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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 instructions is at *www.irs.gov/form990pf*.**

OMB No 1545-0052

2016

Open to Public Inspection

For calendar year 2016, or tax year beginning 01-01-2016 , and ending 12-31-2016

Name of foundation
RAPP FAMILY FOUNDATION INC

A Employer identification number
36-3756870

Number and street (or P O box number if mail is not delivered to street address)
PO BOX 2082

Room/suite

B Telephone number (see instructions)
(406) 370-4477

City or town, state or province, country, and ZIP or foreign postal code
HAMILTON, MT 59840

C If exemption application is pending, check here ▶ ☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶ ☐

2. Foreign organizations meeting the 85% test, check here and attach computation ▶ ☐

H Check type of organization ☑ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶ ☐

I Fair market value of all assets at end of year *(from Part II, col (c), line 16)* ▶$ 6,430,748

J Accounting method ☑ Cash ☐ Accrual ☐ Other (specify) _____
(Part I, column (d) must be on cash basis)

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶ ☐

Part I **Analysis of Revenue and Expenses** *(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))*

		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	2,344,800			
	2 Check ▶ ☐ if the foundation is **not** required to attach Sch B				
	3 Interest on savings and temporary cash investments	50	50	50	
	4 Dividends and interest from securities	82,192	82,192	82,192	
	5a Gross rents	85,466	85,466	85,466	
	b Net rental income or (loss) 55,219				
	6a Net gain or (loss) from sale of assets not on line 10	-124,043			
	b Gross sales price for all assets on line 6a 3,934,341				
	7 Capital gain net income (from Part IV, line 2)				
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)	59	59	59	
	12 **Total.** Add lines 1 through 11	2,388,524	167,767	167,767	
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc				
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)				
	b Accounting fees (attach schedule)	9,066	4,533		
	c Other professional fees (attach schedule)	65,598	65,598		
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	12,655	12,635		
	19 Depreciation (attach schedule) and depletion				
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	32,011	31,996		
	24 **Total operating and administrative expenses.** Add lines 13 through 23	119,330	114,762		0
	25 Contributions, gifts, grants paid	225,941			225,941
	26 **Total expenses and disbursements.** Add lines 24 and 25	345,271	114,762		225,941
	27 Subtract line 26 from line 12				
	a **Excess of revenue over expenses and disbursements**	2,043,253			
	b **Net investment income** (if negative, enter -0-)		53,005		
	c **Adjusted net income**(if negative, enter -0-)			167,767	

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing	11,995	38,387	38,387
	2 Savings and temporary cash investments	896,110	215,936	215,936
	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 (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶			
	Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)		2,173,197	2,442,731
	c Investments—corporate bonds (attach schedule)		28,355	27,688
	11 Investments—land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)	3,094,375	3,534,155	3,706,006
	14 Land, buildings, and equipment basis ▶			
	Less accumulated depreciation (attach schedule) ▶			
	15 Other assets (describe ▶)			
	16 **Total assets** (to be completed by all filers—see the instructions Also, see page 1, item I)	4,002,480	5,990,030	6,430,748
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶)			
	23 **Total liabilities**(add lines 17 through 22)		0	
Net Assets or Fund Balances	**Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.**			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ ☑ and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	4,002,480	5,990,030	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
	30 **Total net assets or fund balances** (see instructions)	4,002,480	5,990,030	
	31 **Total liabilities and net assets/fund balances** (see instructions)	4,002,480	5,990,030	

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	4,002,480
2	Enter amount from Part I, line 27a	2	2,043,253
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	6,045,733
5	Decreases not included in line 2 (itemize) ▶	5	55,703
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	5,990,030

Part IV Capital Gains and Losses for Tax on Investment Income

	(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a	See Additional Data Table			
b				
c				
d				
e				

	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a	See Additional Data Table			
b				
c				
d				
e				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) **or** Losses (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	
a	See Additional Data Table			
b				
c				
d				
e				

2	Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 / If (loss), enter -0- in Part I, line 7 }	2	-124,043
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	-124,043

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☑ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	141,158	3,333,044	0 04235
2014	106,613	1,306,940	0 08158
2013	106,517	1,243,191	0 08568
2012	102,402	470,858	0 21748
2011	80,873	1,267,899	0 06379

