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Form 990-PF Department of the Treasury Internal Revenue Service

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

OMB No 1545-0052

2016

Open to Public Inspection

For	alen	dar year 2016 or tax year beginning		, and ending		
Nar	ne of	foundation		•	A Employer identification	n number
S	he	ridan County Memorial				
		cational Trust			36-3479962	2
		nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
Р	.0	. Box 1827			701 572-21	113
		iwn, state or province, country, and ZIP or foreign p	ostal code		C if exemption application is a	
		liston, ND 58802-1827				,
		all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organization	s check here
•	TIOUIL	Final return	Amended return	mor positio onanty	b 1. Foreign organization	o, oo.
		Address change	Name change		Foreign organizations m check here and attach c	eeting the 85% test,
<u> </u>	hook	type of organization: X Section 501(c)(3) ex				
Ϊ-	_		Other taxable private founda	tion	E If private foundation sta under section 507(b)(1	
<u> </u>		rket value of all assets at end of year J Accounti		Accrual		
		· —	3 ······· —— ···	Acciuai	F If the foundation is in a	
	om F ∙\$	Part II, col. (c), line 16) 01	her (specify)	nacic I	under section 507(b)(1)(b), check here
		Analysis of Revenue and Expenses		·		(d) Disbursements
Pe	ILLI	' (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes
		necessarily equal the amounts in column (a))	CAPOTISCS POT BOOKS		<u> </u>	(cash basis only)
	ı	Contributions, gifts, grants, etc., received	<u> </u>		N/A	<u> </u>
	-	Check X if the foundation is not required to attach Sch. B Interest on savings and temporary				
	3	cash investments			 	G + - 1 - 1
	4	Dividends and interest from securities	5,911.	5,911.	ļ	Statement 1
	5a	Gross rents			 	
	b	Net rental income or (loss)				
ā	6a	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all	4,342.			<u> </u>
Revenue	b	assets on line 6a 6,640.			 	
ě	7	Capital gain net income (from Part IV, line 2)		4,342.		
ш.	8	Net short-term capital gain	<u> </u>			
	9	Income modifications Gross sales less returns				
	10a	and allowances			ļ. <u> </u>	
	b	Less Cost of goods sold			<u> </u>	
	C	Gross profit or (loss)				<u> </u>
	11	Other income				
	12	Total. Add lines 1 through 11	10,253.	10,253		<u> </u>
	13	Compensation of officers, directors, trustees, etc	2,268.	2,041	,	227.
	14	Other employee salaries and wages				
w		Pension plans, employee benefits			RECEIV	
ses	16a	Legal fees			 	
Expense	b	Accounting fees Stmt 2	1,600.	0	ADD NA	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Ä	C	Other professional fees Stmt 3	825.	0.	9 APR 242	
ĕ	17	Interest				33
<u>ra</u>	18	Taxes Stmt 4	50.	0.	OCOLA	0.
uls,	19	Depreciation and depletion			le .	
Ē	20	Occupancy		·		
: ≚	21	Travel, conferences, and meetings				
and Administrative	22	Printing and publications	43.	0 .		43.
	23	Other expenses				1
IAT 6 5 Operating	24	Total operating and administrative				
ž š	ļ	expenses Add lines 13 through 23	4,786.	2,041		2,695.
A g	25	Contributions, gifts, grants paid	16,000.			16,000.
	26	Total expenses and disbursements.				
		Add lines 24 and 25	20,786.	2,041	,	18,695.
Z	27	Subtract line 26 from line 12				
SCANNED	a	Excess of revenue over expenses and disbursements	<10,533.	>		
$\ddot{\circ}$	b	Net investment income (if negative, enter -0-)		8,212		
ග	c	Adjusted net income (if negative, enter -0-)			N/A	

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-drivear amounts only		Beginning of year	End of year			
Part	Balance Sneets column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value		
1	Cash - non-interest-bearing					
2	Savings and temporary cash investments	82,215.	58,988.	58,988.		
3	Accounts receivable ►					
	Less, allowance for doubtful accounts ▶					
4	Pledges receivable ►					
	Less: allowance for doubtful accounts					
5	Grants receivable					
6	Receivables due from officers, directors, trustees, and other					
	disqualified persons					
7						
'	Less; allowance for doubtful accounts					
ω 8	Inventories for sale or use					
76 I	Prepaid expenses and deferred charges					
Y 10	a Investments - U.S. and state government obligations					
1	b Investments - corporate stock Stmt 5	10,007.	7,722.	164.		
ĺ	a c [50,132.	50,132.	51,653.		
	·	30,132.	30,132.	31,033.		
11	Investments - land buildings, and equipment basis					
	Less accumulated depreciation					
12	* *	07 022	112 016	162 017		
13	Investments - other Stmt 7	97,833.	112,816.	162,917.		
14	Land, buildings, and equipment: basis					
	Less accumulated depreciation	- 10		06.667		
15	,,	12.	8.	26,667.		
16	Total assets (to be completed by all filers - see the	242 422	200 666	222 222		
	instructions Also, see page 1, item I)	240,199.	229,666.	<u>300,389.</u>		
17	Accounts payable and accrued expenses					
18	Grants payable					
ဖ္ထ 19	Deferred revenue					
Liabilities 51	Loans from officers, directors, trustees, and other disqualified persons					
<u>व</u> 21	Mortgages and Other notes payable					
	Other liabilities (describe >)					
23	Total liabilities (add lines 17 through 22)	0.	0.			
	Foundations that follow SFAS 117, check here					
	and complete lines 24 through 26 and lines 30 and 31					
8 24	Unrestricted					
25 26	Temporarily restricted					
E 26	Γ					
Fund	Foundations that do-not follow SFAS 1-17, check here					
교	and complete lines 27 through 31					
৳ 27	-	0.	0.			
Net Assets 30 28 28		0.	0.			
S 29		240,199.	229,666.			
t 20		240,199.	229,666.			
ž 30	I OLAT HEL ASSELS OF TUHO DATABLES	240,1000	225,000.			
31	Total liabilities and net assets/fund balances	240,199.	229,666.	 		
			22370004			
Part	Analysis of Changes in Net Assets or Fund Ba	aiances				
1 Total	al net assets or fund balances at beginning of year - Part II, column (a), line	30				
(mı	ust agree with end-of-year figure reported on prior year's return)		1	240,199.		
	er amount from Part I, line 27a		2	<10,533.>		
_	er increases not included in line 2 (itemize)		3	0.		
	d lines 1, 2, and 3		4	229,666.		
	creases not included in line 2 (itemize)		5	0.		
	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	229,666.		
	The state of the s	1 11 -72-2		Form 990-PF (2016)		

