Search & Rescue P.O. Box 358 Kalispell MT 59903	
WORLD VISION Monneapolis MN	.382
Bethel International Full Gospel Church 2625 N. Talman Chicago IL 60647	100
	# 118200

## SCHEDULES TO ACCOMPANY THE 2014 990 PF FOR THE JAMES & WANDA HOLLENSTEINER FOUNDATION: Tax ID: 84-1395820

Part 1: Line 16: Legal fees of \$37 consist of \$15 paid to the Montana Secretary of State with the filing of our Annual Corporate Registration, and \$22 paid to the Lake County Leader newspaper to publish a Legal Notice. No fees were incurred for accounting or other professional fees. I am a licensed attorney and skilled in financial and accounting matters. I prepare this return without compensation.

Line 18: Taxes of \$839 were paid with the 2013 return

Line 23: Other expenses of \$592 consist of \$400 for administrative expenses such as postage, printing, telephone, etc. and \$192 for the rental of a post office box.

Part 11: See enclosed statements from Charles Schwab and Co, for information as to the amounts of corporate stock owned by the Foundation as of the beginning and end of the year.

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

See Exhibit A for a listing of directors and officers

See Exhibit C for a listing of contributions given in 2014.

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Schwab One® Account of JAMES & WANDA HOLLENSTEINER FN

Account Number 7068-8215

Statement Period
December 1-31, 2014

Change in Account Value	This Period	Year to Date	Account Value (\$) Over Last 12 Months [in Thousands]
THE PARTY OF THE PROPERTY OF THE PARTY OF TH	STREET,		
Starting Value	\$ 2,385,155.84	\$ 2,522,535.54	
Cash Value of Purchases & Sales	0.00	00:0	3000
Investments Purchased/Sold	00.0	00.0	2500
Deposits & Withdrawals	00.0	(48,666.50)	
Dividends & Interest	11,935.90	60,393.53	
Fees & Charges	0.00	00'0	
Transfers	(40,219.24)	(40,219.24)	
Income Reinvested	(0.42)	(11.51)	
Change in Value of Investments	39,857.34	(B) CB-1-69 (	1/14 2/14 3/14 4/14 5/14 6/14 7/14 8/14 9/14 10/14 11/14 1
Ending Value on 12/31/2014	\$ 2,396,729.42	\$ 2,396,729.42	
Frojaitonangailm Account Value	4 411 573 69		
		9/(GB/H)	

12/14

Gain or (Loss) Summary Realized Gain or (Loss) This Period	Short Term \$0.00 Long Term \$0.00	Officalized Gain of (LOSS) All Investments Values may not reflect all of your gains/losses.
Market Value % of Account Assets	\$12,227.46 2,384,601.96	\$ 2,396,729.42 \\ \$ \$ 1009%
Asset Composition	Cash and Money Market Funds [Sweep] Equities	Total Assets Long

` - Information wherever possible for most investments. Cost basis data may be incomplete or unavallable for some of your holdings.

# *unarles* SCHWAB

Schwab One® Account of JAMES & WANDA HOLLENSTEINER FN

Account Number St 7068-8215 D

Statement Period December 1-31, 2013

Change in Account Value This	This Period	Year to Date	Account Value (\$) Over Last 12 Months [in Thousands]
Starting Value	\$ 2,524,658.75	\$ 1,510,172.32	
Cash Value of Purchases & Sales	00.0	00:0	3000
Investments Purchased/Sold	0.00	00'0	5200
Deposits & Withdrawals	(12,240.39)	(62,348.53)	2000
Dividends & Interest	10,710.19	51,972.10	
Fees & Charges	00.0	00:00	
Transfers	0.00	0.00	
Income Reinvested	(0.43)	(12.62)	
Change in Value of Investments	(592.58)	1,022,752.27	1/13 2/13 3/13 4/13 5/13 6/13 7/13 8/13 9/13 10/13 11/13 12/13
Ending Value on 12/31/2013	\$ 2,522,535.54	\$ 2,522,535.54	
Trotal (Ghanga) Intercountry al US		STLOTO-169.025	
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Composition  Market Value % of Account Assets  farket Funds [Sweep]
Asset Composition Money Market Funds [Sweep] Equities Total Assets Long Cash (Debits)" Total Assets Short

Gain or (Loss) Summary Realized Gain or (Loss) This Period	_
Short Term	\$0.00
Long Term	\$0.00
Unrealized Gain or (Loss)	
All Investments \$26,5	\$26,512.60
Values may not reflect all of your gains/losses.	5895.

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

EXHIBIT A

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

#### Names and addresses of officers and directors

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

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

Jena Hollensteiner, Treasurer 5903 N. Kostner Chicago IL 60646

John Hollensteiner, Secretary 3409 Lower Valley Road Kalispell MT 59901

Lisa Hollensteiner (2006, Director 4006 Grimes Ave. S. Edina MN 55416

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

Andrew Hollensteiner, Director 10460 North Fork Road Polebridge MT 59928

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