2	**Total** of line 1, column (d)	2	0 490871
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 098174
4	Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	5,273,582
5	Multiply line 4 by line 3	5	517,729
6	Enter 1% of net investment income (1% of Part I, line 27b)	6	530
7	Add lines 5 and 6	7	518,259
8	Enter qualifying distributions from Part XII, line 4	8	225,941

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

Part VI **Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1. Date of ruling or determination letter _____ **(attach copy of letter if necessary–see instructions)**		
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b	1	1,060
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	
3	Add lines 1 and 2	3	1,060
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	
5	**Tax based on investment income.** Subtract line 4 from line 3 If zero or less, enter -0-	5	1,060
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016 — 6a: 6,577		
b	Exempt foreign organizations—tax withheld at source — 6b:		
c	Tax paid with application for extension of time to file (Form 8868) — 6c:		
d	Backup withholding erroneously withheld — 6d:		
7	Total credits and payments Add lines 6a through 6d	7	6,577
8	Enter any **penalty** for underpayment of estimated tax Check here ☑ if Form 2220 is attached	8	1
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	5,516
11	Enter the amount of line 10 to be **Credited to 2017 estimated tax** ▶ 5,516 **Refunded** ▶	11	

Part VII-A **Statements Regarding Activities**

			Yes	No
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a		No
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?	1b		No
	*If the answer is "Yes" to **1a** or **1b**, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities*			
c	Did the foundation file **Form 1120-POL** for this year?	1c		No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year **(1)** On the foundation ▶ $ _____ **(2)** On foundation managers ▶ $ _____			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ _____			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities*	2		No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*	3		No
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a		No
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b		No
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T*	5		No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6		No
7	Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col (c), and Part XV*	7	Yes	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ MT			
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	Yes	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? *If "Yes," complete Part XIV*	9		No
10	Did any persons become substantial contributors during the tax year? *If "Yes," attach a schedule listing their names and addresses*	10		No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
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		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Yes	

Website address ▶ N/A

14 The books are in care of ▶ JOHN H ORMISTON Telephone no ▶ (406) 360-9530

Located at ▶ 366 BLODGETT CAMP RD HAMILTON MT ZIP+4 ▶ 59840

15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of **Form 1041** —Check here ▶ ☐ and enter the amount of tax-exempt interest received or accrued during the year ▶ 15

16	At 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?		Yes	No
		16		No
	See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 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 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☑ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☑ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☑ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☐ Yes ☑ 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 ☑ 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 termination of government service, if terminating within 90 days). ☐ Yes ☑ 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 section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		No
	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?	1c		No
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? ☐ Yes ☑ No			
	If "Yes," list the years ▶ 20____, 20____, 20____, 20____			
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)	2b		No
c	If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here ▶ 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☑ No			
b	If "Yes," did it have excess business holdings in 2016 as a result of **(1)** any purchase by the foundation or disqualified persons after May 26, 1969, **(2)** the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or **(3)** the lapse of the 10-, 15-, or 20-year first phase holding period? *(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016).*	3b		No
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		No

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a	During the year did the foundation pay or incur any amount to				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes	☑ No		
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes	☑ No		
	(3) Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes	☑ No		
	(4) Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions)	☑ Yes	☐ No		
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes	☑ No		
b	If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)?			5b	No
	Organizations relying on a current notice regarding disaster assistance check here ▶	☐			
c	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?	☑ Yes	☐ No		
	If "Yes," attach the statement required by Regulations section 53 4945–5(d)				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes	☑ No		
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			6b	No
	If "Yes" to 6b, file Form 8870				
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes	☑ No		
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?			7b	No

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than $50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				

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

Part VIII **Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors *(continued)***

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than $50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over $50,000 for professional services. ▶

Part IX-A **Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 SCHOOL COUNSELOR PROGRAM-ASSISTANCE TO UNDERPRIVILEDGED STUDENTS IN 10 DIFFERENT SCHOOLS IN RAVALLI COUNTY	17,611
2	
3	
4	

Part IX-B **Summary of Program-Related Investments** (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions 3	
Total. Add lines 1 through 3 ▶	

Part X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations,see instructions)