Part IV Capital Gains	and Lo	sses for Tax on In	vestment	Income				_		
		nd(s) of property sold (e.g. or common stock, 200 shs			į P⋅	łow ac - Purcl - Dona	iase) Date a (mo., da	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a Publicly Trade	d Se	curites					P			
b Capital Gains	<u>Divi</u>	dends								
C		··			—					
d					├ —					
<u>e</u>					 _					_
(e) Gross sales price	(1)	Depreciation allowed (or allowable)		t or other basis xpense of sale				(n) Ga (e) plus	ain or (loss) (f) minus (g)
a 4,119.		<u> </u>		2,29	98.					1,821.
b 2,521.			l 			_				2,521.
C										
<u>d</u>										
Complete only for assets showing	0 0310 10	column (h) and owned by	the foundation	on 12/31/60			(1) (Coupe (C	ol (h) goup	minus
Complete only for assets showin		(i) Adjusted basis		cess of col. (I)					ol. (h) gaın ıot less thar	
(i) F.M.V. as of 12/31/69		as of 12/31/69		col. (j), if any	İ				(from col. (
a					\dashv			<u> </u>		1,821.
b										2,521.
C										2,0221
d					$\neg \dashv$					 · · · · · · · · · · · · · · · · · ·
e										
		(If gain, also enter	ın Dart I. lına		7					
2 Capital gain net income or (net ca	pital loss	If gain, also enter If (loss), enter -0-	- in Part I. line	, 7	 	2				4,342.
3 Net short-term capital gain or (los	e) as def									_
If gain, also enter in Part I, line 8,			iu (0).		J					
If (loss), enter -0- in Part I, line 8						3			N/A	
Part V Qualification U	nder S	Section 4940(e) for	Reduced	Tax on Net	t Inv	estm	ent Inco	me		
If section 4940(d)(2) applies, leave the Was the foundation liable for the section of the sectio	tion 4942 ify under	tax on the distributable amsection 4940(e) Do not co	mplete this pa	rt.					_	Yes X No
(a)	each colu		istructions be	iore making any				ſ		(d)
Base periód years Calendar year (or tax year beginni	ng ın)	(b) Adjusted qualifying dis		Net value of n	(c) onchai	rıtable-			Distrib (col. (b) div	(d) jution ratio ided by col. (c))
2015			8,428.				<u>9,873.</u>			.057610
2014			8,008.				<u>7,497.</u>		.	.070461
2013			9,757.				$\frac{3,183}{0.000}$.044580
2012			0,606.				0,923.			.030223
2011		L	2,543.			19	4,724.	-		.064414
2. Total of less 1 solume (d)										.267288
2 Total of line 1, column (d) 2 Average distribution rate for the	Ewassha	as paried duuda the total	on line 2 hij E	or butha numba	r of vo	oro		2		.201200
3 Average distribution ratio for the the foundation has been in existe			on line 2 by 5,	or by the numbe	i oi ye	ais		,		.053458
the foundation has been in existe	iice ii ies:	s tilali o years						3		•033430
4 Enter the net value of noncharitat	ماماسما	ceate for 2016 from Part V	line 5					4		302,608.
4 Lines the net value of nonchantar	ne-use as	ssets for 20 to iroth Falt A,	iiile J					-		302,000.
5 Multiply line 4 by Tine 3								5		16,177.
o maniphy line 4 by fine o										20/21/
6 Enter 1% of net investment incon	ne (1% o	f Part I. line 27b)						6		82.
170 of not in \$00th lone 110011	.5 (100 0	are is mile Er by								<u>~</u>
7 Add lines 5 and 6								7		16,259.
> =										
8 Enter qualifying distributions from	n Part XII	, line 4						8		18,695.
If line 8 is equal to or greater than			1b. and comr	olete that part usu	ng a 1º	% tax i	rate.			
See the Part VI instructions.			_,							
										orm 000-DE (2016

