

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**

Extended to August 15, 2016
Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

Department of the Treasury internal Revenue Service

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

| For c | alend | lar year 2015 or tax year be | ginning | | , and ending | | |
|--------------------------------------|------------|---|--|------------------------------------|---------------------------|--|---|
| Nam | e of t | foundation | | | | A Employer identification | number |
| F | cee | eman Family F | oundation | | | 36-7346240 |) |
| | | d street (or P O box number if ma | | address) | Room/suite | B Telephone number | · · · · · · · · · · · · · · · · · · · |
| 5: | 2 I | <u>Little Missio</u> | n Creek Ro | ad, PO Box 12 | 2 | 402-222-63 | 336 |
| | | wn, state or province, counti ingston, MT | ry, and ZIP or foreign p 59047 | ostal code | | C If exemption application is p | pending, check here |
| | | | utial return | Initial return of a fo | rmer public charity | D 1. Foreign organization | s check here |
| u o | ICUN | | nal return | Amended return | Triici public charity | 1. Torcigit organization | 3, CHOOK HOLD |
| | | | ddress change - | Name change | | Foreign organizations me check here and attach co | eeting the 85% test, |
| H C | heck | | <u> </u> | empt private foundation | | E If private foundation sta | |
| | , | ction 4947(a)(1) nonexempt | | Other taxable private founda | tion | under section 507(b)(1 | |
| I Fa | | rket value of all assets at end | | ng method: X Cash | Accrual | F If the foundation is in a | , , , |
| | | Part II, col. (c), line 16) | or | ther (specify) | | under section 507(b)(1 | |
| • | | 2,046, | 562 . (Part I, colu | mn (d) must be on cash b | oasis) | | |
| Pa | rt I | Analysis of Revenue and E (The total of amounts in column necessarily equal the amounts i | s (b), (c), and (d) may not | (a) Revenue and expenses per books | (b) Net investment income | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) |
| | 1 | Contributions, gifts, grants, | etc., received | 225,000. | | N/A | |
| | 2 | Check If the foundation is | not required to attach Sch B | | | | |
| ļ | 3 | Interest on savings and temporar cash investments | гу | 12,003. | 12,003. | , | Statement 1 |
| | 4 | Dividends and interest from | securities | 29,209. | 29,209. | , | Statement 2 |
| | 5a | Gross rents | | | | | |
| | b | Net rental income or (loss) | | 122 226 | ···· | | |
| ē | 6a | Net gain or (loss) from sale of ass Gross sales price for all | | 139,836. | | - F | |
| eni | | assets on line 6a | 936,639. | | 139,836. | I REC | Envi |
| 2016 anue | | Capital gain net income (from Par | rt IV, line 2) | | 139,030 | 121 | |
| 7 | 0 | Net short-term capital gain Income modifications | | | | IS JUN | 8 220 1 |
| 30 | 10a | Gross sales less returns and allowances | | <u> </u> | | | 20.0 |
| | | Less Cost of goods sold | | | | L OGDI | !^1 |
| N | | Gross profit or (loss) | | | | 307 | 11/17 |
| | 11 | Other income | | | | | |
| CANNED | 12 | Total. Add lines 1 through | <u>11</u> | 406,048. | 181,048 | | |
| £ | 13 | Compensation of officers, direction | | 0. | 0, | | 0. |
| Ķ | 14 | Other employee salaries and | • | | | | |
| (Civ | | Pension plans, employee be | enents | | | <u> </u> | |
| Sus | | Legal fees Accounting fees | Stmt 3 | 2,750. | 2,750 | | 0. |
| ă | | Other professional fees | Deme 3 | 27,334 | <u> </u> | | |
| ě. | ļ | Interest | | | | | |
| Operating and Administrative Expense | l . | Taxes | Stmt 4 | 794. | 794 | | 0. |
| nist | 19 | Depreciation and depletion | | | | | |
| Ē | 20 | Occupancy | | | | | |
| ₽ | 21 | Travel, conferences, and m | eetings | | | | |
| auc | 22 | Printing and publications | _ | | | ļ | |
| ing | 23 | Other expenses | Stmt 5 | 17,744. | 17,744 | • | 0. |
| rati | 24 | Total operating and admin | | 21 200 | 21 200 | | |
| ő | ٥. | expenses. Add lines 13 thr | | 21,288. 256,680. | 21,288 | • | 256,680. |
| _ | 1 | Contributions, gifts, grants Total expenses and disbut | | 230,000. | | | 230,000. |
| | 20 | Add lines 24 and 25 | เจอเทธแเซ | 277,968. | 21,288 | | 256,680. |
| | 27 | Subtract line 26 from line 1 | 12: | 2,500. | | | |
| | | Excess of revenue over expense | | 128,080. | | | |
| | | Net investment income (if i | | | 159,760 | | |
| | _c | Adjusted net income (if neg | | | | N/A | |
| 5235 11-2 | 01 4-15 | LHA For Paperwork Re | duction Act Notice, see | instructions | | | Form 990-PF (2015) |

36-7346240

Form **990-PF** (2015)

Freeman Family Foundation

Form 990-PF (2015)