1	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		1a	3,892,305
b	Average of monthly cash balances		1b	249,985
c	Fair market value of all other assets (see instructions)		1c	1,211,600
d	**Total** (add lines 1a, b, and c)		1d	5,353,890
e	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	
3	Subtract line 2 from line 1d		3	5,353,890
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)		4	80,308
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4		5	5,273,582
6	**Minimum investment return.** Enter 5% of line 5		6	263,679

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)

1	Minimum investment return from Part X, line 6		1	263,679
2a	Tax on investment income for 2016 from Part VI, line 5	2a 1,060		
b	Income tax for 2016 (This does not include the tax from Part VI)	2b		
c	Add lines 2a and 2b		2c	1,060
3	Distributable amount before adjustments Subtract line 2c from line 1		3	262,619
4	Recoveries of amounts treated as qualifying distributions		4	
5	Add lines 3 and 4		5	262,619
6	Deduction from distributable amount (see instructions)		6	
7	**Distributable amount** as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1		7	262,619

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes			
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26		1a	225,941
b	Program-related investments—total from Part IX-B		1b	
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	225,941
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)		5	
6	**Adjusted qualifying distributions.** Subtract line 5 from line 4		6	225,941

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 4940(e) reduction of tax in those years

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				262,619
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.				
b Total for prior years 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2016				
a From 2011. 17,979				
b From 2012. 79,103				
c From 2013. 46,549				
d From 2014. 44,780				
e From 2015.				
f Total of lines 3a through e.	188,411			
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ $ 225,941				
a Applied to 2015, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2016 distributable amount.				225,941
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2016	36,678			36,678
(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	151,733			
b Prior years' undistributed income Subtract line 4b from line 2b				
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.				
d Subtract line 6c from line 6b Taxable amount —see instructions				
e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions				
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)				
8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . .				
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	151,733			
10 Analysis of line 9				
a Excess from 2012. . . . 60,404				
b Excess from 2013. . . . 46,549				
c Excess from 2014. . . . 44,780				
d Excess from 2015. . . .				
e Excess from 2016. . . .				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. . . . . ▶

b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
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					
3 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 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii). . . .					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization had $5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000) (See section 507(d)(2))

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

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

DIANE RUPPERT
PO BOX 2082
HAMILTON, MT 59840
(406) 544-0302
rappffapp2014@gmail com

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

APPLICANTS MAY APPLY BY FILING OUT AN APPLICATION FORM IT IS RECOMMENDED THAT APPLICANTS PROVIDE EVIDENCE OF IN-KIND CONTRIBUTIONS (VOLUNTEER HOURS AND NON-MONETARY CONTRIBUTIONS) AND MATCHING FUNDS IN THE PROJECT BUDGET ONLY APPLICATIONS FROM TAX-EXEMPT ENTITIES WILL BE ACCEPTED

c Any submission deadlines

2ND FRIDAY MAR JUN SEPT

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

LIMITED TO RAVALLI COUNTY

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year* See Additional Data Table				
Total . . . . . ▶ **3a**				225,941
b *Approved for future payment*				
Total . . . . . ▶ **3b**				

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
1 Program service revenue					
a					
b					
c					
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments. . . .					
3 Interest on savings and temporary cash investments			14	50	
4 Dividends and interest from securities. . . .			14	82,192	
5 Net rental income or (loss) from real estate					
a Debt-financed property.					
b Not debt-financed property.			16	55,204	
6 Net rental income or (loss) from personal property					
7 Other investment income.			1	59	
8 Gain or (loss) from sales of assets other than inventory			18	-124,043	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e). .				13,462	
13 **Total.** Add line 12, columns (b), (d), and (e).				13	13,462

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See instructions)

Part XVII **Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations**

		Yes	No
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501 (c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash	1a(1)		No
(2) Other assets	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization	1b(2)		No
(3) Rental of facilities, equipment, or other assets	1b(3)		No
(4) Reimbursement arrangements	1b(4)		No
(5) Loans or loan guarantees	1b(5)		No
(6) Performance of services or membership or fundraising solicitations	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		No

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

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☑ No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

****** | 2017-08-08 | ******

Signature of officer or trustee | Date | Title

May the IRS discuss this return with the preparer shown below (see instr)? ☑ Yes ☐ No

Paid Preparer Use Only

Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ▶ ☐	PTIN
Jaime Ward CPA				P00441760
Firm's name ▶ Boyle Deveny & Meyer PC				Firm's EIN ▶
Firm's address ▶ 305 South 4th East Suite 200 Missoula, MT 59801				Phone no (406) 721-3555

