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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.lrs.gov/form990pf.

	For c	alend	lar year 2016 or tax year beginning		_	, and ending		
	Nam	e of	foundation		_		A Employer identifica	tion number
	DI	ุรบ	ALLISON CEDERBERG FOUN	DATI	ON		81-04776	22
	Num	ber an	d street (or PO box number if mail is not delivered to street	t address)		Room/suite	B Telephone number	
	_62	20	HIGHLAND PARK DR				406-245-	5136
	City	or to	wn, state or province, country, and ZIP or foreign p	oostal cod	e		C If exemption application	is pending, check here
	_B	ĽIJ	LINGS, MT 59102					
	G C	heck	all that apply: Initial return		Initial return of a for	mer public charity	D 1. Foreign organizati	ons, check here $ ightharpoonup$
			Final return		Amended return		2 Caraign arganizations	marking the OSO(test
			Address change		Name change		2. Foreign organizations check here and attack	h computation
	H_C	-	type of organization: X Section 501(c)(3) ex				E If private foundation	status was terminated
	<u> </u>				able private foundat		under section 507(b)(1)(A), check here
			rket value of all assets at end of year J Account			Accrual		a 60-month termination
	•			ther (spec			under section 507(b)(1)(B), check here ►
	De		288,952. (Part I, colu	$\overline{}$		· · · · · · · · · · · · · · · · · · ·		/d) p
	Ра	rt I	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))		Revenue and enses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
		1	Contributions, gifts, grants, etc., received	ļ -			N/A	
)		Check If the foundation is not required to attach Sch. B					
. ~	Ì	3	Interest on savings and temporary cash investments					
7	1	4	Dividends and interest from securities		6,576.	6,576.	•	STATEMENT 1
2017,	1)	5a	Gross rents					
	r	b	Net rental income or (loss)	<u> </u>		*		
€5	<u>o</u>	6a	Net gain or (loss) from sale of assets not on line 10	 	<u>-525.</u>		<u> </u>	
PR	a l	b	Gross sales price for all assets on line 6a 217,376.				 	
∢,	Revenu		Capital gain net income (from Part IV, line 2)			0 .	•	-
	_		Net short-term capital gain	<u></u> _			+	
Z		9	Income modifications Gross sales less returns	<u> </u>			+	_
			and allowances	 	AV A	w vat 4.40		
Ü		ĺ	Gross profit or (loss)	†			1	
Vie		l	Other income	 			 	
		12	Total. Add lines 1 through 11		6,051.	6,576	•	
		13	Compensation of officers, directors, trustees, etc		0.	0 .		0.
		14	Other employee salaries and wages					
		15	Pension plans, employee benefits					
	Ses	16a	Legal fees STMT 2		145.	145	•	0.
	ben	b	Accounting fees STMT 3		1,540.	1,540		0.
	and Administrative Expens	C	Other professional fees STMT 4	<u> </u>	2,872.	2,872	•	0.
	tive		Interest	<u> </u>				
	stra	18	Taxes STMT 5		99.	0	•	0.
	ij	19	Depreciation and depletion	 			 	
	퉏	20	Occupancy	₁├──			 	
	þ	21	Travel, conterences and peelings VED Printing and publications CEIVED				 	
	g		Other expenses	∖			<u> </u>	
	ij	24	Total operating and administrative 2017	\ <i>\</i>			 	-
	Operating	-	Other expenses Total operating and administrative 2017 expenses. Add lines 13 through 23	}]	4,656.	4,557	•	0.
	o	25	Contributions, gifts, grants page N. U.T.		15,000.			15,000
		26	Total expenses and disbursements.	رر				
SCANNED APR 2 1 2017,			Add lines 24 and 25		19,656.	4,557	•	15,000.
		27	Subtract line 26 from line 12:					
		a	Excess of revenue over expenses and disbursements	ļ	-13,605.			
		b	Net investment income (if negative, enter -0-)			2,019		
			Adjusted net income (if penative enter -0-)	1			N/A	

623501 11-23-16 LHA For Paperwork Reduction Act Notice, see instructions

623511 11-23-16

4 Add lines 1, 2, and 3

0.