| | eman Family Fou and Losses for Tax on | | Incomo | | | 36 | <u>-7346</u> | 240 | Page 3 |
|---|---|---|---------------------------------------|--------------------------|---------------------------------------|-----------------------------|-----------------------------|---------------------------|---------------|
| (a) List and descr | tibe the kind(s) of property sold (rehouse; or common stock, 200 | e.g., real estate, | | (b) Hov P - P | v acquired urchase onation | (c) Date ac | cquired /, yr.) | (d) Dat (mo., da | |
| a | | | | 0-0 | Onation | | | · · | |
| See Attached | Statements | | | | | | | | |
| C | | _ | | | | | | | |
| <u>d</u> | ···· | | | | | | _ | | |
| <u>e </u> | (f) Depression allowed | (-) () | | | | /b) Co. | n ar (lass) | | |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | | t or other basis epense of sale | | . | | n or (loss) (f) minus (g |) | |
| a | | | | _ | | | | | |
| b c | | | - | _ | · · · · · · · · · · · · · · · · · · · | | | | |
| d | | | · · · · · · · · · · · · · · · · · · · | | | | | | |
| e 936,639. | | | 796,80 | 3. | | | | 139 | ,836. |
| | g gain in column (h) and owned | by the foundation | | | |) Gains (Co | | ıınus | |
| (i) F.M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | | cess of col. (ı) col. (ı), ıf any | | CO | l. (k), but no Losses (f | t less than rom col. (h | | |
| a | | | | | | | _ | | |
| b | | | | | | | | | |
| <u>c</u> | | - | | | | | | | |
| <u>d</u> | | | | _ | | | | 120 | ,836. |
| <u>e</u> | <u> </u> | | | $\overline{}$ | | | | 133 | , 030. |
| ? Capital gain net income or (net ca | ipital loss) If gain, also ei | nter in Part I, line 7 r -0- in Part I, line | 7 7 | <u>}</u> | 2 | | | 139 | ,836. |
| Net short-term capital gain or (los | |) and (6): | | 1 | | | | | |
| If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8 | | | | | 3 | | N/A | | |
| Part V Qualification U | nder Section 4940(e) f | or Reduced | Tax on Net | Inves | tment Inc | come | | | |
| For optional use by domestic private | foundations subject to the section | on 4940(a) tax on | net investment in | come.) | | | | | |
| f continue 4040/d\/2\ applies legge t | hie nort blank | | | | | | | | |
| f section 4940(d)(2) applies, leave the | ilis part biarik. | | | | | | r | | |
| Was the foundation liable for the sec | | | • | iods | | | l | Yes | X No |
| f "Yes," the foundation does not qua | <u>lify under section 4940(e). Do no</u> each column for each year; see th | | | ntries | | | | | - |
| | | le instructions bei | ore making any er | | | | | d) tion ratio | |
| (a) Base period years Calendar year (or tax year beginni | (b) Adjusted qualifying | distributions | Net value of no | (c) ncharita | ble-use assets | ; (| Distribi) ool. (b) divid | tión ratio led by col. | (c)) |
| 2014 | | 217,061. | | 2,: | 208,585 | _ | , | | 98281 |
| 2013 | | 113,428. | | | 988,276 | | | | 57048 |
| 2012 | | 88,531. | | | <u>523,868</u> | | | | 58096 |
| 2011 | | 38,257. | | | <u>336,283</u> | | | | <u> 28629</u> |
| 2010 | | 34,320. | | 1, | 065,275 | 5. | | .0 | <u>32217</u> |
| | | | | | | 1 . | | 2 | 74071 |
| 2 Total of line 1, column (d) | C | utal an line O by E | as bu the number | of woor | | 2 | | . 4 | 74271 |
| 3 Average distribution ratio for the the foundation has been in existe | | ntai on line 2 by 5, | or by the number | oi years | • | 3 | | . 0 | 5 <u>4854</u> |
| the loundation has been in existe | ince ii iess man o years | | | | | - | | | <u> </u> |
| 4 Enter the net value of noncharital | ble-use assets for 2015 from Par | t X, line 5 | | | | 4 | 2 | 2,212 | ,354. |
| 5 Multiply line 4 by line 3 | | | | | | _5 | | 121 | <u>,356.</u> |
| 6 Enter 1% of net investment incor | me (1% of Part I, line 27b) | | | | | 6 | | 1 | <u>,598.</u> |
| 7 Add lines 5 and 6 | | | | | | 7 | | 122 | <u>,954.</u> |
| 8 Enter qualifying distributions fro | | | | | | 8 | | 256 | <u>,680.</u> |
| | n line 7, check the box in Part VI, | line 1b, and comp | olete that part usin | ıg a 1% | tax rate. | | | | |
| See the Part VI instructions. | | | | | | | | | |

| Freeman Family Foundation Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), | | 5 – 7346 8 - see i | | ctio | Page 4 |
|--|--------------|-----------------------|-----|------------|------------|
| 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. | | | | | <u> </u> |
| Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) | | | | | |
| b Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1% | | 1 | | 1,5 | 98. |
| 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 | | | 0. |
| 3 Add lines 1 and 2 | | 3 | | 1,5 | 98. |
| 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) | | 4 | | | 0. |
| 5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | | 5 | | 1,5 | 98. |
| 6 Credits/Payments: | | | | | |
| a 2015 estimated tax payments and 2014 overpayment credited to 2015 6a 2 | 05. | | | | |
| b Exempt foreign organizations - tax withheld at source 6b | | | | | |
| c Tax paid with application for extension of time to file (Form 8868) 6c 2,0 | 00. | | | | |
| d Backup withholding erroneously withheld 6d 6d | | | | | |
| 7 Total credits and payments. Add lines 6a through 6d | | 7 | | <u>2,2</u> | <u>05.</u> |
| 8 Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached | | 8 | | | <u>30.</u> |
| 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | > | 9 | | | |
| 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | _ | 10 | | 5 | <u>77.</u> |
| 11 Enter the amount of line 10 to be: Credited to 2016 estimated tax > 577 . Refundo | ed 🖊 📗 | 11 | | | 0. |
| Part VII-A Statements Regarding Activities | | | | V | |
| 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or in | tervene in | | L. | Yes | |
| any political campaign? | | | 1a | | <u>X</u> |
| b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the de | - | | 1b | - | <u> </u> |
| If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials product that the the foundation is a second to suit the second to suit t | ublisnea (| or | | | |
| distributed by the foundation in connection with the activities | | | ١ | | 37 |
| c Did the foundation file Form 1120-POL for this year? | | | 1c | | <u> </u> |
| d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: | 0. | | | | |
| (1) On the foundation. ► \$ (2) On foundation managers. ► \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation | | | | | |
| managers. > \$ 0. | " | | | | |
| 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? | | | 2 | | х |
| 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 incorpor | ation, 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? | | N/A | 4b | · | |
| 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | 5 | | X |
| If "Yes," attach the statement required by General Instruction T. | | | | · | |
| 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied 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 t | he state lav | N | | | |
| remain in the governing instrument? | | | 6 | X | |
| 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 F | Part XV | | 7 | X | |
| | | | l | | |
| 8a Enter the states to which the foundation reports or with which it is registered (see instructions) | | | | | |
| IL | | | | | |
| b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) | | | , | | |
| of each state as required by General Instruction G? If "No," attach explanation | | | _8b | X | |
| 9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) | for calenda | ar | | | |
| year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV | ~ . | 1 0 | 9 | | <u>X</u> |
| 10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresse | s Sti | <u>nt 10</u> | 10 | _X_ | |