Sheridan County Memorial

	1990-PF (2016) Educational Trust		<u> 36-</u>	34799	62		Page 4
Pa	ert VI Excise Tax Based on Investment Income (Section 494)	0(a), 4940(b), 4940(e), or	4948	- see in	stru	ictio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and en	nter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if nec						
þ	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	► X and enter 1%	1				<u>82.</u>
	of Part I, line 27b						
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	6 of Part I, line 12, col. (b). ノ					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers enter -0-)	2				0.
3	Add lines 1 and 2		3				82.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. O	Others enter -0-)	4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5				<u>82.</u>
6	Credits/Payments:	1 1					
	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	4				
	Exempt foreign organizations - tax withheld at source	6b	-{				
	Tax paid with application for extension of time to file (Form 8868)	6c	_				
	Backup withholding erroneously withheld	6d	_	-			_
	Total credits and payments. Add lines 6a through 6d		7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	iched	8				
	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	>	9				<u>82.</u>
	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		10				
	Enter the amount of line 10 to be. Credited to 2017 estimated tax	Refunded >	11	<u> </u>			
	art VII-A Statements Regarding Activities			- · · · · · · ·		.	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legis	slation or did it participate or interver	e in	-		Yes	
	any political campaign?				1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purpos	•	,		1b		<u>X</u>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities a	and copies of any materials publi	hed or				
	distributed by the foundation in connection with the activities						
	Did the foundation file Form 1120-POL for this year?			-	1c		X
đ	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the						
	(1) On the foundation. > \$ 0. (2) On foundation managers		-				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expendi	iture tax imposed on foundation					
_	managers. ▶ \$	500			_		٠,
2	Has the foundation engaged in any activities that have not previously been reported to the If	K57		-	2		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 in		or	ŀ	_		٠,,
4.0	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change			-	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year if "Yes." has it filed a tox return on Form 900. If for the year?	11.	N1	./2	4a		Δ.
	If "Yes," has it filed a tax return on Form 990-T for this year?		IA	/A	4b		v
Ş	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T			-	5		X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied ei	ther:					
U	 By language in the governing instrument, or 	mier.					
	 By state legislation that effectively amends the governing instrument so that no mandator 	ay directions that conflict with the sta	o lou				
	remain in the governing instrument?	y directions that conflict with the sta	le law		c	v	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," con	mploto Part II, col. (c), and Part V	1/		7	X	
'	The foundation have at least φ5,000 in assets at any time during the year π Tes, Con	ripiete Part II, cor (c), and Part X	V	-		Λ	
R۵	Enter the states to which the foundation reports or with which it is registered (see instructio	nnel 🕨					
Ja	MT		•				
— _к	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	uttorney General (or decignate)					
J	of each state as required by General Instruction G? If "No," attach explanation	morney deneral (or designate)			8ь	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of se	action AQA2(i)(3) or AQA2(i)(5) for co	endar	 	OU	Λ	
,	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," c		onual		9		х
40	7-500 20 10 to take the respective of the control o	ompiete i art AIV		-	3		77