0.

283,700.

283,700.

Form **990-PF** (2016)

Decreases not included in line 2 (itemize)

3 Other increases not included in line 2 (itemize)

Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

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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.

Enter qualifying distributions from Part XII, line 4

8

	990-PF (2016) DRU ALLISON CEDERBERG FOUNDATION 81-0 rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - 9	477622 see instru	Page 4 ctions)
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%		40.
	of Part I, line 27b		
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0.
	Add lines 1 and 2		40.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	-,	40.
6	Credits/Payments:		
	2016 estimated tax payments and 2015 overpayment credited to 2016		
	Exempt foreign organizations - tax withheld at source		
	Tax paid with application for extension of time to file (Form 8868)		*
	Backup withholding erroneously withheld	*	•
	Total credits and payments. Add lines 6a through 6d		0.
	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached 8		
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		40.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		
	Enter the amount of line 10 to be: Credited to 2017 estimated tax Refunded 11 Int VII-A Statements Regarding Activities		
			Yes No
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	<u> </u>	
	any political campaign? Did the proof more than \$100 during the upper (orthor directly or indirectly) for political purposes (one instructions for the definition)?	1a	X
	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	1b	
			-
	distributed by the foundation in connection with the activities.	100	x
	Did the foundation file Form 1120-POL for this year? Enter the amount (if any) of tay on political expenditures (continued during the year).	1c	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. (1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$ 0 .		,
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	1	,
	managers. > \$ 0.		
	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	* X
2	If "Yes," attach a detailed description of the activities		· 4. 2.22
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or		}
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X
	If "Yes," has it filed a tax return on Form 990-T for this year?	—	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	X
	If "Yes," attach the statement required by General Instruction T		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		s
	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_	X
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)		
	MT		1
b	olf the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)		
	of each state as required by General Instruction G? If "No," attach explanation	8b	X
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar		
	year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	X
		Form 990)-PF (2016)

Pa	art VII-A Statements Regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>X</u>
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		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ► BRENDA WHITE, CPA Telephone no. ► 406-24		136	
	Located at ► 402 NORTH BROADWAY 4TH FLOOR, BILLINGS, MT ZIP+4 ►59	104		
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	Ŋ	/A	NI -
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		<u>X</u>
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			I
_	foreign country	<u> </u>		<u> </u>
ra	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required	i	Yes	No
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	-	162	140
18	a 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 X No	1		
	(1) = 1929 - 11 11 11 11 11 11 11 11 11 11 11 11 1	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No			ĺ
	a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No Yes X No			*
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			/
	(4) Pay compensation to, or pay or reinfludise the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?		¢	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"		`	
	If the foundation agreed to make a grant to or to employ the official for a period after		1	
	termination of government service, if terminating within 90 days.) Yes X No	* _		
	b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	,		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
	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	-	ļ	3 4.5
	before the first day of the tax year beginning in 2016?	1c		X
2	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)):	1		
	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	1	4	
	before 2016? Yes X No	1.		
	If 'Yes,' list the years >,,,		ļ ·	
	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.) N/A	2b	1	
	c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
3	aa Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?		1	
	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	 	
4	4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	-	X
	b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2016?	4b		X