| | 990-PF(2015) Freeman Family Foundation | <u> 36-7346</u> | 240 | | Page 5 |
|----|--|-------------------|-----|----------|-------------------|
| Pa | rt VII-A Statements Regarding Activities (continued) | | | | |
| | | | | Yes | No |
| 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 ▶ LEE A. FREEMAN, JR., TRUSTEE Telephone no | . ► 404-22 | 2-6 | 336 | |
| | Located at ▶52 LITTLE MISSION CREEK ROAD, LIVINGSTON, MT | ZIP+4 ▶59 | - | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | | | • | $\overline{\Box}$ |
| | | - | N | /A | |
| 16 | At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, | | | Yes | No |
| | securities, or other financial account in a foreign country? | | 16 | | X |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the | | | | |
| | foreign country | | | | |
| 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. | | | Yes | No |
| 18 | During the year did the foundation (either directly or indirectly): | | | | |
| | | Yes X No | | 1 | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | | |
| | | Yes X No | | | |
| | · · · · · · · · · · · · · · · · · · · | Yes X No | | | |
| | | Yes X No | | | |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | | | | |
| | for the benefit or use of a disqualified person)? | Yes X No | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | | |
| | if the foundation agreed to make a grant to or to employ the official for a period after | | | 1 | |
| | | Yes X No | | | |
| | b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | 103 [21] 100 | | | |
| | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | N/A | 1b | | |
| | Organizations relying on a current notice regarding disaster assistance check here | N/A | 10 | | |
| | 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 2015? | | 1c | | х |
| 9 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation | n | | | -23 |
| _ | defined in section 4942(j)(3) or 4942(j)(5)): | • | | | |
| | a At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginn | ına | | | ĺ |
| , | | Yes X No | | | |
| | | | | į | |
| | If "Yes," list the years,,,,, | ect | | | |
| | valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attai | | | | |
| | 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. | 21, 22 | | | |
| | | | | | |
| q | a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time | | | | |
| J | | Yes X No | | | |
| | b If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons a | | | |] |
| | May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to | | | | |
| | of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule | | | | 1 |
| | Form 4720, to determine if the foundation had excess business holdings in 2015) | N/A | 3b | | |
| A | a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 11/ A | 4a | | X |
| | h. Did the foundation invest during the year any amount in a mariner that would jobpardize its charitable purposes. | ise that | | | |

Form **990-PF** (2015)

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

| Form 990-PF (2015) Freeman Family Foundatio Part VII-B Statements Regarding Activities for Which I | n Form 4720 May Be I | Required (continu | 36-73462 | 40 | Page 6 |
|--|---------------------------------------|-----------------------------|--|----------------|--|
| | TOTTI 47 ZO Way De I | required (continu | nea) | | т — |
| 5a During the year did the foundation pay or incur any amount to: | * 4045(a)\0 | □ v- | 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 | or to carry on, directly or indire | | . . | | 1 |
| any voter registration drive? | • | | s X No | | |
| (3) Provide a grant to an individual for travel, study, or other similar purposes | | Ye | s X No | ŀ | |
| (4) Provide a grant to an organization other than a charitable, etc., organizatio | n described in section | <u> </u> | GET | | |
| 4945(d)(4)(A)? (see instructions) | | | s X No | | |
| (5) Provide for any purpose other than religious, charitable, scientific, literary, | or educational purposes, or t | | | | |
| the prevention of cruelty to children or animals? | | | s X No | | |
| b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni | | ın Regulations | | | |
| section 53.4945 or in a current notice regarding disaster assistance (see instru | ictions)? | | N/A | 5b | |
| Organizations relying on a current notice regarding disaster assistance check h | nere | | | | |
| c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f | rom the tax because it mainta | ined | | | |
| expenditure responsibility for the grant? | Ŋ | 1/A | s L No | | |
| If "Yes," attach the statement required by Regulations section 53.494 | 5-5(d). | | | | |
| 6a Did the foundation, during the year, receive any funds, directly or indirectly, to | pay premiums on | | | | |
| a personal benefit contract? | | Ye | s X No | | |
| b Did the foundation, during the year, pay premiums, directly or indirectly, on a p | personal benefit contract? | | L | 6Ъ | 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 | shelter transaction? | ☐ Ye | s X No | | |
| b If "Yes," did the foundation receive any proceeds or have any net income attribu | | | N/A | 7b | |
| Part VIII Information About Officers, Directors, Trust | | nagers, Highly | <u> </u> | | |
| Paid Employees, and Contractors | • | | | | |
| 1 List all officers, directors, trustees, foundation managers and their | compensation. | | • | | |
| | (b) Title, and average | (c) Compensation | (d) Contributions to employee benefit plans | (e) Ex | pense |
| (a) Name and address | hours per week devoted to position | (If not paid, enter -0-) | and deferred compensation | account | i, otner inces |
| LEE A. FREEMAN, JR. | TRUSTEE | | , | _ | |
| 52 LITTLE MISSION CREEK ROAD | | | | l | |
| LIVINGSTON, MT 59047 | 10.00 | 0. | 0. | | 0. |
| CRISPIN FREEMAN | TRUSTEE | | | | <u> </u> |
| 52 LITTLE MISSION CREEK ROAD | 11100122 | | | İ | |
| LIVINGSTON, MT 59047 | 1.00 | 0. | 0. | ŀ | 0. |
| CLARK FREEMAN | TRUSTEE | | | | . |
| 52 LITTLE MISSION CREEK ROAD | IKOSIEE | | | | |
| LIVINGSTON, MT 59047 | 1.00 | 0. | 0. | 1 | ٥ |
| CASSIDY FREEMAN | TRUSTEE | 0. | · · | · | 0. |
| | ILVOSIEE | | | | |
| 52 LITTLE MISSION CREEK ROAD | 1.00 | _ | 0. | | ^ |
| LIVINGSTON, MT 59047 2 Compensation of five highest-paid employees (other than those inc | | enter "NONE " | <u> </u> | | <u> </u> |
| 2 Compensation of the mignest-paid employees (other trial triose me | (b) Title, and average | , c.itci iqoiqu. | (d) Contributions to employee benefit plans | (e) Ex | ense |
| (a) Name and address of each employee paid more than \$50,000 | hours per week | (c) Compensation | and deterred | account | t, other |
| 17017 | devoted to position | | compensation | allowa | inces |
| NONE | _ | | | | |
| | | - | | | |
| | 4 | | | , | |
| | | - | | | |
| | - | | | | |
| | | - | | - | |
| | 4 | | | | |
| | <u> </u> | | | | |
| | 4 | | | | |
| | | ٠ | <u> </u> | L | |
| Total number of other employees paid over \$50,000 | · · · · · · · · · · · · · · · · · · · | | > | | 0 |
| | | | Form | 990-PF | (2015) |

| Form 990-PF (2015) Freeman Family Foundation 36 | <u>-73462</u> | 40 Page 7 |
|--|---------------|------------------|
| Part VIII 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 | <u> </u> | 0 |
| | | |
| 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. | E | xpenses |
| 1 N/A | | |
| 1 | | |
| | | |
| 2 | | |
| | | |
| | | |
| 3 | | |
| | | |
| | | |
| 4 <u> </u> | \dashv | |
| | _ | |
| 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. | $\overline{}$ | Amount |
| 1 N/A | | |
| | \neg | |
| | | |
| 2 | | |
| | | |
| | | |
| All other program-related investments. See instructions. | | |
| 3 | | |
| | _ | |
| | | |
| Total. Add lines 1 through 3 | | 0. |
| | Form | 990-PF (2015) |

4940(e) reduction of tax in those years.