11 All any time during the year, dut the foundation, directly or indecetly, own a controlled entity within the meaning of section 5-12(b)(13)* If Yes, "a thank shedule (see instructions) 12 Did the foundation make a distribution to a done advised fund over which the foundation or a disqualited person had advisory privilege? 13 If Yes, "attach statement (see instructions) 14 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 15 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 16 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 17 The books are in our of the "First National Bank & Trust Company Telephone no > 701 572-9615 18 Carlot 43 Pc 22 Bast 4th Street, will liston, ND 19 Section 4947(d)! In one-zeron distribute through the private and enter the amount of its everyon interest sceneed or accrued during the year 18 All any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 19 Section 4947(d)! The means and the greywerments for FinCR Form 114. If Yes, enter the name of the foreign country. 19 Set on instructions for exceptions and thing requirements for FinCR Form 114. If Yes, enter the name of the foreign country. 19 For VIII-B Statements Regarding Activities for Whitch Form 4720 May Be Required 10 File Form 4720 flary time is checked in the "Yes" column, unless an exception applies. 10 During the year did the foundation (either decetly or indecetly). 11 Fingale prison? 12 File Statements Regarding Activities for Whitch Form 4720 May Be Required 12 File Statements Regarding flow or indecetly in disqualified person? 13 Firminal goods, services, or facilities to (or accept them from) a disqualified person? 14 File Statements Regarding flow or indecetly indecetly indepen		Try otacinons regularing Activities (continued)	т		
section 512(b)(13)? If Yes, attach schedule (see instructions) 10 oil the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? 11 Yes, "attach statement (see instructions) 12				Yes	No
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualited person had advisory privileges? 11 TYss, statch statement (see instructions) 12 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? 14 The books are in our or of ▶ First National Bank & Trust Company Telephone no ▶ 701 572 – 9615 15 Located at ▶ 22 East 4th Street, Williston, ND 16 Section 4947(3) in onexempt charactible trust lineling from 990-47 in level of form 1041 - Check here and enter the amount of lax-exempt interest received or accrued during the year 16 A dary time during calender year 504, 6d the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 16 Section 4947(3) in onexempt character and interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 18 Line instructions for exceptions and integer guaracterists for First Form 114. If Yes, enter the name of the foreign country is set the instructions for exceptions and integer guaracterists. 19 Line the section of the section of the first form 114. If Yes, enter the name of the foreign country is set the instructions for exceptions and exceptions and exception applies. 19 Line the section of the section of the first form 114. If Yes, enter the name of the foreign of the foreign is a proving on the section of the foreign of the foreign is a foreign in the section of the foreign is a foreign in the section of the foreign in the province of the section of the foreign in the section of the foreign is a foreign in the section of the sect	11				
11 Yes, attach statement (see instructions) 12 Id the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A 17 The books are in care of ► First National Bank & Trust Company Telephone no ►701 572–9615 Located at ► 22 East 4th Street, Williston, ND 279-4 ►58801 15 Section 4947(a)(1) none-amplit characteristic flustist fling from 990-Pr. in level of Form 1041-Check here and other the ampunit of lax-exempt in interst received or accrued during the year 16 Alany time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financeal account in a foreign country? See the instructions for exceptiones and filing requirements for FinCEN Form 114. If Yes, enter the name of the form 4720 of any item is checked in the "Yes" column, unless an exception applies. 18 Juning they said did he foundation clear decreted in ordinarcity). (1) Engage in the sale or exchange, or lessing of property with a disqualified person? (2) Brown amongs from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or lacinities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person? (6) Agree to pay money or property to a government official? (Exception Check No: 1 the truncation of government service, it termination of government service, it termination of government service, it termination get a property to a government official? (Exception Check No: 1 the truncation of government service, it termination get and of the exception of a property or property to a government official? (Exception Check No: 1 the truncation of government service, it termination government official? (Exception Check No: 1 the truncation of government service, it termination government official? (Exception	40		11		<u> X</u>
13 Dd the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ➤ N/A 14 The books are in care of ▶ First National Bank & Trust Company Telephone no. ▶ 701 572-9615 Located at ▶ 22 East 4th Street, Williston, ND 27P-4 ▶ 58801 15 Section 4947(q)(1) monexempt charable trusts tilling form 990 Pe'n loud form 1041-Check here and enter the amount of lax-exempt interest recoved or accrued during the year of the form 1041-Check here and enter the amount of lax-exempt interest recoved or accrued during the year of the form 1041-Check here and enter the amount of lax-exempt interest recoved or accrued during the year of the form 1041-Check here and enter the amount of lax-exempt interest recoved or accrued during the year of the form 1041-Check here and enter the amount of lax-exempt interest recoved or accrued during the year of the form 1041-Check here and enter the amount of lax-exemptions and interpretation or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the matructoris for exceptions and limit requirements for FinCEN Form 114, If Yes, enter the name of the foreign country ➤ Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 frany term is checked in the "Yes" column, unless an exception applies. 1a During the year of the foundation (either directly or indirectly). 1b During the year of the foundation (either directly or indirectly). 1c Diagon in the sale or exchange, or leasing of property with a disqualified person? 2 yes X No 4 Pay companisation to, or pay or rembituse the expenses of, a dequalified person? 2 yes X No 4 Pay companisation to, or pay or rembituse the expenses of, a dequalified person? 3 Furnish poods, services, or facilities to (or accept them from) a disqualified person? 4 Pay companisation to, or pay or rembituse the expenses of, a dequalified person? 5 Pay companisation to, or pay or rembituse the expen	12				v
Website address ▶ N/A The books are in care of ▶ First National Bank & Trust Company Telephone no. ▶ 701 572-9615 Located at ▶ 22 Bast 4th Street, Williston, ND SP+4 ▶ 58801 15 Section 4947(a)(1) nonexempl charable furst siting form 990+Fin lieu of Form 1041-Check here and enter the amount of tax-exempl interest received or accrued during the year 16 Al any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country. 16 In any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country. 17 Part VII-B Statements Regarding Activities for Which Form 114. If Yes, enter the name of the foreign country. 18 Darry the year did the loundation (either directly or indirectly). 19 Darry the year did the loundation (either directly or indirectly). 10 Engage in the sale or exchange, or lessing of property with a disqualified person? 20 Serrow money from, lend money to, or otherwise extend crediat to (or accept the from) a disqualified person? 21 Degree of the sale of	10			v	
14. The books are in care of ▶ First National Bank & Trust Company Telephone no. ▶ 701 572-9615 Located at ▶ 22 East 4th Street, Williston, ND 15. Section 4947(a)(1) nonexempt charable trusts timp form 990-Pr in les of Form 1041-Check here and enter the amount of tax-exempt interest received or accurate during the year 16. At any time during cleandary area? 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and fixing requirements for FiniCRI Form 114. It Yes, enter the name of the foreign country. Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required Filie Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 18. During the year off the foundation (either directly or indirectly). 19. Earn Will-B Statements Regarding Activities for Which Form 4720 May Be Required Filie Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 19. Earn Will-B Statements Regarding Activities for Which Form 4720 May Be Required Filie Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 19. Earn Will-B Statements Regarding Activities for which Form 4720 May Be Required Filie Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 19. Earn Will-B Statements Regarding Activities for Which Form 4720 May Be Required Filie Form 4720 if any item is checked in the "Yes" Column, unless an exception applies. 19. Earn Will-B Statements Regarding Activities for which Form 4720 May Be Required Filie Form 4720 if any item is checked in the "Yes" No Yes X	13		[13		
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(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 any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016? 2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)): a At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? If "Yes," list the years b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions) b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions) b If "Yes," list the year as the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions) b If "Yes," did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any					
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Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No	_		<u>2b</u>		
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b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that	4a				Х
	_	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	<u>4</u> b		X
Form 990-PF (201			rm 99	0-PF	