orm 990-PF (2016) DRU ALLISON CEDERBERG FO			<u>81-04776</u>	22 Page	<u>6</u>
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section)			es 🗶 No		
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire				
any voter registration drive?			es X No		
(3) Provide a grant to an individual for travel, study, or other similar purpose	§?	Ye	es X No		
(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				
the prevention of cruelty to children or animals?		Ye	s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	nder the exceptions described.	ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instr	ructions)?		N/A	5b	
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 mainta	ined			
expenditure responsibility for the grant?	Ŋ	I/A 🔲 Ye	s 🔲 No	į l	
If "Yes," attach the statement required by Regulations section 53.49-	45-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				4
a personal benefit contract?		Ye	es X No		c.
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b X	<u>. </u>
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?	Ye	es 🗓 No 🕍		4
b If "Yes," did the foundation receive any proceeds or have any net income attrib	outable to the transaction?		N/A	7b	
Part VIII Information About Officers, Directors, Trus	tees, Foundation Ma	nagers, Highly	y		
Paid Employees, and Contractors	" " " " " " " " " " " " " " " " " " " 				
1 List all officers, directors, trustees, foundation managers and their		77.0	C (4) 0		_
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans	(e) Expense account, oth	er er
· · · · · · · · · · · · · · · · · · ·	to position	enter -0-)	and deferred compensation	allowances	<u>; </u>
DRU ALLISON CEDERBERG	PRESIDENT		l		
620 HIGHLAND PARK DRIVE	_				
BILLINGS, MT 59102	0.00	0.	0.	0	<u>.</u>
ALLISON LOUISE CEDERBERG	_DIRECTOR		{		
620 HIGHLAND PARK DRIVE	_				
BILLINGS, MT 59102	0.00	0.	0.	0	<u>.</u>
GAIL DEES	_SECRETARY/TRE	ASURER			
1257 MOSSMAN DRIVE					
BILLINGS, MT 59105	0.00	0.	0.	0	•
	_]				
]		
	<u> </u>	<u> </u>			_
2 Compensation of five highest-paid employees (other than those in		enter "NONE."	(d) Contributions to		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, othe	er
	devoted to position		compensation	allowances	<u>; </u>
NONE	4		{		
					
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	4		l i		
	<u></u>	<u> </u>	l		
Total number of other employees paid over \$50,000			>		0
			Form	990-PF (201	16)

P	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn 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	281,180.
b	Average of monthly cash balances	1b	281,180. 4,241.
C	Fair market value of all other assets	1c	
đ	Total (add lines 1a, b, and c)	_1d	285,421.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	_0.	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	285,421.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,281.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	_5 _	281,140.
6	Minimum investment return. Enter 5% of line 5	6	14,057.
P	Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations of foreign organizations check here and do not complete this part.)	tions and certain	-
<u> </u>	Minimum investment return from Part X, line 6	1	14,057.
' 2а		40.	14,037
b			
C			40.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	14,017.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	14,017.
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	14,017.
	Part XII Qualifying Distributions (see instructions)		14,017
<u></u>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes;		
·		1a	15,000.
b		1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	<u>_</u>
3	Amounts set aside for specific charitable projects that satisfy the:		
a		3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	15,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
-	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	15,000.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the found 4940(e) reduction of tax in those years.	idation qualifies for the	

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		100000000000000000000000000000000000000	2010	
2 Undistributed income, if any, as of the end of 2018				14,017.
a Enter amount for 2015 only			0.	
b Total for prior years:				-
Excess distributions carryover, if any, to 2016:		0.		ļ
a From 2011				
b From 2012				
c From 2013				*
d From 2014			* *	
e From 2015 1,150.		>	*	, , , , , , , , , , , , , , , , , , ,
f Total of lines 3a through e	1,150.			:
4 Qualifying distributions for 2016 from	1,150.	· · · · · · · · · · · · · · · · · · ·		`
Part XII, line 4: ►\$ 15,000.	^	*	\	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
a Applied to 2015, but not more than line 2a	*	` `	o.	,
b Applied to undistributed income of prior			<u>U.</u>	
years (Election required - see instructions)	1	0.	· · · · · · · · · · · · · · · · · · ·	`*
c Treated as distributions out of corpus			,;	,
(Election required - see instructions)	0.		,	
d Applied to 2016 distributable amount		·		14 015
e Remaining amount distributed out of corpus	983.	· · · · · · · · · · · · · · · · · · ·		14,017.
5 Excess distributions carryover applied to 2016	0.			
(If an amount appears in column (d), the same amount must be shown in column (a))		· ·		0.
6 Enter the net total of each column as	\$ ~	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	,	, .
indicated below:	· a3	,	*	* ×
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,133.	*	-	* .
b Prior years' undistributed income. Subtract	44,		¢* .	
line 4b from line 2b	and the term	0.	TELEBEL BEEL LINES EXPENSES THE	inggenistances nervise see se
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		0.		· · · · · · · · · · · · · · · · · · ·
amount - see instructions	*	_	**	`\ *
e Undistributed income for 2015. Subtract line		0.		
4a from line 2a. Taxable amount - see instr.	*	`	•	*
f Undistributed income for 2016. Subtract			0.	
lines 4d and 5 from line 1. This amount must		*		
be distributed in 2017			`.	•
7 Amounts treated as distributions out of			· · · · · · · · · · · · · · · · · · ·	<u> </u>
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	2,133.			
O Analysis of line 9;				
a Excess from 2012				
b Excess from 2013				
c Excess from 2014		1		
d Excess from 2015 1,150.				
e Excess from 2016 983.				
23581 11-23-16				