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: a Average monthly fair market value of securities 2,160,447. 1a 85,598. b Average of monthly cash balances 1b c Fair market value of all other assets 1c 2,246,045. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 0. 1e Acquisition indebtedness applicable to line 1 assets 246 3 3 Subtract line 2 from line 1d Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 33,691. 4 2,212,354. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 Minimum investment return. Enter 5% of line 5 110,618 Part XI | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here

and do not complete this part.) 110,618. Minimum investment return from Part X, line 6 1 1,598. 2a Tax on investment income for 2015 from Part VI, line 5 Income tax for 2015. (This does not include the tax from Part VI.) c Add lines 2a and 2b 2¢ 109,020 Distributable amount before adjustments. Subtract line 2c from line 1 3 3 4 Recoveries of amounts treated as qualifying distributions 109,020. Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 109 020 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 256,680. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 256,680. Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b 1,598. 5 255,082. Adjusted qualifying distributions. Subtract line 5 from line 4 6 Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section

Form **990-PF** (2015)

Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2014 | (c) 2014 | (d) 2015 |
|---|---------------|----------------------------|-------------|---------------------------------------|
| 1 Distributable amount for 2015 from Part XI, line 7 | | | | 109,020. |
| 2 Undistributed income, if any, as of the end of 2015 | | | | |
| a Enter amount for 2014 only | | | 0. | · · · · · · · · · · · · · · · · · · · |
| b Total for prior years: | | 0 | | |
| 3 Excess distributions carryover, if any, to 2015: | | 0. | | |
| a From 2010 | | | | |
| b From 2011 | | | | |
| c From 2012 | | | | |
| d From 2013 | | : | | |
| e From 2014 93, 193. | | | | |
| f Total of lines 3a through e | 93,193. | | | |
| 4 Qualifying distributions for 2015 from | | | | |
| Part XII, line 4: ►\$ 256,680. | | | | |
| a Applied to 2014, 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. | | | <u></u> |
| d Applied to 2015 distributable amount | | | | 109,020. |
| e Remaining amount distributed out of corpus | 147,660. | | | |
| 5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a)) | 0. | | | 0. |
| 6 Enter the net total of each column as indicated below: | | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 240,853. | | | |
| 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 2014. Subtract line | | | | |
| 4a from line 2a. Taxable amount - see instr. | | | 0. | |
| f Undistributed income for 2015. Subtract | | | | |
| lines 4d and 5 from line 1. This amount must | | | | |
| be distributed in 2016 | | | | 0. |
| 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) | 0. | | | |
| 8 Excess distributions carryover from 2010 | | | | |
| not applied on line 5 or line 7 | 0. | | | |
| 9 Excess distributions carryover to 2016. | | | | |
| Subtract lines 7 and 8 from line 6a | 240,853. | | | |
| 10 Analysis of line 9: | | | | |
| a Excess from 2011 | | | | |
| b Excess from 2012 | | | | |
| c Excess from 2013 | | | | |
| d Excess from 2014 93,193. | | | | |
| e Excess from 2015 147,660. | | | | |
| | | | | Earm QQA_DE (2016) |

| Form 990-PF (2015) Freeman | Family Fou | ndation | | 36-7 | 346240 Page 1 |
|---|------------------------------|----------------------------|------------------------------|---------------------------------------|------------------|
| Part XIV Private Operating F | oundations (see ins | tructions and Part V | II-A, question 9) | N/A | |
| 1 a If the foundation has received a ruling o | r determination letter that | it is a private operating | | | |
| foundation, and the ruling is effective fo | r 2015, enter the date of t | he ruling | L | · | |
| b Check box to indicate whether the found | lation is a private operatin | g foundation described | I in section | 4942(j)(3) or | 4942(j)(5) |
| 2 a Enter the lesser of the adjusted net | Tax year | | Prior 3 years | | |
| income from Part I or the minimum | (a) 2015 | (b) 2014 | (c) 2013 | (d) 2012 | (e) Total |
| investment return from Part X for | | | | | |
| each year listed | | | <u> </u> | | |
| b 85% of line 2a | | | | | |
| c Qualifying distributions from Part XII, | | | | | |
| line 4 for each year listed | | | | | |
| d Amounts included in line 2c not | | | | | |
| used directly for active conduct of | | | | | |
| exempt activities | | | | | |
| e Qualifying distributions made directly | | | | | |
| for active conduct of exempt activities. | | | | | |
| Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: | | | | | |
| (1) Value of all assets (2) Value of assets qualifying | | | | | |
| under section 4942(J)(3)(B)(I) b "Endowment" alternative test - enter | | | | | |
| 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| c "Support" alternative test - enter: | | | | | |
| (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section | | | 1 | | |
| 512(a)(5)), or royalties) (2) Support from general public | | | | | 1 |
| and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III) | | | | | |
| (3) Largest amount of support from | | | | | |
| an exempt organization | | | | | |
| (4) Gross investment income | | | | 10000 | |
| Part XV Supplementary Info | | | y if the foundatio | n had \$5,000 or r | nore in assets |
| 1 Information Regarding Foundation | on Managers: | | | | |
| a List any managers of the foundation where year (but only if they have contributed in the contributed in | | | ntributions received by t | ne foundation before the o | close of any tax |
| None | | | | | |
| b List any managers of the foundation when the control of which the foundation has a control of the foundation of the control of the foundation of the control of the foundation of the found | | | n (or an equally large por | tion of the ownership of a | ı partnership or |
| None | | | | | |
| 2 Information Regarding Contribut Check here ► X if the foundation | only makes contributions | to preselected charitab | le organizations and does | | |
| the foundation makes gifts, grants, etc. | | | | | ına O. |
| a The name, address, and telephone nun | nber or e-mail address of | the person to whom ap | plications should be addi | essed: | |
| b The form in which applications should | be submitted and informa | tion and materials they | should include: | · · · · · · · · · · · · · · · · · · · | |
| c Any submission deadlines: | - | | | | - 1.1. |
| | | | · | | |
| d Any restrictions or limitations on award | is, such as by geographic | al areas, charitable field | is, kınds of institutions, c | r other factors: | |
| | | | | | |
| | | | | | |

