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. ► Go to www.irs.gov/Form990PF for instructions and the latest information.

	ndar year 2018 or tax year beginning		, and ending	•	1 opon to r date mapositor
	f foundation			A Employer identification	number
DRU	LALLISON CEDERBERG FOUN	DATION		81-0477622	
_	and street (or P O box number If mail is not delivered to street		Room/suite	B Telephone number	
620	HIGHLAND PARK DR			406-245-51	36
City or	lown, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is po	ending, check here
BIL	LINGS, MT 59102				
G Chec	k all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	, check here $ ightharpoonup$
	Final return	Amended return		2. Foreign organizations me	sting the 85% test.
	Address change	Name change	-	2. Foreign organizations me check here and attach co	mputation
_	k type of organization: X Section 501(c)(3) ex			E If private foundation stat	
		Other taxable private founding method: X Cash		under section 507(b)(1)	
	arket value of all assets at end of year J Account	ther (specify)	Accrual	F If the foundation is in a 6	
(Irom ▶\$	Part II, col. (c), line 16) 0i	nn (d) must be on cash basi	ıs.)	under section 507(b)(1)	(b), check here
	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
gr Carres	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) )	expenses per books	income	income	for charitable purposes (cash basis only)
$\overline{1}$	Contributions, gifts, grants, etc., received			N/A	
2	Check X If the foundation is not required to attach Sch. B				
3	Interest on savings and temporary cash investments				
1 4	Dividends and interest from securities	7,769.	7,769.		STATEMENT 1
<b>(</b> ) 5	a Gross rents				
$\gamma \mid \gamma$	Net rental income or (loss)				00 X 12000 2000 2000 2000 2000 2000 2000
<u>o</u> 6	Net gain or (loss) from sale of assets not on line 10	12,359.	SEC. NO. CONTROL CONTROL CONTROL		
티를	Gross sales price for all assets on line 6a 155, 374.	100 CONTROL 100 CO	10050		
Revenue 7	Capital gain net income (from Part IV, line 2)		12,359.		
_  8	Net short-term capital gain				
9	income modifications Gross sales less returns				
10					
	Cross profit or (loss)	SUCCESSIONAL SECTION SECURITY SECURITY SECTION	2.7.200.000.000.000.000.000.000	property and the same and the s	
11	Other income		THE THOUGHT COUNTY AND THE COUNTY OF THE COUNTY		
12	Total Add lines 1 through 11	20,128.	20,128.		
13	Compensation of officers, directors, trustees, etc	0.	0.		0.
14	Other employee salaries and wages				
<sub>0</sub> 15	Pension plans, employee benefits				
ğ   16a	Legal fees				
Experi	RECEIVED STMT 2	1,740.	1,740.	[ ,	0.
# r	Other professional fees STMT 3	3,125.	3,125.		0.
<b>1</b>	-MAR 1 1 2019   9 cm/m 4	345			0.
	axes STMT 4	345.	0.		U •
20	—Depreciation and depletion □□ OGDEN. UT				
¥ 21	Travel, conferences, and meetings				
P 22	Printing and publications				
g 23	Other expenses STMT 5	129.	129.		0.
E 24	Total operating and administrative				
Operating and Administra	expenses. Add lines 13 through 23	5,339.	4,994.		0.
Ō   <sub>25</sub>	Contributions, gifts, grants paid	8,250.			8,250.
26					
	Add lines 24 and 25	13,589.	4,994.	I HARRY T. AND MORPHOWER IN EAST OF THE SAME	8,250.
27	Subtract line 26 from line 12:				
1	Excess of revenue over expenses and disbursements	6,539.			
	Net investment income (If negative, enter -0-)	The second second second	15,134.	N/A	
	: Adjusted net income (it negative, enter -0-)	1 399495 5092 4004 500 7456 7856 7856 7856 7856 7856 7856 7856 78	I CREATE HAVE A PROPERTY OF THE PROPERTY OF TH	ı IV/A	r - 1986 - 1986 - 1986 - 1986 - 1986 - 1986 - 1986 - 1986 - 1986 - 1986 - 1986 - 1986 - 1986 - 1986 - 1986 - 1

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions.