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 2 from line 2c Complete 3a, b, or 1 for the alternative test relied upon: a Asset's alternative test relied upon: a Asset's alternative test relied upon: a Asset's alternative test - enter: (1) Value of all assets qualifying under section 4942(l/3)(B)(I) b Endowment' alternative test - enter 2/3 of minimum westment 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(l/3)(B)(II) (3) Largest amount of support from an exempt organization and section 4942(l/3)(B)(III) (3) Largest amount of support from an exempt organization and section 4942(l/3)(B)(III) (3) Largest amount of support from an exempt organization as a provided in section 4942(l/3)(B)(III) (3) Largest amount of support from an exempt organization and section 4942(l/3)(B)(III) (3) Largest amount of support from an exempt organization are exempt organization as a provided in section 4942(l/3)(B)(III) (3) Largest amount of support from an exempt organization as a provided in section 4942(l/3)(B)(III) (5) List and the foundation who are extractivations.)	art XIV Private Operating Fo			II-A, question 9)	<u> N/A</u>	
Check how to indicate whether the foundation is a grivate, operating foundation described in seation 4942()(3) or 4942()(5)	-		· · · · · ·			
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 a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed: b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines: 	Check here X if the foundation on	ly makes contributions	to preselected charitabl	e organizations and does	not accept unsolicited requ	uests for funds. If
b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines:						J U.
c Any submission deadlines:	a The name, address, and telephone numb	er or e-mail address or	the person to whom app	nications should be addre	ssea.	
	b The form in which applications should be	submitted and informa	ation and materials they	should include:		
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:	c Any submission deadlines:			··		
and the state of t	d Any restrictions or limitations on awards	such as by genoraphic	cal areas, charitable field	s, kinds of institutions, or	other factors:	
	- Tary 1000 1000 100 01 minimum on a wall of	Jacon ac by goograpine	an out, only habit held	o, ando of mondations, of	omer inviole.	

2 Create and Contributions Baid During the V		Daymont		
3 Grants and Contributions Paid During the Y Recipient	If recipient is an individual	Payment		
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	or substantial contributor	recipient	 	
a raid duffing the year				
		l		
ARABIAN HORSEMEN'S DISTRESS	NONE	EXEMPT	PHILANTHROPIC	
236 HENRY SANFORD ROAD				
BRIDGEWATER CT 06752				5,000.
		1		
FAMILY PROMISE OF YELLOWSTONE VALLEY	NONE	EXEMPT	PHILANTHROPIC	
10 S 26TH ST	NONE	DALINI I	I III AANTIMOL IC	
BILLINGS MT 59101				1.000.
		}		
CHINOOK HORSES	NONE	EXEMPT	PHILANTHROPIC	
2816 PALM DR				0.000
BILLINGS, MT 59102		 		9,000
		1		
			 	
				"
Total			▶ 3a	15,000.
b Approved for future payment				
NONE				
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		1		
Tabl	1	<u> </u>	<u> </u>	
Total			<u>▶ 3b</u>	orm 990-PF (2016