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, **(a)** 2-story brick warehouse, or common stock, 200 shs MLC Co)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo , day, yr)	**(d)** Date sold (mo , day, yr)
RAYMOND JAMES 6319-PUBLICLY TRADED SECUR			
RAYMOND JAMES 6319-PUBLICLY TRADED SECUR			
RAYMOND JAMES 6992-PUBLICLY TRADED SECUR			
RAYMOND JAMES 6992-PUBLICLY TRADED SECUR			
RAYMOND JAMES 6992-PUBLICLY TRADED SECUR			
RAYMOND JAMES 0845-PUBLICLY TRADED SECUR			
RAYMOND JAMES 0845-PUBLICLY TRADED SECUR			
RAYMOND JAMES 7167-PUBLICLY TRADED SECUR			
RAYMOND JAMES 7167-PUBLICLY TRADED SECUR			
RAYMOND JAMES 3654-PUBLICLY TRADED SECUR			

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
9,378		10,463	-1,085
182,785		183,636	-851
928,163		872,095	56,068
207,160		247,142	-39,982
169			169
1,350,644		1,452,710	-102,066
138,844		145,725	-6,881
125,811		134,210	-8,399
113,228		118,731	-5,503
13,302		14,944	-1,642

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col (i) **(k)** over col (j), if any	
			-1,085
			-851
			56,068
			-39,982
			169
			-102,066
			-6,881
			-8,399
			-5,503
			-1,642

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, **(a)** 2-story brick warehouse, or common stock, 200 shs MLC Co)	**(b)** How acquired P—Purchase D—Donation	**(c)** Date acquired (mo , day, yr)	**(d)** Date sold (mo , day, yr)
RAYMOND JAMES 3654-PUBLICLY TRADED SECUR			
RAYMOND JAMES 7191-PUBLICLY TRADED SECUR			
RAYMOND JAMES 7191-PUBLICLY TRADED SECUR			
RAYMOND JAMES 7186-PUBLICLY TRADED SECUR			
RAYMOND JAMES 7186-PUBLICLY TRADED SECUR			
RAYMOND JAMES 7172-PUBLICLY TRADED SECUR			
RAYMOND JAMES 7172-PUBLICLY TRADED SECUR			
RAYMOND JAMES 5700-PUBLICLY TRADED SECUR			
RAYMOND JAMES 5700-PUBLICLY TRADED SECUR			
LT Capital Gain Distributions			

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed **(f)** (or allowable)	Cost or other basis **(g)** plus expense of sale	Gain or (loss) **(h)** (e) plus (f) minus (g)
64,552		62,270	2,282
131,069		145,150	-14,081
65,166		52,469	12,697
104,515		112,894	-8,379
125,744		123,229	2,515
46,877		51,692	-4,815
162,712		152,747	9,965
83,957		98,953	-14,996
79,775		79,324	451
490			490

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) **or** **(l)** Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis **(j)** as of 12/31/69	Excess of col (i) **(k)** over col (j), if any	
			2,282
			-14,081
			12,697
			-8,379
			2,515
			-4,815
			9,965
			-14,996
			451
			490

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week **(b)** devoted to position	**(c)** Compensation **(If not paid, enter -0-)**	**(d)** Contributions to employee benefit plans and deferred compensation	Expense account, **(e)** other allowances
THOMAS G BRADER PO BOX 2082 HAMILTON, MT 59840	President 4 00	0		
JOHN H ORMISTON PO BOX 2082 HAMILTON, MT 59840	Vice Pres/Treas 13 00	0		
DIANE THOMAS-RUPPERT PO BOX 2082 HAMILTON, MT 59840	Director 4 00	0		
LARRY JOHNSON PO BOX 2082 HAMILTON, MT 59840	Secretary 4 00	0		
JODY PARSONS PO BOX 2082 HAMILTON, MT 59840	Director 4 00	0		