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	288,183.
Enter amount from Part I, line 27a	2	6,539.
Other increases not included in line 2 (itemize)	3	0.
Add lines 1, 2, and 3	4	294,722.
Decreases not included in line 2 (itemize) ▶	5	0.
Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	294,722.
	(must agree with end-of-year figure reported on prior year's return)  Enter amount from Part I, line 27a  Other increases not included in line 2 (itemize)  Add lines 1, 2, and 3	(must agree with end-of-year figure reported on prior year's return)       1         Enter amount from Part I, line 27a       2         Other increases not included in line 2 (itemize)       3         Add lines 1, 2, and 3       4         Decreases not included in line 2 (itemize)       5

(a) List and describe	the kind(s) of p	property sold (for exam	mple, real esta	·······	(b)	How ac	quired (	c) Date ac	quired	(d) Date sold
		mmon stock, 200 shs	s. MLC Co.)		D	- Dona	ition	(mo., da	y, yı.)	(mo., day, yr.)
18 PUBLICLY TRADE			· · · · · · · · · · · · · · · · · · ·		╂—		P P			
b CAPITAL GAIN D		<u> </u>		<del></del> -	+		<u> </u>			
d	<del>_</del>				+					
e										
(e) Gross sales price		ciation allowed allowable)		st or other basis expense of sale			(		n or (loss) (f) minus (	
a 149,886.		-		143,01	L5.					6,871.
b 5,488.										<u>5,488.</u>
C										·
е		(1-)		40/04/00						
Complete only for assets showing		<del></del>							l. (h) gain i ot less than	
(i) FMV as of 12/31/69		justed basis f 12/31/69		xcess of col. (1) r col. (j), if any					rom col. (t	
				(),,,						6,871.
<u>a</u> b										5,488.
C									-	5/1001
d										
8										
	-	∫ If gain, also enter	ın Part I. line	7	)					
2 Capital gain net income or (net ca	ipital loss)	If (loss), enter -0	- in Part I, line	7	ľ	2				<u>12,359.</u>
3 Net short-term capital gain or (los	ss) as defined i	•								
If gain, also enter in Part I, line 8,			(-)-		}					
If (loss), enter -0- in Part I, line 8		: 4040(a) 4a-	Daduasa	d Tay on Nad		3			N/A	
Part V. Qualification U						_	IOIIL IIICO	11110		
(For optional use by domestic private	e foundations s	ubject to the section 4	4940(a) tax oi	n net investment ii	ncom	e.)				
If section 4940(d)(2) applies, leave to	his part blank.									
Was the foundation liable for the sec	tion ADA2 tay n	n the distributable am	nount of any v	ear in the hace ne	rind?					X Yes No
If "Yes," the foundation doesn't qualif										
1 Enter the appropriate amount in					entries	S.				-
Reco posid veers		(b)			(c)	)			Dietrib	(d)
Base periód years Calendar year (or tax year beginni	ng in) A	djusted qualifying dis	tributions	Net value of no			use assets	Distribution ratio (col. (b) divided by col. (c))		
2017										-
2016								1		
2015								↓		
2014								1		·
2013				<u> </u>				<del>                                     </del>		
2 Total of line 1, column (d)	<b>.</b>		l.a. 0 b 5	0	4			2		
3 Average distribution ratio for the	-		on line 2 by 5.	.v, or by the numb	per or	years				
the foundation has been in existe	nce ii iess than	5 years						3		
4 Enter the net value of noncharitat	No-uca accate f	or 2018 from Part V	lina 5					4		
4 Enter the net value of noncharitat	ו פוסכים מסספוס ו	or 2010 Holli Falt A,	iiile J					<del>                                     </del>	·	<del></del>
5 Multiply line 4 by line 3								5		
3 Multiply line 4 by line 5								1		
6 Enter 1% of net investment incon	ne (1% of Part	I. line 27b)						6		
		,,								
7 Add lines 5 and 6								7		
8 Enter qualifying distributions from	n Part XII, line	4						8		
If line 8 is equal to or greater than See the Part VI instructions.	n line 7, check t	he box in Part VI, line	1b, and com	plete that part usi	ng a 1	% tax r	rate.			