Sheridan County Memorial	-			
Form 990-PF (2016) Educational Trust Part VII-B Statements Regarding Activities for Which	Form 4700 May Po		<u>36-34799</u>	62 Page 6
	Form 4/20 May be i	required (continu	ued)	
5a During the year did the foundation pay or incur any amount to:	10.151.330	<u> </u>	(Tel.,)	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	* **		s X No	
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire		□	1 1
any voter registration drive?	_	_	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		LX. Ye	s L No	1 1
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section			
4945(d)(4)(A)? (see instructions)		Ye	s X No	- } - }
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or t			1 1
the prevention of cruelty to children or animals?		Ye	s X No	1 (
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described	ın Regulations	İ	
section 53.4945 or in a current notice regarding disaster assistance (see instri	uctions)?			5b X
Organizations relying on a current notice regarding disaster assistance check in	here			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption is	from the tax because it mainta	ined		
expenditure responsibility for the grant?	N	I/A 🔲 Ye	s No	1 1
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				1 1
a personal benefit contract?	. , ,	☐ Ye	s X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?		i	6b X
If "Yes" to 6b, file Form 8870			<u></u>	
7a At any time during the tax year, was the foundation a party to a prohibited tax	shelter transaction?	□ v _o	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attrib			- .	7b
Part VIII Information About Officers, Directors, Trust		nagers Highly		
Paid Employees, and Contractors	iooo, i ounaution me		,	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
First National Bank & Trust Company	Trustee	Citter-0 j	сопрепавани	unowanoco
P.O. Box 1827	Truscee			
Williston, ND 58802-1827	1.00	2,268.	0.	0.
Weldon Richardson	Trustee	2,200.		
P.O. Box 1827	Trustee			ļ
Williston, ND 58802-1827	0.01	0	_	
	0.01	0.	0.	0.
Lisa Tryan	Trustee			
P.O. Box 1827	0.01			
Williston, ND 58802-1827	0.01	0.	0.	0.
Tim Richardson	Trustee			
P.O. Box 1827				
Williston, ND 58802-1827	0.01	0.	0.	0.
2 Compensation of five highest-paid employees (other than those in	(b) Title, and average	enter "NONE."	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	account, other
	devoted to position		compensation	allowances
NONE				
	_			
		<u> </u>		
			_	
	1			i

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

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Part VIII Info	ormation About Officers, Directors, Trustees, Found id Employees, and Contractors (continued)		
	id independent contractors for professional services. If none, ent	er "NONE."	
(;	a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	·	_	
	· · · · · · · · · · · · · · · · · · ·		
	rs receiving over \$50,000 for professional services mmary of Direct Charitable Activities		0
	four largest direct charitable activities during the tax year. Include relevant statens and other beneficiaries served, conferences convened, research papers pr		Expenses
1 N/A			
?			
3			
4			
Part IX-B Sur	nmary of Program-Related Investments		
Describe the two larg	est program-related investments made by the foundation during the tax year of	on lines 1 and 2	Amount
1 <u>N/A</u>			
All other program-rel	ated investments. See instructions.		
3			
Total. Add lines 1 th	nrough 3		0.
			Form 990-PF (2016)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1 _a	69,464.
b	Average of monthly cash balances	1b	211,085.
C	Fair market value of all other assets	1c	26,667.
d	Total (add lines 1a, b, and c)	1d	307,216.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 .		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	307,216.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,608.
5	Net value of noncharitable-use assets Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	302,608.
6	Minimum investment return Enter 5% of line 5	6	15,130.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	15,130.
2a	Tax on investment income for 2016 from Part VI, line 5		
b	Income tax for 2016. (This does not include the tax from Part VI.)	1	
C	Add lines 2a and 2b	2c	82.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	15,048.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	15,048.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	15,048.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	18,695.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	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	18,695.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	82.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	18,613.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies for	the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI,				
line 7				15,048.
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2016:				
a From 2011				
b From 2012				
c From 2013				
d From 2014 634.				
e From 2015 2,534.				
f Total of lines 3a through e	3,168.			
4 Qualifying distributions for 2016 from	1			
Part XII, line 4: ► \$ 18,695.				
a Applied to 2015, but not more than line 2a			0.	
b Applied to undistributed income of prior		· ·		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2016 distributable amount				15,048.
e Remaining amount distributed out of corpus	3,647.			
5 Excess distributions carryover applied to 2016	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below.				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	6,815.			
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 2015. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2016. Subtract			•	
lines 4d and 5 from line 1. This amount must				
be distributed in 2017				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 2011				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2017				
Subtract lines 7 and 8 from line 6a	6,815.			
10 Analysis of line 9:	7,013.			
a Excess from 2012				
b Excess from 2013				
c Excess from 2014 634.				
d Excess from 2015 2,534.				
e Excess from 2016 3, 647.				
□ = 1,04/•			<u> </u>	

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Form **990-PF** (2016)

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Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Purpose of grant or contribution show any relationship to Foundation **Amount** any foundation manager or substantial contributor status of Name and address (home or business) recipient a Paid during the year Blake Brenteson None N/A Scholarship 410 W Highland Plentywood, MT 59254 750. Elizabeth Gomez None N/A Scholarship 103 Dena Street Plentywood, MT 59254 750. Alyssa Hart None N/A Scholarship 2797 MT Highway 5 W Plentywood MT 59254 750. Taylor Hilyard None N/A Scholarship 3675 MT Highway 5 W Plentywood, MT 59254 750. Nicole Kirby N/A None Scholarshıp 1088 Reserve Hwy E Dagmar MT 59219 750. See continuation sheet(s) ► <u>3a</u> Total 16,000. b Approved for future payment None Total