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
BEAR 103 S 9TH ST STE 108 HAMILTON, MT 59840	NONE	PC	CAMP NEEDS, ROPES COURSE, CHRISTMAS GIFT	6,000
BITTERROOT LAND TRUST PO BOX 1806 HAMILTON, MT 59840	NONE	PC	GENERAL SUPPORT	34,775
BITTERROOT RESOURCE CONSERVATION AN 1709 N 1ST ST HAMILTON, MT 59840	NONE	PC	BOXING CLUB, CHRISTMAS GIFT, COMPUTER PROGRAMS	1,100
BITTERROOT WATER FORUM PO BOX 1247 HAMILTON, MT 59840	NONE	PC	GENERAL SUPPORT	500
BITTERROOT CASA 127 WEST MAIN HAMILTON, MT 59840	NONE	PC	GENERAL SUPPORT	1,500
Total 3a . . . . . ▶				225,941

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
BITTERROOT HUMANE SOCIETY PO BOX 57 HAMILTON, MT 59840	NONE	PC	VET SUPPLIES AND SUPPORT	15,000
BITTERROOT KWANIS 610 1ST STE 5 PMB 417 HAMILTON, MT 59840	NONE	NC	CHRISTMAS FOOD BOXES	3,000
BITTERROOT PUBLIC LIBRARY 306 STATE ST HAMILTON, MT 59840	NONE	GOV	FAMILY NIGHT AND GENERAL SUPPORT	3,500
BITTERROOT THERAPEUTIC RIDING 599 POPHAM LANE HAMILTON, MT 59840	NONE	PC	GENERAL SUPPORT	1,250
BITTERROOT VALLEY CHORUS PO BOX 1262 HAMILTON, MT 59840	NONE	PC	CHRISTMAS CONCERT	1,000
Total 3a . . . . . ▶				225,941

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
DARBY SCHOOLS 209 SCHOOL DRIVE DARBY, MT 59829	NONE	GOV	LIBRARY BOOKS, ADV BASED LEARNING TRIPS AND GENERAL SUPPORT	9,897
DARBY BREAD BOX PO BOX 207 HAMILTON, MT 59829	NONE	PC	FOOD AND SUPPORT	1,000
EMMA'S HOUSE PO BOX 2034 HAMILTON, MT 59840	NONE	PC	BUILDING PROJECT AND SUPPORT	4,500
HAMILTON HIGH SCHOOL 327 FAIRGROUNDS RD HAMILTON, MT 59840	NONE	GOV	VARIOUS PROGRAMS AND SUPPORT	8,187
HAMILTON MIDDLE SCHOOL 209 SOUTH 5TH HAMILTON, MT 59840	NONE	GOV	GAGA BALL PIT AND FIELD TRIP ACTIVITIES	5,462
Total 3a . . . . . ▶				225,941

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
HAMILTON PLAYERS INC 100 RICKETTS RD HAMILTON, MT 59840	NONE	PC	SUPPORT	4,500
HAMILTON POLICE DEPT 223 S 2ND ST HAMILTON, MT 59840	NONE	GOV	SUPPORT	500
HAVEN HOUSE PO BOX 1343 HAMILTON, MT 59840	NONE	PC	SUPPORT	1,000
RAVALLI HEAD START 81 KURTZ LN HAMILTON, MT 59840	NONE	PC	LIBRARY BOOKS	764
LINDA MASSA YOUTH HOME 196 PROVIDENCE WAY HAMILTON, MT 59840	NONE	PC	SUPPORT	2,000
Total . . . . . ▶ 3a				225,941

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
LITERACY VOLUNTEERS OF AMERICA 316 NORTH THIRD HAMILTON, MT 59840	NONE	PC	SUPPORT	6,000
LONE ROCK SCHOOL 1112 THREE MILE CRK RD STEVENSVILLE, MT 59870	NONE	GOV	LIBRARY AND SUPPORT	690
NORTH VALLEY PUBLIC LIBRARY 208 MAIN STREET STEVENSVILLE, MT 59870	NONE	PC	BOOKS AND SUPPORT	2,870
RAVALLI COUNCIL ON AGING 310 OLD CORVALLIS RD HAMILTON, MT 59840	NONE	PC	KITCHEN CABINETS	2,000
RAVALLI COUNTY DUI TASK FORCE 215 S 4TH HAMILTON, MT 59840	NONE	GOV	SUPPORT	500
Total . . . . . ▶ 3a				225,941