	n 990-PF (2018) DRU ALLISON CEDERBERG FOUNDATION artivis Excise Tax Based on Investment Income (Section 4940(a), 4940(b),				Page 4
	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 instru				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🔛 and enter	1%	1 Divings son potnicum	Section of the sectio	303.
	of Part I, line 27b				
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12,	, col. (b). ノ	<b>****</b>		
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)	ł	2		0.
3	Add lines 1 and 2	•	3		03.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		5	<u> </u>	<u>0.</u>
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	ì			<u> </u>
	Credits/Payments:  2018 estimated tax payments and 2017 overpayment credited to 2018  6a	0.			
	2018 estimated tax payments and 2017 overpayment credited to 2018  Exempt foreign organizations - tax withheld at source  6b	0.			
	Tax paid with application for extension of time to file (Form 8868)	0.		1 -	
	Backup withholding erroneously withheld  6d	0.			
	Total credits and payments. Add lines 6a through 6d		7	an an ann an	0 •
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached		8		0.
-	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶	9	3	303.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	<b>•</b>	10		•
	Enter the amount of line 10 to be: Credited to 2019 estimated tax	Refunded >	11		
Pa	art:VII-A Statements Regarding Activities				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it part	ticipate or intervene	ın	Yes	No
	any political campaign?			1a	X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instru		ition	1b	X 1 Martinos Assis
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials pu	iblished or			
	distributed by the foundation in connection with the activities.				
	Did the foundation file Form 1120-POL for this year?			1c	X (289883288)
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	0			
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$	0.			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	on foundation			
	managers. > \$ 0 .	•		2	X
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2	A
2	If "Yes," attach a detailed description of the activities.  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	r s of incornoration, o	r		
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	o or moorporation, o	•	3	X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a	X
	olf "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b	
	Att at a large to the second of the second o		•	5	X
	If "Yes," attach the statement required by General Instruction T				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that c	onflict with the state	law		
	remain in the governing instrument?			6 X	ļ <u>.</u>
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	158653.6UNG
8a	Enter the states to which the foundation reports or with which it is registered. See instructions. 🕨			_	
	MT			-   <b>       </b>	
b	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (o	r designate)			
_	of each state as required by General Instruction G? If "No," attach explanation	= 40.40(\)\(\frac{1}{2}\)\(\frac{1}{	a day	8b X	<b> </b>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) o	1 4942(J)(5) for cale	nuar	9	x
	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," complete Part XIV			3	
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names			10	X

3Ь

N/A

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2018.)

had not been removed from jeopardy before the first day of the tax year beginning in 2018?

Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (continu	ued)	
5a During the year, did the foundation pay or incur any amount to:				Yes No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	· 🔲 Ye	as 🗶 No 📗	
(2) Influence the outcome of any specific public election (see section 4955); o	r to carry on, directly or indire			
any voter registration drive?			as 🔀 No	
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	as 🗶 No	
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		[ ]	
4945(d)(4)(A)? See instructions			as 🗶 No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f			
the prevention of cruelty to children or animals?			ıs 🗶 No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	•	n Regulations	*	<b></b>   <b></b>
section 53.4945 or in a current notice regarding disaster assistance? See instri			N/A	5b
Organizations relying on a current notice regarding disaster assistance, check i				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for			<u> </u>	
expenditure responsibility for the grant?	N	[/A	s LINo	
If "Yes," attach the statement required by Regulations section 53.4945-5(d).			3	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on		s X No	
a personal benefit contract?	versonal hansfit asstract?	Y6		6b X
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	Personal Denetit Contract?			6b X
If "Yes" to 6b, file Form 8870.	holtor transaction?		as 🗓 No	
7a At any time during the tax year, was the foundation a party to a prohibited tax s		¥€		7b
<ul> <li>b If "Yes," did the foundation receive any proceeds or have any net income attributed.</li> <li>8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$</li> </ul>		r	1X/A	
	51,000,000 III TEHIUHETAUOH O		as 🔀 No 🖟	
excess parachute payment(s) during the year?  Part.VIII Information About Officers, Directors, Trusto	ees. Foundation Ma			2386 July   2005 July 2005   2386 July 2005
Paid Employees, and Contractors	ood, i danidation Ma	agoro, mgm	•	
List all officers, directors, trustees, and foundation managers and trustees.	heir compensation.	•		
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	account, other allowances
DRU ALLISON CEDERBERG	PRESIDENT			
620 HIGHLAND PARK DRIVE				!
BILLINGS, MT 59102	0.00	0.	0.	′0.
	DIRECTOR			
620 HIGHLAND PARK DRIVE				
BILLINGS, MT 59102	0.00	0.	0.	0.
GAIL DEES	SECRETARY/TRE	ASURER		
1257 MOSSMAN DRIVE				
BILLINGS, MT 59105	0.00	0.	0.	0.
	1		l	l
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(a) Evnence
(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 compensation	(e) Expense account, other allowances
NONE				
				,
	,			
	·			
		<u> </u>		
	<u> </u>	L	<u> </u>	L
Total number of other employees paid over \$50,000	·····		<u> </u>	0

Total. Add lines 1 through 3

1 20 1

P	art X Minimum Investment Return (All domestic foundations in	nust complete this pa	t Foreign fou	ndations, see	instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable	le, etc., purposes:			
-	Average monthly fair market value of securities			1a	303,364.
	Average of monthly cash balances			1b	7,724.
C	Fair market value of all other assets			10	
ď	Total (add lines 1a, b, and c)			1d	311,088.
e					
	1c (attach detailed explanation)	1e	0.	1,72,72	
2	Acquisition indebtedness applicable to line 1 assets			2	0.
3	Subtract line 2 from line 1d			3	311,088.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount	, see instructions)		4	4,666.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and or			5	306,422.
6	Minimum investment return. Enter 5% of line 5			6	15,321.
Р	art·XI <sup>*</sup> Distributable Amount (see instructions) (Section 4942(j)(3) are foreign organizations, check here ▶ and do not complete this part.		g foundations ai	nd certain	
1	Minimum investment return from Part X, line 6			1	15,321.
2a	Tax on investment income for 2018 from Part VI, line 5	2a	303.		
b	Income tax for 2018. (This does not include the tax from Part VI.)	2b		St. of 5	
C	Add lines 2a and 2b			2c	303.
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	15,018.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	15,018.
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	<u> 15,018.</u>
P	art XII Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., pur	poses:			
a	Expenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	8,250.
b	Program-related investments - total from Part IX-B			1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charital	ble, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the:			initia.	
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; a			4	8,250.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net inve	estment			_
	income. Enter 1% of Part I, line 27b			5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	8,250.
	Note: The amount on line 6 will be used in Part V. column (h), in subsequent years v	uhan calculating whather	the foundation	qualifies for th	e section

Form **990-PF** (2018)

4940(e) reduction of tax in those years.