			_
	_		

ter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	Exclu- sion code	(d) Amount	Related or exemp function income
Program service revenue:	code		Code		10110110111111001110
	_				
·	_				
	_				
·	_				
Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash					
nvestments					
Dividends and interest from securities			14	5,911.	
let rental income or (loss) from real estate:					
Debt-financed property					
Not debt-financed property					
let rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other			<u> </u>		
han inventory			18	4,342.	
Net income or (loss) from special events			10	<u> </u>	
Gross profit or (loss) from sales of inventory				<u>-</u>	
Other revenue:					
a					
b					
			1 1		
c		···	1 — 1		
d	1 1				
cde	1 1			10.052	
c d e Subtotal. Add columns (b), (d), and (e)	1 1	0.		10,253.	
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e)		0.		10,253.	
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculations THE XVI-B Relationship of Activitie Explain below how each activity for which in	es to the Accon	nplishment of Excolumn (e) of Part XVI-A	(empt	13 t Purposes	10,2
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculations THE XVI-B Relationship of Activitie	es to the Accon	nplishment of Excolumn (e) of Part XVI-A	(empt	13 t Purposes	10,2
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations TOTAL ADD Relationship of Activitie E No Explain below how each activity for which i	es to the Accon	nplishment of Excolumn (e) of Part XVI-A	(empt	13 t Purposes	10,2
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculations THE TOTAL RELATIONSHIP OF ACTIVITIES END Explain below how each activity for which in	es to the Accon	nplishment of Excolumn (e) of Part XVI-A	(empt	13 t Purposes	10,2
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculations THE TOTAL RELATIONSHIP OF ACTIVITIES END Explain below how each activity for which in	es to the Accon	nplishment of Excolumn (e) of Part XVI-A	(empt	13 t Purposes	10,2
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations TOTAL ADD Relationship of Activitie E No Explain below how each activity for which i	es to the Accon	nplishment of Excolumn (e) of Part XVI-A	(empt	13 t Purposes	10,2
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculations THE TOTAL RELATIONSHIP OF ACTIVITIES END Explain below how each activity for which in	es to the Accon	nplishment of Excolumn (e) of Part XVI-A	(empt	13 t Purposes	10,2
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations TOTAL ADD Relationship of Activitie E No Explain below how each activity for which i	es to the Accon	nplishment of Excolumn (e) of Part XVI-A	(empt	13 t Purposes	10,2
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculations THE XVI-B Relationship of Activitie Explain below how each activity for which in	es to the Accon	nplishment of Excolumn (e) of Part XVI-A	(empt	13 t Purposes	10,2
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations TOTAL ADD Relationship of Activitie E No Explain below how each activity for which i	es to the Accon	nplishment of Excolumn (e) of Part XVI-A	(empt	13 t Purposes	10,2
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Worksheet in line 13 instructions to verify calculations THE XVI-B Relationship of Activitie Explain below how each activity for which in	es to the Accon	nplishment of Excolumn (e) of Part XVI-A	(empt	13 t Purposes	10,2
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations TOTAL ADD Relationship of Activitie E No Explain below how each activity for which i	es to the Accon	nplishment of Excolumn (e) of Part XVI-A	(empt	13 t Purposes	10,2
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations TOTAL ADD Relationship of Activitie E No Explain below how each activity for which i	es to the Accon	nplishment of Excolumn (e) of Part XVI-A	(empt	13 t Purposes	10,2
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations Explain below how each activity for which in	es to the Accon	nplishment of Excolumn (e) of Part XVI-A	(empt	13 t Purposes	10,2
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations Belationship of Activitie Explain below how each activity for which in	es to the Accon	nplishment of Excolumn (e) of Part XVI-A	(empt	13 t Purposes	10,2
Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations Total Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations Total Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations Total Add line 12, columns (b), (d), and (e) Explain below how each activity for which in the line in	es to the Accon	nplishment of Excolumn (e) of Part XVI-A	(empt	13 t Purposes	10,2
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations Belationship of Activitie Explain below how each activity for which in	es to the Accon	nplishment of Excolumn (e) of Part XVI-A	(empt	13 t Purposes	10,2
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations Belationship of Activitie Explain below how each activity for which i	es to the Accon	nplishment of Excolumn (e) of Part XVI-A	(empt	13 t Purposes	10,2
Subtotal. Add columns (b), (d), and (e) Fotal Add line 12, columns (b), (d), and (e) E worksheet in line 13 instructions to verify calculations Explain below how each activity for which in	es to the Accon	nplishment of Excolumn (e) of Part XVI-A	(empt	13 t Purposes	10,2

Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes No the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) (2) Other assets 1a(2) b Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (b) Amount involved (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described Yes X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? **b** If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge Sign return with the prepare n below (see instr)? Here Trustee X Yes Signature of officer or trustee Date Title Check PTIN Print/Type preparer's name Preparer's signature Date self- employed Paid Melissa White Melissa White 04/11/17 P00851284 Preparer Firm's name ► EIDE BAILLY LLP Firm's EIN \triangleright 45-0250958 Use Only Firm's address ▶ PO BOX 1387

Phone no. 701-577-2157

WILLISTON, ND 58802-1387

Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount status of contribution any foundation manager or substantial contributor Name and address (home or business) recipient Desiree Mosbrucker None N/A Scholarship 204 Horseshoe Drive Plentywood MT 59254 750. Victoria Obergfell None N/A Scholarship 346 N. Main Plentywood MT 59254 750. Hannah Stockdill None N/A Scholarship 509 W. Laurel Ave. Plentywood, MT 59254 750. Jesse Black None N/A Scholarship 204 2nd Ave. S. Antelope, MT 59211 500. Cassidy Bummer None N/A Scholarship 4099 Road 2030 Reserve MT 59258 500. Andrew Eberling None N/A Scholarship 106 Dena Street Plentywood, MT 59254 500. Kyle Fawcett None N/A Scholarship 24 Nichols Road Plentywood, MT 59254 500. Scholarship Paige Harris None N/A 612 E. Polly Ave Plentywood, MT 59254 500. Risa Hedges NOne N/A Scholarship 103 E. Antelope Antelope MT 59211 500. Chantz Hove N/A None Scholarship 121 2nd Ave S Medicine Lake MT 59247 500. Total from continuation sheets 12,250.