Supplementary Information (continued) Part XV 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient show any relationship to any foundation manager or substantial contributor Purpose of grant or Foundation **Amount** status of contribution Name and address (home or business) recipient a Paid during the year 501(C)(3) -DONATION TO GENERAL CONGREGATION BETH SHALOM NONE PUBLIC FUND 2010 W KOCH ST BOZEMAN, MT 59718 500. FRIENDS OF MONTANA PBS NONE 501(C)(3) -DONATION TO GENERAL PUBLIC FUND P O BOX 10715 25. BOZEMAN, MT 59719 NONE 501(C)(3) -DONATION TO GENERAL HUMANE SOCIETY OF PARK CNTY 3 BUSINESS PARK ROAD PUBLIC FUND 200. LIVINGSTON MT 59047 501(C)(3) -DONATION TO GENERAL NONE PARK COUNTY FRIENDS OF THE ARTS FUND PUBLIC 106 N MAIN 100. LIVINGSTON, MT 59047 NONE 501(C)(3) -DONATION TO GENERAL SHIFT EMPOWERMENT PUBLIC FUND 105 S 2ND ST 100. LIVINGSTON MT 59047 See continuation sheet(s) **▶** 3a 256 680. Total **b** Approved for future payment None <u> 3b</u> Total

Part XVI-A Analysis of Income-Producing Activities

| Enter groce | amount | c unlace others | uco indicato | | · · · | Unre | lated business | ncome | Exclude | nd by section 512, 513, or 51 | 14 | (-) |
|-------------|--------------|-------------------|---------------|-------------|-------------|----------------|------------------|-----------|---------------|-------------------------------|----------|--------------------------|
| Enter gross | amouni | s unless otherv | vise indicate | :O. | | (a) Busines | | (b) | (c) Exclu- | (d) | - | (e) Related or exempt |
| 1 Progran | n service | revenue: | | | | Busines | S An | nount | sion | Amount |) | function income |
| _ | | | | | | | | | | | | |
| | | | | | | | | <u>_</u> | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | 1 | | | | | | | |
| f — | | | | | | | | | | 14-1 | | |
| g Fees | and cor | tracts from gov | ernment ad | encies | | | | | | | | |
| - | | es and assessm | - | • | | | | | | | 1 | * |
| | | igs and tempor | | | _ | | | | | 744. | | |
| investm | | , | | | | | | | 14 | | | 12.003. |
| 4 Dividen | ds and ir | iterest from sec | urities | | | | | | 14 | | | 12,003. 29,209. |
| 5 Net rent | al incom | e or (loss) from | real estate: | : | ľ | | | | | | | |
| | | d property | | | | | | | | | | |
| | | nced property | | | | | | | | | | , |
| | | e or (loss) from | n personal | | Ī | | | | | | | |
| propert | | (| | | | | | | | | - 1 | |
| 7 Other in | - | t income | | | | | | | | .4*2.0* | | |
| 8 Gain or | (loss) fr | om sales of ass | ets other | | | | | · · · | | | | |
| than inv | | | | | | | | | 14 | | | 139,836. |
| | - | oss) from spec | al events | | | | | | | | | |
| | | loss) from sales | | ry | | | | | | | | · |
| 11 Other re | , | , | | , | | | | | | | | ·- - |
| a | | | | | 1 | | | | | | İ | |
| | | | | | - 1 | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| е | | | | | | | | | | | | |
| 12 Subtota | II. Add co | olumns (b), (d), | and (e) | | | - | | 0. | | (| 0. | 181,048. |
| | | 12, columns (b) | | e) | _ | | | | | 1; | 3 | |
| (See works | heet in l | ne 13 instruction | ons to verify | calculation | ons.) | | | | | | | |
| Part X | VI-R | Relation | shin of | Activit | ties to | the A | ccomplish | nent of F | remnt | Purnoses | | |
| - art X | | 11010101 | | 7000 | | | | | Cilipt | | | |
| Line No. | | | | | | | | | \ contribu | ted importantly to the ac | ccomplis | hment of |
| | | | | | | | g funds for such | | | ·· | | |
| 3 4 | | | | | | | | | | purposes. | | |
| | | | | | | | | | | purposes. | | |
| 8 | A11 | income | will | be 1 | used | for | future | charit | able | purposes. | | |
| | | | | | | | | | | . | | |
| | | | | | | | | | | | - | |
| | <u> </u> | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | - | |
| | | | | | | | | | | | | |

| | Exempt Organi | izations | | | | | | | |
|---------------------|--------------------------------------|--------------------------|--------------------|---------------------------------------|--------------------------|---------------------------------|-----------------|----------|------|
| 1 Did the or | ganization directly or indir | ectly engage in any | of the following | g with any other organization | on described in section | on 501(c) of | T | Yes | No |
| | | | | 7, relating to political organ | | • • | | | |
| | from the reporting founda | • | | - ' | | | | | |
| (1) Cash | | | | | | | 1a(1) | | X |
| (2) Othe | | | | | | | 1a(2) | | X |
| b Other tran | | | | | | | | _ | |
| | s of assets to a noncharitat | hle exemnt organizat | inn | | | | 1b(1) | | _x_ |
| | hases of assets from a nor | | | | | | 1b(2) | | X |
| • • | al of facilities, equipment, (| = | a garnzanon | | | | 1b(3) | | X |
| V-, | ibursement arrangements | | | | | | 1b(4) | | X |
| | s or loan guarantees | | | | | | 1b(5) | - | X |
| | ormance of services or me | mharchin or fundras | eina enlicitatio | ne | | | 1b(6) | | X |
| | of facilities, equipment, mai | | | | | | 1c | | X |
| _ | | • | | dule. Column (b) should alv | ways show the fair m | arket value of the goods of | | ets | |
| | | | _ | ed less than fair market valu | | | | ,010, | |
| | d) the value of the goods, | | | a loos than lan marrier ran | o many mandadan | or onaring arrangomoni, o | | | |
| (a) Line no | (b) Amount involved | , | | exempt organization | (d) Description | of transfers, transactions, and | sharing ar | rangeme | nts |
| , , | , , | (2) 222 0. | N/A | | .,,, | | | | |
| | | | 41/13 | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | - | |
| <u> </u> | | | | | | | | | |
| | | | | · · · · · · · · · · · · · · · · · · · | | | | | |
| | | | • | ······ | | | | | |
| - | | | | | | | | | |
| | | - | | | | | | | |
| | | | | | | · - | | | |
| | | | • | | | - · | | | |
| | | | | | | | | | |
| | | _ | | | - | | | _ | |
| | | | | | - | | | | |
| | | - | | | | | | | |
| 2a Is the for | indation directly or indirec | tly affiliated with, or | related to, one | or more tax-exempt organ | izations described | | | | |
| | n 501(c) of the Code (other | • | - | | | | Yes | X | □ No |
| | complete the following sch | | /(=// =: eee. | | | _ | _ | | |
| <u> </u> | (a) Name of org | | | (b) Type of organization | T (| c) Description of relations | np | | |
| | N/A | <u></u> | | | | <u> </u> | , | | |
| | | | * | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | ····· | | | | | | | | |
| | | | | ng accompanying schedules and | | | y the IRS o | discuss | thic |
| Sign and | pelief, it is true, correct, and cor | mplete Declaration of pr | reparer (other tha | n taxpayer) is based on all inform | mation of which preparer | retu | rn with the | e prepar | er |
| Here | YMA TVC | MEN A | | 16-21-16 | TRUSTE | | X Yes | |]″No |
| Sıç | nature of officer or trustee | | | Date | Title | | | | |
| | Print/Type preparer's na | | Preparer's s | ignature | Date | Check X if PTIN | | | |
| | | | 1 . 1 | | | self- employed | | | |
| Paid | Wanda C. D |)ill | Waro | u exce | - | P0 | 0073 | 436 | |
| Preparer | | | 1. C.P | ·.A | <u> </u> | Firm's EIN ► 74-3 | | | |
| Use Only | | | _, | • | | | . • | _ | |
| • | Firm's address ► 70 | 1 Rocklar | nd Aven | ue | · <u></u> | | | | |
| | 1 | ke Bluff | | | | Phone no. 847-2 | 34-1 | 933 | |
| | | | | | | | orm 99 0 | | |