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
SAPPHIRE LUTHERN HOMES 501 N 10TH HAMILTON, MT 59840	NONE	PC	SHAKESPEARE IN THE PARK AND SUPPORT	1,200
HISTORIC ST MARYS MISSION 401 N 4TH STEVENSVILLE, MT 59870	NONE	PC	SOUND SYSTEM RENTAL	2,965
STEVENSVILLE PLAYHOUSE 319 MAIN ST STEVENSVILLE, MT 59870	NONE	PC	SUPPORT	4,000
TELLER REFUGE INC PO BOX 548 CORVALLIS, MT 59828	NONE	PC	YOUTH CONSERVATION EXPO	3,000
VICTOR VOLUNTEER FIRE DEPT PO BOX 243 VICTOR, MT 59875	NONE	PC	SUPPORT	3,000
Total . . . . . ▶ 3a				225,941

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
BITTERROOT BAROQUE 801 S 3RD HAMILTON, MT 59840	NONE	PC	VINTAGE ORGAN PURCHASE	1,500
CORVALLIS ELEMENTARY SCHOOL 1020 EAST SIDE HWY CORVALLIS, MT 59828	NONE	GOV	LIBRARY BOOKS	500
CORVALLIS HIGH SCHOOL PO BOX 700 CORVALLIS, MT 59828	NONE	GOV	VARIOUS PROGRAMS AND SUPPORT	4,941
CORVALLIS MIDDLE SCHOOL 1045 MAIN ST CORVALLIS, MT 59828	NONE	GOV	SCIENCE OLYMPICS	5,154
DALY SCHOOL 208 DALY AVE HAMILTON, MT 59840	NONE	GOV	LIBRARY BOOKS	788
Total . . . . . ▶ 3a				225,941

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
DARBY PUBLIC LIBRARY 101 S MARSHAL ST DARBY, MT 59829	NONE	PC	COMPUTER SYSTEM AND SUPPORT	2,500
RAVALLI COUNTY MUSEUM 205 BEDFORD HAMILTON, MT 59840	NONE	PC	PRESERVATION CENTER	500
RAVALLI COUNTY RECYCLING PO BOX 1916 HAMILTON, MT 59840	NONE	PC	CARDBOARD BALER AND FORK LIFT	6,000
RAVALLI COUNTY 100 OLD CORVALLIS RD HAMILTON, MT 59840	NONE	GOV	SHEEP PROJECT AND NATURAL FIBERS DIVISION	6,000
SAFE PO BOX 534 HAMILTON, MT 59840	NONE	PC	SUPPORT	1,000
Total 3a . . . . . ▶				225,941

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
SAFE HAVEN LLAMAS 780 OLD CORVALLIS RD CORVALLIS, MT 59828	NONE	PC	SUPPORT	500
WASHINGTON ELEMENTARY SCHOOL 225 N 5TH HAMILTON, MT 59840	NONE	GOV	SUPPORT	911
BIKE WALK MONTANA PO BOX 1731 HAMILTON, MT 59840	NONE	PC	GENERAL SUPPORT	500
BITTERROOT COLLEGE PROGRAM 103 S NINTH HAMILTON, MT 59840	NONE	GOV	PAINT	2,700
BITTERROOT DRAGON BRIGADE 1095 IRON CAP DRIVE STEVENSVILLE, MT 59870	NONE	PC	UNIFORMS	2,665
Total . . . . . ▶ 3a				225,941

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
NATIONAL SKI PATROL SYSTEM INC 4853 FOREST HILL LANE MISSOULA, MT 59804	NONE	PC	RADIO EQUIPMENT	804
CHILD CARE RESOURCES 105 E PINE MISSOULA, MT 59802	NONE	PC	SCHOLARSHIPS	2,000
CORVALLIS UNITED METHODIST CHURCH PO BOX 37 CORVALLIS, MT 59828	NONE	PC	COMMUNITY COOKING CONNECTION	2,500
EVERGREEN KIDS CORNER 201 S EIGHT HAMILTON, MT 59840	NONE	PC	FURNITURE PROJECT	2,950
HAMILTON ROTARY CLUB PO BOX 278 HAMILTON, MT 59840	NONE	PC	BACKPACK PROGRAM	2,500
Total . . . . . ▶ 3a				225,941