Part XV Supplementary Inform				,
3 Grants and Contributions Paid During		 	1	
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		
Clara Jensen	None	N/A	Scholarship	,
218 Chestnut St				
Plentywood, MT 59254				500
Roby Nyby	None	N/A	Scholarship	
241 Dodge St				
Plentywood, MT 59254				500
Cooper Olson	None	N/A	Scholarship	
320 E Comertown Rd				
Westby, MT 59275				500
Jon Shoal	None	N/A	Scholarship	
783 James Dr				
Plentywood, MT 59254				500
Dakota Simonson	None	N/A	Scholarship	
308 Poplar Street				
Plentywood MT 59254				500
Mollie Simonson	None	N/A	Scholarship	
3 Hwy. 5 E		,,,,		
Plentywood, MT 59254				500
Baıley Solberg	None	N/A	Scholarship	
192 Lone Tree Rd.	None	[,,,,		
Westby, MT 59275				500
Caitlan D. Stadstad	None	N/A	Scholarship	
414 Poplar St				
Plentywood, MT 59254				500
Cara Stadstad	None	N/A	Scholarship	
414 Poplar St	none .		3	
Plentywood, MT 59254				500
Logan Tangedal	None	N/A	Scholarship	
774 James Dr		[""	,	
Plentywood, MT 59254				500
Total from continuation sheets				

Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient N/A Scholarship Makayla Westgard None 1048 N Westby Rd Westby, MT 59275 500. Makenzie Westgard None N/A Scholarship 1048 N Westby Rd 500. Westby, MT 59275 N/A Scholarship Jonathan Heppner None 968 Marron Creek Rd 500. Plentywood, MT 59254 Total from continuation sheets

Form 990-PF	Dividend	s and Inter	est from Secu	rities St	Statement 1	
Source	Gross Amount	Capital Gains Dividend	Revenue	(b) Net Invest- ment Income	(c) Adjusted Net Income	
Dividend income Interest Income	3,405 270		0. 3,405 0. 270			
Long-term Capital Gain Distributions Municipal Interest Short-term Capital	2,521 2,063		1. 0 0. 2,063			
Gain Distributions	173	•	0. 173	. 173.		
To Part I, line 4	8,432	. 2,52	1. 5,911	5,911.		
Description		(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Accounting	_	1,600.	0.		1,600.	
To Form 990-PF, Pg 1,	ln 16b	1,600.	0.		1,600.	
Form 990-PF	0	ther Profes	sional Fees	S	tatement 3	
Description		(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Mineral Appraisal Fee	 :s	825.	0.		825	
To Form 990-PF, Pg 1, ln 16c		825.	0.		825.	