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and

its instructions is at www.lrs.gov/form990 .

OMB No 1545-0047

2015

Employer identification number

Freeman Family Foundation 36-7346240 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions. General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II See instructions for determining a contributor's total contributions Special Rules For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II. For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF). but it must answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it does not meet the filing requirements of Scheaule B (Form 990, 990-EZ, or 990-PF)

Employer identification number

Freeman Family Foundation

| Part I | Contributors (see instructions). Use duplicate copies of Part I if addition | al space is needed. | |
|------------|---|----------------------------|---|
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| 1 | LEE A. FREEMAN CHARITABLE TRUST 52 LITTLE MISSION CREEK ROAD LIVINGSTON, MT 59047 | \$\$225,000. | Person Payroll Noncash X (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Omnicash Complete Part II for noncash contributions.) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroll Noncash (Complete Part II for noncash contributions) |
| (a) No. | (b) Name, address, and ZIP + 4 | (c) Total contributions | (d) Type of contribution |
| | | \$ | Person Payroli Noncash (Complete Part II for noncash contributions) |

Name of organization

Employer identification number

Freeman Family Foundation

| art il | Noncash Property (see instructions) Use duplicate copies of P. | art II if additional space is needed | |
|------------------------------|--|--|----------------------|
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| 1 | CORPORATE STOCKS AND BONDS | | |
| | | \$\\$\$ | 03/30/15 |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | \$ | |
| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
| | | | |

| lame of organ | nization | | Employer identification number | | |
|---------------------------|---|--|---|--|--|
| Freemar Part III | the year from any one contributor. Complete col | lumns (a) through (e) and the folk | 36-7346240 ed in section 501(c)(7), (8), or (10) that total more than \$1,000 fo llowing line entry. For organizations | | |
| | completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional | charitable, etc., contributions of \$1,000 c | or less for the year (Enter this info once) | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | |
| - | | (e) Transfer of gi | gift | | |
| - | Transferee's name, address, and | 1 ZIP + 4 | Relationship of transferor to transferee | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | |
| | Transferee's name, address, and | (e) Transfer of gi | gift Relationship of transferor to transferee | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | |
| 1. | | | | | |
| | Transferee's name, address, an | (e) Transfer of g | gift Relationship of transferor to transferee | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held | | |
| - | (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to the | | | | |
| | | | | | |

| ra | TT IV Capital Gains and Los | sses for Tax on Investment Income | | ·-, | | |
|--------------|---|---|--|--|---|----------------------------------|
| | | describe the kind(s) of property solick warehouse; or common stock, 2 | | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) |
| 1a | FIDELITY GAIN/ | LOSS | | P | | |
| _ | FIDELITY GAIN/ | LOSS | | P | | |
| | FIDELITY GAIN/ | | | P | | |
| | FIDELITY GAIN/ | | | P | | |
| | FIDELITY GAIN/ | | | P | | |
| | FIDELITY GAIN/ | | | P | | |
| | FIDELITY GAIN/ | | | P | | |
| | FIDELITY GAIN/ | | | P | | |
| | FIDELITY GAIN/ | | | P | | |
| | | | | P | | |
| | FIDELITY GAIN/ | | | | | |
| | FIDELITY GAIN/ | | | P | | |
| | FIDELITY GAIN/ | | | P | | |
| | FIDELITY GAIN/ | | | P | | |
| | FIDELITY GAIN/ | | | P | | |
| 0 | FIDELITY GAIN/ | LOSS | | P | | |
| | (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | |) Gain or (loss) Dlus (f) minus (g) | |
| a | 17,152. | | 18,458. | | | -1,306. |
| b | 600. | | | | | 600. |
| С | 107,216. | | 113,234. | | | -6,018. |
| d | 110,172. | | 110,111. | | | 61. |
| e | 38,208. | | 36,262. | | | 1,946. |
| - | 248,113. | | 188,468. | · · · · · | - | 59,645. |
| <u>-</u> | 534. | | 526. | | - | 8. |
| <u>g</u> | 796. | | 762. | | | 34. |
| <u>h</u> | | | | | | |
| <u> </u> | 137,051. | | 148,911. | | | -11,860. |
| | 71,240. | | 53,213. | | | 18,027. |
| <u>k_</u> | 3,894. | | 3,422. | | | 472. |
| \perp | 22,094. | | 24,775. | | | -2,681. |
| m | 26,534. | | 30,223. | | | <u>-3,689.</u> |
| n | 100,508. | | 60,223. | | | 40,285. |
| 0 | 10,175. | | 5,715. | | | 4,460. |
| | Complete only for assets shown | ng gain in column (h) and owned by | the foundation on 12/31/69 | (I) Los | sses (from col. (h)) | |
| | (i) F.M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (i) over col. (j), if any | | of col. (h) gain over not less than "-0-") | col. (k), |
| a | | | | | | -1,306. |
| b | | | | | | 600. |
| c | | | | | | -6,018. |
| d | | | | | | 61. |
| | <u> </u> | | | | | 1,946. |
| e f | | | | | | 59,645. |
| | | | | | | 8. |
| <u>9</u> | · | | | | | 34. |
| <u>h</u> | | - | | | | |
| _ | | | | | | <u>-11,860.</u> |
| <u></u> | | - | | | | 18,027. |
| <u>k</u> | | - | | | | 472. |
| <u> </u> | | | | | — | -2,681. |
| <u>m</u> | | | | | | <u>-3,689.</u> |
| n | | | <u> </u> | | | 40,285. |
| 0 | | | | | | 4,460. |
| 2 | Capital gain net income or (net c | apital loss) { If gain, also ent | er in Part I, line 7 -0-" in Part I, line 7 } | | | |
| 3 | Net short-term canital dain or /lo | ess) as defined in sections 1222(5) a | _ I | | | |
| | If gain, also enter in Part I, line 8 If (loss), enter "-0-" in Part I, line | , column (c). | } | | | |