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
IRWIN FLORENCE ROSTEN FOUNDATION PO BOX 750 DARBY, MT 59829	NONE	PC	CULTIVATING CONNECTIONS AND GENERAL SUPPORT	2,500
MONTANA NONPROFIT ASSOC 7 WEST 6TH AVE HELENA, MT 59624	NONE	PC	BITTERROOT COLLEGE COMMUNITY SEMINAR	700
MONTANA STATE GRANGE 249 CHADS RD HAMILTON, MT 59840	NONE	PC	KITCHEN REPAIRS	3,000
PANTRY PARTNERS PO BOX 806 STEVENSVILLE, MT 59870	NONE	PC	GENERAL SUPPORT	1,000
RAPTOR VIEW RESEARCH INSTITUTE PO BOX 4323 MISSOULA, MT 59806	NONE	PC	BITTERROOT EAGLE BANDING PROJECT	1,000
Total . . . . . ▶ 3a				225,941

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
RAVALLI COUNTY RESERVE DEPUTIES 205 BEDFORD SUITE G HAMILTON, MT 59840	NONE	GOV	SUPPORT	1,000
SALVATION ARMY - BITTERROOT 126 WEST MAIN HAMILTON, MT 59840	NONE	PC	SUPPORT	500
STEVENSVILLE SCHOOLS 300 PARK STREET STEVENSVILLE, MT 59870	NONE	GOV	LIBRARY BOOKS	500
TUESDAY AT TWELVE PO BOX 1206 HAMILTON, MT 59840	NONE	PC	SUPPORT	500
VALLEY VETERAN'S SERVICE 103 BEDFORD 102 HAMILTON, MT 59840	NONE	PC	COMPUTER EQUIPMENT AND SUPPORT	3,000
Total . . . . . ▶ 3a				225,941

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
VICTOR HERITAGE MUSEUM PO BOX 610 VICTOR, MT 59875	NONE	PC	BUILDING REPAIRS	1,000
VICTOR SCHOOLS 425 FOURTH AVE VICTOR, MT 59875	NONE	GOV	LIBRARY BOOKS AND SUPPORT	2,286
WESTERN MT EQUINE RESCUE PO BOX 1168 CORVALLIS, MT 59828	NONE	PC	SUPPORT	500
VICTOR PARK DISTRICT 1489 MERIDIAN RD VICTOR, MT 59875	NONE	GOV	Restroom	25,000
RAVALLI CTY ECON DEVELOPMENT AUTHOR 274 OLD CORVALLIS RD HAMILTON, MT 59840	NONE	PC	CIRCLE 13 SKATEPARK	2,500
Total . . . . . ▶ 3a				225,941

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a *Paid during the year*				
FLORENCE-CARLTON SCHOOL DISTRICT 5602 OLD US 93 FLORENCE, MT 59833	NONE	GOV	SUPPORT	2,382
Total . . . . . ▶ 3a				225,941

TY 2016 Accounting Fees Schedule

Name: RAPP FAMILY FOUNDATION INC

EIN: 36-3756870

Software ID: 16000303

Software Version: 2016v3.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Accounting and tax preparation	9,066	4,533	0	0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491220007117

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2016 Expenditure Responsibility Statement

Name: RAPP FAMILY FOUNDATION INC
EIN: 36-3756870
Software ID: 16000303
Software Version: 2016v3.0

Grantee's Name	Grantee's Address	Grant Date	Grant Amount	Grant Purpose	Amount Expended By Grantee	Any Diversion By Grantee?	Dates of Reports By Grantee	Date of Verification	Results of Verification
BITTERROOT KWANIS	610 1ST STE 5 PMB 417 HAMILTON, MT 59840	2016-12-09	3,000	CHRISTMAS FOOD BASKETS	3,000	No	12/31/2016	2016-12-31	AMOUNTS WERE SPENT ON CHRISTMAS FOOD BASKETS AS GRANTED

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TY 2016 Investments Corporate Bonds Schedule

Name: RAPP FAMILY FOUNDATION INC

EIN: 36-3756870

Software ID: 16000303

Software Version: 2016v3.0

Name of Bond	End of Year Book Value	End of Year Fair Market Value
Raymond James #7579 - Fixed Income	28,355	27,688

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TY 2016 Investments Corporate Stock Schedule