To Form 990-PF, Pg 1, ln 18 50. 0.	Form 990-PF	Taxes			Statement 4		
The come	Description	Expenses	Net Inve		Adjusted	d Charita	
Form 990-PF Corporate Stock Statement Description Book Value Value GM Corp Preferred Stock 7,722. 16 Total to Form 990-PF, Part II, line 10b 7,722. 16 Form 990-PF Corporate Bonds Statement Description Book Value Wells Fargo Co MTN BE MTNF 50,132. 51,65 Total to Form 990-PF, Part II, line 10c 50,132. 51,65 Form 990-PF Other Investments Statement Description Valuation Method Book Value MFS Govt Securities Fund A COST 5,895. 39,35 Harbor Capital Appreciation Fund COST 16,421. 16,666 Vanguard Growth and Income COST 25,000. 29,02 Vanguard Growth and Income COST 28,500. 41,90 Vanguard Growth and Income COST 28,500. 41,90 Vanguard High-Yeld Corp Fund COST 25,000. 24,33 Mairs & PWR Funds TR COM COST 25,000. 3,38		50.		0.			0.
Description Book Value Fair Market Value GM Corp Preferred Stock Total to Form 990-PF, Part II, line 10b Total to Form 990-PF Corporate Bonds Statement Description Book Value Fair Market Value Fair Market Value Fair Market Value Form 990-PF Total to Form 990-PF, Part II, line 10c Total to Form 990-PF, Part II, line 10c Form 990-PF Other Investments Statement Valuation Method Description Method Description Method Description Method Description Method Description Method Description Method Description Method Description Method Description Method Description Method Description Method Description Method Description Method Description Method Description Method Description Method Description Method Description Method Description Description Method Description Method Description Description Method Description Description Description Description Nethod Description Description Description Description Nethod Description Descript	To Form 990-PF, Pg 1, ln 18 =	50.		0.			0.
Description GM Corp Preferred Stock Total to Form 990-PF, Part II, line 10b Total to Form 990-PF Corporate Bonds Evalue Form 990-PF Corporate Bonds Total to Form 990-PF Corporate Bonds Evalue Fair Market Value Wells Fargo Co MTN BE MTNF Total to Form 990-PF, Part II, line 10c Form 990-PF Other Investments Evaluation Method Description Waluation Method Description Method Method Evalue MFS Govt Securities Fund A COST Evalue MFS Govt Securities Fund A COST Evaluation Method Evalue MFS Govt Securities Fund A COST Evaluation Method Evalue MFS Govt Securities Fund A COST Evaluation Method Evalue MFS Govt Securities Fund A COST Evaluation Method Evalue MFS Govt Securities Fund A COST Evaluation Method Evalue Evaluation Method Evalue Fair Market Evalue Value MFS Govt Securities Fund A COST Evaluation Evaluation Method Evaluation	Form 990-PF	Corporat	e Stock			Statement	5
Total to Form 990-PF, Part II, line 10b Form 990-PF Corporate Bonds Statement Book Value Fair Market Value Wells Fargo Co MTN BE MTNF Total to Form 990-PF, Part II, line 10c Form 990-PF Other Investments Valuation Method Method	Description			Вос	ok Value		t
Form 990-PF Corporate Bonds Statement Description Book Value Value Wells Fargo Co MTN BE MTNF 50,132. 51,65 Total to Form 990-PF, Part II, line 10c 50,132. 51,65 Form 990-PF Other Investments Statement Valuation Method Book Value Value MFS Govt Securities Fund A COST 5,895. 39,35 Harbor Capital Appreciation Fund COST 16,421. 16,66 Vanguard Growth and Income COST 25,000. 29,02 Vanguard S00 Index Fund COST 28,500. 41,90 Vanguard High-Yield Corp Fund COST 25,000. 8,25 TCW Galileo Total Return COST 25,000. 24,33 Mairs & PWR Funds TR COM COST 3,500. 3,38	GM Corp Preferred Stock		•		7,722.	1	64.
Description Wells Fargo Co MTN BE MTNF Total to Form 990-PF, Part II, line 10c So,132. Total to Form 990-PF Other Investments Valuation Method Method	Total to Form 990-PF, Part II, line 10b				7,722.	164.	
Description Wells Fargo Co MTN BE MTNF Total to Form 990-PF, Part II, line 10c So,132. Statement Valuation Method Method	Form 990-PF	Corporat	e Bonds			Statement	<u> </u>
Total to Form 990-PF, Part II, line 10c 50,132. 51,65 Form 990-PF Other Investments Statement Valuation Method Book Value Value MFS Govt Securities Fund A COST 5,895. 39,35 Harbor Capital Appreciation Fund COST 16,421. 16,66 Vanguard Growth and Income COST 25,000. 29,02 Vanguard 500 Index Fund COST 28,500. 41,90 Vanguard High-Yield Corp Fund COST 8,500. 8,25 TCW Galileo Total Return COST 25,000. 24,33 Mairs & PWR Funds TR COM COST 3,500. 3,38	Description			Вос	ok Value		t
Form 990-PF Other Investments Statement Valuation Method Book Value MFS Govt Securities Fund A COST 5,895. 39,35 Harbor Capital Appreciation Fund COST 16,421. 16,66 Vanguard Growth and Income COST 25,000. 29,02 Vanguard 500 Index Fund COST 28,500. 41,90 Vanguard High-Yield Corp Fund COST 8,500. 8,25 TCW Galileo Total Return COST 25,000. 24,33 Mairs & PWR Funds TR COM COST 3,500. 3,38	Wells Fargo Co MTN BE MTNF				50,132.	51,6	53.
Valuation Method Book Value Value MFS Govt Securities Fund A COST 5,895. 39,35 Harbor Capital Appreciation Fund COST 16,421. 16,66 Vanguard Growth and Income COST 25,000. 29,02 Vanguard 500 Index Fund COST 28,500. 41,90 Vanguard High-Yield Corp Fund COST 8,500. 8,25 TCW Galileo Total Return COST 25,000. 24,33 Mairs & PWR Funds TR COM COST 3,500. 3,38	Total to Form 990-PF, Part II, line 10c				50,132.	51,6	53.
Description Method Book Value Value MFS Govt Securities Fund A COST 5,895. 39,35 Harbor Capital Appreciation Fund COST 16,421. 16,66 Vanguard Growth and Income COST 25,000. 29,02 Vanguard 500 Index Fund COST 28,500. 41,90 Vanguard High-Yield Corp Fund COST 8,500. 8,25 TCW Galileo Total Return COST 25,000. 24,33 Mairs & PWR Funds TR COM COST 3,500. 3,38	Form 990-PF	Other Inv	estments	·		Statement	7
Harbor Capital Appreciation Fund COST 16,421. 16,66 Vanguard Growth and Income COST 25,000. 29,02 Vanguard 500 Index Fund COST 28,500. 41,90 Vanguard High-Yield Corp Fund COST 8,500. 8,25 TCW Galileo Total Return COST 25,000. 24,33 Mairs & PWR Funds TR COM COST 3,500. 3,38	Description			Вос	ok Value		t
Vanguard 500 Index FundCOST28,500.41,90Vanguard High-Yield Corp FundCOST8,500.8,25TCW Galileo Total ReturnCOST25,000.24,33Mairs & PWR Funds TR COMCOST3,500.3,38	Harbor Capital Appreciation H	Fund	COST		16,421.	16,6	65.
Total to Form 990-DF Part II line 13 112 816 162 91	Vanguard 500 Index Fund Vanguard High-Yield Corp Fund TCW Galileo Total Return	i	COST COST COST		28,500. 8,500. 25,000.	41,9 8,2 24,3	04. 50. 35.
TOCAL CO FORM JOV EF, FAIL II, TIME ID TIA, UIO, 102, JI	Total to Form 990-PF, Part II	[, line 13			112,816.	162,9	17.

Form 990-PF	Other Assets	Statement 8	
Description	Beginning of Yr Book Value	End of Year Book Value	Fair Market Value
Oil and Mineral Interests	12.	8.	26,667.
To Form 990-PF, Part II, line 15	12.	8.	26,667.