| | (a) List and 2-story br | describe the kind(s) of property sold ick warehouse; or common stock, 20 | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo., day, yr.) | (d) Date sold (mo., day, yr.) | |
|--------------------|--|---|--|-----------------------------------|--|---|
| | FIDELITY GAIN/ | | | P | | _ _ |
| b | Capital Gains 1 | Dividends | | | | |
| С | | | | | | |
| <u>d</u> | | | | | | |
| e | | | | | | |
| f_ | | | | | | |
| g | | | | | | |
| h | | | | | | |
| | | | | | | |
| | | | | | | |
| k | | | | | | |
| <u> </u> | | | | | | |
| m | | | | | | |
| <u>n</u> | | | | | | |
| 0 | | | | | | |
| | (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | (h) (e) p | Gain or (loss) lus (f) minus (g) | |
| a | 25,000. | | 2,500. | | | 22,500. |
| b | 17,352. | | | | | 17,352. |
| c | | | | | | |
| <u>d</u> | | | | | | |
| <u>e</u> | | | | | | |
| <u>f</u> | | | | | | |
| g | | | | | | |
| h | | | | | | |
| 1 | | | | | | · · · · · · · · · · · · · · · · · · · |
| | | | | | | |
| <u>k</u> | | | | | | |
| 1 | | | | | | |
| m | | | | | | |
| n | | | | | | |
| 0 | | | | | | |
| | Complete only for assets shown | ng gain in column (h) and owned by t | | (I) Los | sses (from col. (h)) | 1.00 |
| | (i) F.M.V. as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col. (i) over col. (j), if any | Gains (excess of but n | of col. (h) gain over ot less than "-0-") | col. (k), |
| а | | | | | | 22,500. |
| b | | | | | | 17,352. |
| C | | | - | | | |
| d | | | | | | |
| e | | | | | | |
| f | | | | | | |
| g | | | | | | · |
| h | | | | | | |
| ı | | | | | | |
| $\overline{\perp}$ | | | | | | |
| k | | | | | | |
| $\overline{\perp}$ | | | | | | |
| m | | | | | | |
| n | | | | | | |
| 0 | <u> </u> | | | | | |
| | | r If gain, also enter | in Part I, line 7 | | | 400 000 |
| | Capital gain net income or (net c | (,, | _ 1 | 2 | | 139,836. |
| 3 | Net short-term capital gain or (lo | oss) as defined in sections 1222(5) ar | id (6): | | | |
| | If gain, also enter in Part I, line 8 If (loss), enter "-0-" in Part I, line | , column (c). | ř l | 3 | N/A | |
| | ii (1088), enter -0- in Part I, line | 0 | | <u> </u> | N/ A | - · · - · - · - · - · - · - · · · · · · |

| Freeman Family Foundation | ion |
|---------------------------|-----|
|---------------------------|-----|

| Part XV Supplementary Informati | | | · · · · · · · · · · · · · · · · · · · | |
|---|---|-----------------------|---------------------------------------|--------|
| 3 Grants and Contributions Paid During the | e Year (Continuation) | | | |
| • Recipient | If recipient is an individual, show any relationship to | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | any foundation manager or substantial contributor | recipient | Contribution | |
| INIVERSITY OF CHICAGO | NONE | 501(C)(3) - | DONATION TO GENERAL | |
| 5235 HARPER CT | | PUBLIC | FUND | |
| CHICAGO, IL 60615 | | | | 10,000 |
| | | | | |
| JSO | NONE | 501(C)(3) - | DONATION TO GENERAL | |
| P O BOX 96860 | | PUBLIC | FUND | _ |
| WASHINGTON DC 20077 | | - | | 2: |
| OPERATION WALK CHICAGO | NONE | 501(C)(3) - | DONATION TO GENERAL | |
| 600 N LAKE SHORE DR | | PUBLIC | FUND | |
| CHICAGO, IL 60611 | | | | 500 |
| | | F04 (0) (2) | | |
| HEAL THE BAY | NONE | 501(C)(3) - PUBLIC | DONATION TO GENERAL FUND | |
| 1444 9TH ST SANTA MONICA, CA 90401 | | FORDIC | FOND | 1.00 |
| SANIA MONICA, CA JUNUI | | | | |
| YOUTH POLICY INSTITUTE | NONE | 501(C)(3) - | DONATION TO GENERAL | |
| 6464 SUNSET BLVD | | PUBLIC | FUND | |
| LOS ANGELES, CA 90028 | | | | 25 |
| AJAX FC INC | NONE | 501(C)(3) - | DONATION TO GENERAL | |
| 737 CALLE CORTA | | PUBLIC | FUND | |
| THOUSAND OAKS, CA 91360 | | | | 5,00 |
| AMERICAN FRIENDS OF THE CZECH | NONE | 501(C)(3) - | DONATION TO GENERAL | |
| REPUBLIC | | PUBLIC | FUND | |
| 4410 MASSACHUSETTS AVE WASHINGTON, DC 20016 | | | | 15 |
| | | | | |
| COUNTERPOINT | none | 501(C)(3) - | DONATION TO GENERAL | |
| 116 E LEWIS ST | | PUBLIC | FUND | |
| LIVINGSTON, MT 59047 | | | | 1,00 |
| GRAYWOLF PRESS | NONE | 501(C)(3) - | DONATION TO GENERAL | |
| 250 THIRD AVE | | PUBLIC | FUND | |
| MINNEAPOLIS, MN 55401 | | | | 14,00 |
| THERRON THE ARREST AGGGT TO | NONE | 501(0)(3) | DONATION TO GENERAL | |
| INTERMOUNTAIN OPERA ASSOCIATION | NONE | 501(C)(3) - PUBLIC | FUND | |
| P O BOX 37 BOZEMAN MT 59771 | | T 4222 | | 1,20 |
| Total from continuation sheets | | | | 255.75 |