Name: RAPP FAMILY FOUNDATION INC
EIN: 36-3756870
Software ID: 16000303
Software Version: 2016v3.0

Name of Stock	End of Year Book Value	End of Year Fair Market Value
Raymond James #6992 - Equities	1,761,079	1,999,600
Raymond James #7579 - Equities	412,118	443,131

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TY 2016 Investments - Other Schedule

Name: RAPP FAMILY FOUNDATION INC
EIN: 36-3756870
Software ID: 16000303
Software Version: 2016v3.0

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
Walnut-East, A Limited Partnership	FMV	555,076	632,000
Pacific Shore, LP	FMV	229,509	236,800
Warner Center LP	FMV	110,360	112,000
Tustin First Investment Company	FMV	138,999	159,000
Beach & Warner Associates, LP	FMV	914,123	913,000

TY 2016 Other Decreases Schedule

Name: RAPP FAMILY FOUNDATION INC

EIN: 36-3756870

Software ID: 16000303

Software Version: 2016v3.0

Description	Amount
CAPITAL ACCOUNT ADJUSTMENT ON REAL ESTATE K-1S	55,703

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TY 2016 Other Expenses Schedule

Name: RAPP FAMILY FOUNDATION INC

EIN: 36-3756870

Software ID: 16000303

Software Version: 2016v3.0

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
Misc Admin Expenses	1,129	1,129		
OFFICE	430	430		
POSTAGE	142	142		
Rental Expenses	30,262	30,247		
SAFETY DEPOSIT	48	48		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491220007117

TY 2016 Other Income Schedule

Name: RAPP FAMILY FOUNDATION INC

EIN: 36-3756870

Software ID: 16000303

Software Version: 2016v3.0

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
Other Investment Income	59	59	59

TY 2016 Other Professional Fees Schedule

Name: RAPP FAMILY FOUNDATION INC

EIN: 36-3756870

Software ID: 16000303

Software Version: 2016v3.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
management fees	65,598	65,598	0	0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491220007117

TY 2016 Taxes Schedule

Name: RAPP FAMILY FOUNDATION INC

EIN: 36-3756870

Software ID: 16000303

Software Version: 2016v3.0

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
990 PF Excise Tax	9,854	9,854		
Annual Report	20			
Foreign Tax	2,781	2,781		

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Schedule B (Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990

OMB No 1545-0047

2016

Name of the organization
RAPP FAMILY FOUNDATION INC

Employer identification number
36-3756870

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
Form 990-PF	☑ 501(c)(3) exempt private foundation
	☐ 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

☑ 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 other 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 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization	Employer identification number
RAPP FAMILY FOUNDATION INC	36-3756870

Part I **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	HOWARD B RAPP SURVIVOR TRUST 418 S 2ND HAMILTON, MT 59840	$ 670,900	Person ☑ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
2	MARGARET RAPP MARITAL TRUST 418 S 2ND HAMILTON, MT 59840	$ 880,900	Person ☑ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
3	HOWARD B RAPP SURVIVOR TRUST 418 S 2ND HAMILTON, MT 59840	$ 711,500	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
4	MARGARET RAPP MARITAL TRUST 418 S 2ND HAMILTON, MT 59840	$ 79,500	Person ☐ Payroll ☐ Noncash ☑ (Complete Part II for noncash contributions)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
-		$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)

Name of organization	Employer identification number
RAPP FAMILY FOUNDATION INC	36-3756870

Part II Noncash Property

(see instructions) Use duplicate copies of Part 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	Investment in Real Estate Partnerships - Beach and Warner, Warner Center and Pacific Shore	$ 630 900	2016-09-01
2	Investment in Real Estate Partnerships - Beach and Warner, Warner Center and Pacific Shore	$ 630 900	2016-09-01
3	Investment in Real Estate Partnerships - Tustin First and Walnut East	$ 711 500	2016-01-01
4	Investment in Real Estate Partnerships - Tustin First	$ 79 500	2016-01-01
		$	
		$	

Name of organization
RAPP FAMILY FOUNDATION INC

Employer identification number
36-3756870

Part III *Exclusively* religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. Complete columns **(a)** through **(e) and** the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **$1,000 or less** for the year. (Enter this information once. See instructions.) ▶ $ ____________

Use duplicate copies of Part III if additional space is needed

(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 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 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 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 transferee