## Part XIII \*Undistributed Income (see instructions)

	(a) Corpus	· (b) Years prior to 2017	(c) 2017	( <b>d)</b> 2018
1 Distributable amount for 2018 from Part XI,				
line 7				15,018.
2 Undistributed Income, if any, as of the end of 2018			•	
a Enter amount for 2017 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2018:			00000000000000000000000000000000000000	A Decision of the Control of the Con
a From 2013				
<b>b</b> From 2014				
c From 2015				
d From 2016 393.				
e From 2017				
f Total of lines 3a through e	393.			
4 Qualifying distributions for 2018 from				
Part XII, line 4: ► \$ 8,250.			_	
a Applied to 2017, but not more than line 2a			0.	
b Applied to undistributed income of prior		. 0.		
years (Election required - see instructions) c Treated as distributions out of corpus	88-88-88-88-88-88-88-88-88-88-88-88-88-			
(Election required - see instructions)	0.			
d Applied to 2018 distributable amount				8,250.
e Remaining amount distributed out of corpus	. 0.			
5 Excess distributions carryover applied to 2018	393.			393.
(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:				
8 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			180 TO 18
b Prior years' undistributed income. Subtract				
line 4b from line 2b	9015-00-505-2010-000-000-00-00-00-00-00-00-00-00-00-0	0.		
c Enter the amount of prior years undistributed income for which a notice of deficiency has been issued, or on which		,		
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2017. Subtract line				
4a from line 2a. Taxable amount - see instr.		E-SULUM MATERIAL NETWOOD AND ADDRESS AND A	0.	
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				6,375.
be distributed in 2019				0,3/3.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2013				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2019.				
Subtract lines 7 and 8 from line 6a	0.	9e-10-406er-10-200-2019-0-00-00-00-00-0-0-0-1-1-1-1-1-1-1-1-	23000, 1000,000100 201,0000000 301,0000000000000000000000000	\$ 60.00000000000000000000000000000000000
10 Analysis of line 9:				
a Excess from 2014			namananan karangan dan karangan karangan karangan karangan karangan karangan karangan karangan karangan karang	SOCIATION PROCESSION TO CONTINUE CONTINUE CONTINUE CONTINUE CONTINUE CONTINUE CONTINUE CONTINUE CONTINUE CONTI
b Excess from 2015				
c Excess from 2016 d Excess from 2017				
e Excess from 2018				
S ENGOGO II OIII EO IO	Franchisconduduri reticulationerius suurous jag aggin	Secure and Control of the Control of		Form 990-PF (2018)

		ERG FOUNDAT		81-04	77622 Page 10
Part XIV Private Operating Fo			A, question 9)	N/A	
1 a If the foundation has received a ruling or					
, foundation, and the ruling is effective for	·		. ▶ ∟	7.0.00.1/01	161151
b Check box to indicate whether the found		ng foundation described i		<u> 4942(j)(3) or                                   </u>	42(1)(5)
2 a Enter the lesser of the adjusted net	Tax year	(b) 2017	Prior 3 years (c) 2016	(d) 2015	(e) Total
income from Part I or the minimum	(a) 2018	(0) 2017	(6) 2010	(0) 2013	(6) 10(8)
investment return from Part X for					
each year listed			<u> </u>	+ /	
b 85% of line 2a				<del>  / / -  </del>	
c Qualifying distributions from Part XII,					
line 4 for each year listed	<del></del>			<del> /-                                    </del>	
d Amounts included in line 2c not				/	
used directly for active conduct of			/	<b>′</b>	
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	<u></u>		/		
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,					l
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)					I
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			f the foundatio	n had \$5,000 or mo	ore in assets
at any time during t	he year-see instr	ructions.)		=	
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation who			ibutions received by th	ne foundation before the clos	se of any tax
year (but only if they have contributed m	ore than \$5,000). (See s	ection 507(d)(2).)			
NONE				· · · · · · · · · · · · · · · · · · ·	
b List any managers of the foundation who			or an equally large por	tion of the ownership of a pa	artnership or
other entity) of which the foundation has	a 10% or greater interes	SL.			
NONE					
2 Information Regarding Contribution					
Check here <b>X</b> if the foundation of the foundation makes gifts, grants, etc.,					ests for funds. If
a The name, address, and telephone numb	per or email address of th	ne person to whom applic	ations should be addre	essed:	
h. The force or which applications about he	a automotical and informati	tion and materials they al	ould rack des		<del></del>
<b>b</b> The form in which applications should be	e suomilleo ano imorma	non and materials mey si	iouia include.		
c Any submission deadlines:					
	<u> </u>		<u></u>		
d Any restrictions or limitations on awards	, such as by geographica	al areas, charitable fields,	kinds of institutions, o	r other factors:	