Freeman Family Foundation

Part XV | Supplementary Information

| 3 Grants and Contributions Paid During th | e Year (Continuation) | | | |
|---|--|-----------------------|---|---------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | 001111111111111111111111111111111111111 | |
| TEWISH UNITED FUND 0 SOUTH WELLS THICAGO, IL 60606 | NONE | 501(C)(3) - PUBLIC | DONATION TO GENERAL FUND | 10,000 |
| | | | | |
| JUINGSTON DEPOT FOUNDATION O BOX 1319 JUINGSTON, MT 59047 | NONE | 501(C)(3) - PUBLIC | DONATION TO GENERAL FUND | 30, |
| | | | | |
| IVINGSTON HEALTHCARE FOUNDATION 504 S 13TH IVINGSTON MT 59047 | NONE | 501(C)(3) - PUBLIC | DONATION TO GENERAL FUND | 200,000 |
| , | | | | |
| MIDDLEBURY COLLEGE | NONE | 501(C)(3) - PUBLIC | DONATION TO GENERAL FUND | 100 |
| HDDHEBOKI, VI 03733 | - | | | |
| MONTANA CHAMBER MUSIC SOCIETY P O BOX 1506 BOZEMAN, MT 59771 | NONE | 501(C)(3) - PUBLIC | DONATION TO GENERAL FUND | 2,500 |
| | | | | |
| MONTANA LAND RELIANCE 848 MAIN ST BILLINGS, MT 59103 | NONE | 501(C)(3) - PUBLIC | DONATION TO GENERAL FUND | 5,000 |
| | | | | |
| NEW VILLAGE GIRLS ACADEMY 147 N OCCIDENTAL | NONE | 501(C)(3) - PUBLIC | DONATION TO GENERAL FUND | |
| LOS ANGELES, CA 90026 | | - | | 5,000 |
| | | | | |
| | | | | |
| | | | | = |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | 1 | I | 1 | |

| Form 990-PF Intere | st on Savir | ngs and Temp | orary | Cash In | vestments | Statement 1 |
|---|--|-------------------------------|--|--|---|-------------------------------|
| Source | | (a) Reven Per Bo | ue | | (b) vestment come | (c) Adjusted Net Income |
| ACCRUED INTEREST PA BOND PREMIUM FIDELITY 025801 FIDELITY 025801 U S FIDELITY 901571 FIDELITY 901580 | | -2 12 | ,194. ,118. ,854. ,456. 4. | | -1,194. -2,118. 12,854. 2,456. 4. | |
| Total to Part I, li | ne 3 | 12 | ,003. | | 12,003. | |
| Form 990-PF | Dividends | s and Intere | st fro | om Secur | rities | Statement 2 |
| Source | Gross Amount | Capital Gains Dividends | | (a) evenue r Books | (b) Net Inves ment Inco | _ |
| FIDELITY 025801 FIDELITY 277726 FIDELITY 277727 FIDELITY 277728 FIDELITY 901571 FIDELITY 901580 | 6,106 19,633 2,499 3,782 233 14,308 | . 0 . 0 . 23 . 6,426 | • | 6,106. 19,633. 2,499. 3,759. -6,193. 3,405. | 19,63 2,49 3,75 -6,19 | 3. 9. 9. 3. |
| To Part I, line 4 | 46,561 | . 17,352 | | 29,209. | 29,20 | 9. |
| Form 990-PF | | Accountin | ıg Fee | s | | Statement 3 |
| Description | | - | Net I | b) nvest- Income | (c) Adjusted Net Incom | |
| ACCOUNTING FEES | | 2,750. | | 2,750. | | 0. |
| To Form 990-PF, Pg | 1, ln 16b | 2,750. | | 2,750. | | 0. |
| | | | | | | |

| Form 990-PF | Tax | Taxes | | | Statement | | |
|----------------------------------|------------------------------|-------------------------|-------------|------------------------------|---------------------|-----|--|
| Description | (a) Expenses Per Books | (b) Net Inves ment Inco | | (c) Adjusted Net Incom | | | |
| FOREIGN TAXES PAID | 794. | 794. | | | | 0. | |
| To Form 990-PF, Pg 1, ln 18 | 794. | 7 | 794. | | | 0. | |
| Form 990-PF | Other E | xpenses | | | Statement | 5 | |
| Description | (a) Expenses Per Books | | | (c) Adjusted Net Incom | | | |
| FILING FEE INVESTMENT EXPENSE | 15. 17,729. | | 15. 729. | | | 0. | |
| To Form 990-PF, Pg 1, ln 23 | 17,744. | 17,7 | 744. | | | | |
| Form 990-PF U.S. and | State/City G | overnment | Ob1 | igations | Statement | 6 | |
| Description | U.S Gov' | | Вос | ok Value | Fair Marke Value | t | |
| U S TREASURY NOTES | X | | 165,296. | | 165,42 | | |
| Total U.S. Government Obliga | tions | - | | 165,296. | 165,4 | 23. | |
| Total State and Municipal Go | vernment Obl | igations | | | | | |
| Total to Form 990-PF, Part I | I, line 10a | _ | | 165,296. | 165,4 | 23. | |

| Form 990-PF Cor | porate Stock | | Statement | 7 |
|-------------------------------------|---------------------|------------|---------------------|-----|
| Description | | Book Value | Fair Marke Value | t |
| CORPORATE STOCK | • | 495,622. | 557,6 | 37. |
| Total to Form 990-PF, Part II, line | 10b | 495,622. | 557,6 | 37. |
| Form 990-PF Cor | porate Bonds | | Statement | 8 |
| Description | | Book Value | Fair Marke Value | t |
| CORPORATE BONDS | | 294,488. | 295,9 | 34. |
| Total to Form 990-PF, Part II, line | e 10c | 294,488. | 295,9 | 34. |
| Form 990-PF Other | er Investments | | Statement | 9 |
| Description | Valuation Method | Book Value | Fair Marke | t |
| MUTUAL FUNDS | COST | 1,018,190. | 992,9 | 29. |
| Total to Form 990-PF, Part II, line | e 13 | 1,018,190. | 992,9 | 29. |

Form 990-PF List of Substantial Contributors Part VII-A, Line 10

Statement 10

Name of Contributor

Address

LEE A. FREEMAN CHARITABLE TRUST

52 LITTLE MISSION CREEK ROAD LIVINGSTON, MT 59047