Part XVI-A Analysis of Income-Producing Activities

			,		
Enter gross amounts unless otherwise indicated.	(a) Business	business income (b) Amount	(C) Exclu- sion	(d) Amount	(e) Related or exempt function income
1 Program service revenue:	code	Amount	code	Amount	Tunction income
<u>.</u>			\vdash		
b			+-+		
<u> </u>			+		
d	1 1		+-+		
e	-		+		
g Fees and contracts from government agencies	-		+ 1		
2 Membership dues and assessments			+		
3 Interest on savings and temporary cash			+-+		
investments			1 1		
4 Dividends and interest from securities			14	6,576.	
5 Net rental income or (loss) from real estate:					• • • • • • • • • • • • • • • • • • • •
a Debt-financed property					
b Not debt-financed property					-
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other	1	_	1 1		
than inventory			18	-525.	
9 Net income or (loss) from special events			1-1		
10 Gross profit or (loss) from sales of inventory	<u> </u>				
11 Other revenue:			1		
a	-				
b			1		
<u> </u>	1		+		
d	-		+-+		
e	Share of			6 051	
12 Subtotal. Add columns (b), (d), and (e)	20,290		<u> </u>	6,051.	
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations	. 1			13	6,051.
· · · · · · · · · · · · · · · · · · ·					
Part XVI-B Relationship of Activitie	s to the Accor	nplishment of E	xempt	Purposes	
Line No. Explain below how each activity for which i	ncome is reported in	column (e) of Part XVI-A	A contrib	uted importantly to the accom	plishment of
the foundation's exempt purposes (other t	han by providing fund	ls for such purposes).			
	 				
					·
					
					
	···············-		——————————————————————————————————————		
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623621 11-23-16

orm 990-	. , PF (2016)	LLISON CEDERBER	G FOUNDATION	81-04	77622 Page	e 13
Part X		egarding Transfers To a		nd Relationships With Nonch		<u>- 19</u> _
1 Did t	he organization directly or indi	rectly engage in any of the following	g with any other organization	n described in section 501(c) of	Yes	No
	_)(3) organizations) or in section 52		• •		
	•	ation to a noncharitable exempt or				
(1)	• •				1a(1)	X
	Other assets					X
٠,	r transactions:				1	
	Sales of assets to a noncharita	ble exempt organization			1b(1)	X
` '		ncharitable exempt organization				X
٠,	Rental of facilities, equipment,	, =				X
	Reimbursement arrangements					X
• •	Loans or loan guarantees					X
٠,	<u>-</u>	mbership or fundraising solicitation	nns			X
		uling lists, other assets, or paid em				X
				rays show the fair market value of the good		
				e in any transaction or sharing arrangemen		
		other assets, or services received.		o in any transaction of onaring arrangemen	L 311011 111	
(a) Line no	(b) Amount involved	(c) Name of noncharitable		(d) Description of transfers, transactions, a	nd sharing arrangement	
(4)	(4)	N/A		(-)		<u> </u>
	 	N/A		 		
	 			 		
	 			 		
	 					
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	<u> </u>	<u> </u>	· · · · · · · · · · · · · · · · · · ·	 		
	<u> </u>			 		
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	<u> </u>					
		tly affiliated with, or related to, one		rations described		
	, ,	r than section 501(c)(3)) or in sec	tion 5277		Yes X	No
b If "Y	es," complete the following sch		1.07			
	(a) Name of org	ganization	(b) Type of organization	(c) Description of relation	nsnip	
	N/A			·· <u> </u>		
			ļ			
			ļ			
			ļ			
		_ 	L		·	
	. / \			statements, and to the best of my knowledge ation of which preparer has any knowledge	May the IRS discuss the	
Sign Here) A (X	0	V4-3-17	PRESIDENT	return with the preparer shown below (see instr.) X Yes	
	Conneture of officer of trusto	www.	Dete	Tale		

P01385305

PTIN

Firm's EIN ► 81-0385940

Phone no. 406-245-5136

Check _____ if self- employed

Paid

Preparer

Use Only

Preparer's signature

Preparer's signature

Preparer's House CPA

BRENDA L. WHITE,

Firm's name ► ANDERSON ZURMUEHLEN & CO., P.C.