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During th		Payment	<del></del>	
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	or outstand contributor			
<u> </u>				
BILLINGS SENIOR HIGH SCHOOL	NONE	EXEMPT	PHILANTHROPIC	
425 GRAND AVE				1 000
BILLINGS, MT 59101				1,000
				,
CHINOOK HORSES	NONE	EXEMPT	PHILANTHROPIC	
2816 PALM DR				
BILLINGS, MT 59102		<del> </del>		2,000
FRIENDSHIP HOUSE	NONE	EXEMPT	PHILANTHROPIC	
3128 8TH AVE S				
BILLINGS, MT 59101				1,250
WANTED A DROTHOM WISH GOVERN	NONE	EXEMPT	PHILANTHROPIC	
HUNTLEY PROJECT HIGH SCHOOL 1477 ASH ST.	NONE	EXEMPT	PHILANTHROPIC	
WORDEN MT 59088				1,000
				•
BILLINGS CLINIC FOUNDATION	NONE	EXEMPT	PHILANTHROPIC	
2917 10TH AVE N				1,000
BILLINGS MT 59101  Total SEE (	CONTINUATION SHE	ET(S)	<b>▶</b> 3a	8,250
b Approved for future payment				
			_	
NONE				
		-		
			<b>▶</b> 3b	

Part XV Supplementary Information				<del></del>
3 Grants and Contributions Paid During the Y	ear (Continuation)	T	· · · · · · · · · · · · · · · · · · ·	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
BILLINGS COMMUNITY FOUNDATION	NONE	EXEMPT	PHILANTHROPIC	
100'N 27TH ST STE 303				2,000.
BILLINGS, MT 59101		-		2,000.
				<del> </del>
		-		
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				•
				;
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		İ		
			<del></del>	
		1,		
Total from continuation sheets				2,000.

4

Part XVI-A **Analysis of Income-Producing Activities** 

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ed by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- slon code	(d) Amount	Related or exempt function income
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					
4 Dividends and interest from securities			14	7,769.	
5 Net rental income or (loss) from real estate:			1-1	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
a Debt-financed property					<u> </u>
b Not debt-financed property			1 1		· <del></del>
6 Net rental income or (loss) from personal		-	1 1		
property	1				
7 Other investment income			1 1		
8 Gain or (loss) from sales of assets other			1	-	
than inventory			18	12,359.	
9 Net income or (loss) from special events			+	12,333.	
10 Gross profit or (loss) from sales of inventory			+		
11 Other revenue:			+ +		
			+ +		=
			1 1		
			+		
e			<del>-  -</del>		
12 Subtotal. Add columns (b), (d), and (e)		0		20,128.	0.
13 Total. Add line 12, columns (b), (d), and (e)			• 1		20,128.
(See worksheet in line 13 instructions to verify calculations.)					20,1201
Part XVI-B Relationship of Activities t  Line No. Explain below how each activity for which inco					olishment of
the foundation's exempt purposes (other than					
				<del> </del>	
		<del>-</del>			
	•				
		<del></del>	-		
				- <del></del>	<del></del>
			<u></u>		<u> </u>
					<del></del>
		<del></del>		<del></del>	<del>-</del>