BILLINGS, MT 59104-0435

Print/Type preparer's name

BRENDA L. WHITE,

Firm's address ▶ P.O. BOX 20435

Date

03/30/17

FORM 990-PF DIVIDENT	S AND INTER	EST FROM SECUR	ITIES ST	ATEMENT 1
GROSS SOURCE AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE		
CAPITAL GAIN DISTRIBUTION 8,431	.•	0. 8,431.	8,431.	
TO PART I, LINE 4 8,431	. •	8,431.	8,431.	
FORM 990-PF	LEGAL	FEES	Sī	PATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES
LEGAL FEES	145.	145.		0.
		·		
TO FM 990-PF, PG 1, LN 16A =	145.	145.		0.
TO FM 990-PF, PG 1, LN 16A = FORM 990-PF	ACCOUNTI		Si	O. TATEMENT 3
		NG FEES (B) NET INVEST-	(C) ADJUSTED	PATEMENT 3
FORM 990-PF	ACCOUNTI	NG FEES (B) NET INVEST-	(C) ADJUSTED	CATEMENT 3
FORM 990-PF DESCRIPTION	ACCOUNTI (A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED	(D) CHARITABLE PURPOSES
FORM 990-PF DESCRIPTION ACCOUNTING TO FORM 990-PF, PG 1, LN 16B	(A) EXPENSES PER BOOKS 1,540.	(B) NET INVEST- MENT INCOME 1,540.	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES 0.
FORM 990-PF DESCRIPTION ACCOUNTING TO FORM 990-PF, PG 1, LN 16B	ACCOUNTI (A) EXPENSES PER BOOKS 1,540.	(B) NET INVEST- MENT INCOME 1,540.	(C) ADJUSTED NET INCOME	CATEMENT 3 (D) CHARITABLE PURPOSES 0.
FORM 990-PF DESCRIPTION ACCOUNTING TO FORM 990-PF, PG 1, LN 16B FORM 990-PF	ACCOUNTI (A) EXPENSES PER BOOKS 1,540. 1,540. OTHER PROFES (A) EXPENSES	(B) NET INVEST- MENT INCOME 1,540. 1,540. SIONAL FEES (B) NET INVEST-	(C) ADJUSTED NET INCOME ST (C) ADJUSTED	CATEMENT 3 (D) CHARITABLE PURPOSES 0. 0. CHARITABLE CHARITABLE

FORM 990-PF		KES —			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTEI NET INCOM		
TAX PAYMENT	99.	,	0.			0.
TO FORM 990-PF, PG 1, LN 18	99.	·	0.			0.
FORM 990-PF	CORPORAT	TE STOCK			STATEMENT	6
DESCRIPTION			вос	OK VALUE	FAIR MARKE VALUE	т
AMER FUNDS EUROPACIFIC GROWT: PIMCO STOCK PLUS INTERNATION. WISDOMTREE TRUST SMALL CAP AB LARGE CAP GROWTH FUND CLA. DELAWARE VALUE FUND INSTITUT VANGUARD 500 INDEX FUND ADMI: VANGUARD MID-CAP INDEX FUND VIRTUS EMERGING MARKETS OPPO: I	I		11,563. 10,857. 13,864. 31,588. 30,145. 32,360. 26,461. 8,536.	11,2 11,3 16,7 31,1 31,0 33,7 27,9	98. 92. 03. 94. 99.	
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		 -	165,374.	171,7	29.
FORM 990-PF	OTHER IN	/ESTMENTS			STATEMENT	7
DESCRIPTION		ALUATION METHOD	вос	OK VALUE	FAIR MARKE VALUE	т
ALLIANCEBERNSTEIN GLOBAL BON ADVISOR CLASS LORD ABBETT SHORT DURATION I FUND CLASS F METROPOLITAN WEST TOTAL RETU	NCOME	COST COST		11,501.	11,4	71.
FUND CLASS I PIMCO INCOME FUND CLASS P AB HIGH INCOME FUND CLASS AD	VISOR	COST COST		20,826. 28,496. 25,549.	20,1 28,4 25,6	21.
TOTAL TO FORM 990-PF, PART I	I, LINE 13			112,320.	111,2	17.