01111 330-1		DDIDON CEDENDER		<del></del>	02 0177			go io
Part XV	Information Re Exempt Organ	egarding Transfers to a	and Transactions an	d Relationsh	ips With Nonchari	table	•	
1 Did th		rectly engage in any of the following	ng with any other organization	described in section	on 501(c)	Ī	Yes	No
		nizations) or in section 527, relatin			. ,			
a Trans	fers from the reporting found	ation to a noncharitable exempt or	ganization of:					
(1) C	ash					1a(1)		X
(2) 0	ther assets					1a(2)		X
	transactions:							-17
• •	ales of assets to a noncharita					1b(1)		X
		ncharitable exempt organization				1b(2)		X
	lental of facilities, equipment,					1b(3)		X
	leimbursement arrangements oans or loan guarantees					1b(4) 1b(5)	$\vdash$	X
	•	embership or fundraising solicitation	nne			1b(6)	$\vdash$	X
		ulling lists, other assets, or paid em				1c		X
		"Yes," complete the following sche		ivs show the fair m	arket value of the goods, o		sets.	
		oundation. If the foundation receiv					•	
colum	nn (d) the value of the goods,	other assets, or services received.	•					
(8)Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description	of transfers, transactions, and s	haring ar	талдете	nte
		N/A						
		<u> </u>	· · · · · · · · · · · · · · · · · · ·					
				<del>                                     </del>	<del></del>			
					<del>.</del> .			
					<del></del>			
					• "			
		<u> </u>		<u>}</u>				
	•	tly affiliated with, or related to, one	e or more tax-exempt organiza	itions described	_	٦	-	٦
	* * *	on 501(c)(3)) or in section 527?				_ Yes	LA.	] No
b If "Yes	s," complete the following sch (a) Name of org	edule.	(b) Type of organization		c) Description of relationsh			
	N/A	janization	(b) Type of organization		of Doson Phon of Totalionan	·P		
	II/A				<u></u>			
		<del></del>		·				
		that I have examined this return, including				the IHS	discuss \	this
Sign	nd belief, it is true, correct, and cor	mplete Declaration of preparer (other tha	an taxpayer) is based on all informat	tion of which preparer	nas any knowledge retur	n with th	e prepar /7 See In:	er
Here	イルサし	anduber	19/4/19	PRESID	ENTX	Yes	, $\square$	] No
	Signature of officer or trustee		Date /	Title				
	Print/Type preparer's na	1, 7	signature L. A. I	Date	Check if PTIN			
Doid	BRENDA L.		rige Diring		self- employed	205	205	
Paid Prepar	CPA	BRENDA		2/22/19	· · · · · · · · · · · · · · · · · · ·		305	
Use Or		ERSON ZURMUEHLE	EN & CO., P.C.		Firm's EIN ► 81-03	צכסי	-± U	
536 OI	- L	O. BOX 20435						
		TITITICS MT 5910	14-0435		Phone no. 406-24	5_5	136	

FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SECUR	ITIES ST	ATEMENT 1	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	(A) REVENUE S PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	
DIVIDENDS INTEREST	7,757 12		7,757. 0. 12.			
TO PART I, LINE 4 =	7,769	•	7,769.	7,769.		
FORM 990-PF		ACCOUNTI	NG FEES	ST	ATEMENT 2	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING LEGAL	_	1,595. 145.	1,595. 145.		0.	
TO FORM 990-PF, PG 1	, LN 16B =	1,740.	1,740.		0.	
FORM 990-PF	0	THER PROFES	SIONAL FEES	ST	'ATEMENT 3	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
MANAGEMENT FEES	******	3,125.	3,125.		0.	
TO FORM 990-PF, PG 1	, LN 16C	3,125.	3,125.		0.	
FORM 990-PF		TAXES		STATEMENT 4		
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
TAX PAYMENT	_	345.	0.		0.	

FORM 990-PF	OTHER EXPENSES			STATEMENT		
DESCRIPTION	(A) (B) EXPENSES NET INV PER BOOKS MENT IN			(C) ADJUSTEI NET INCOM		
MISCELLANEOUS	129.	129			0	
TO FORM 990-PF, PG 1, LN 23	129.		129.			0.
FORM 990-PF	CORPORAT	E STOCK			STATEMENT	6
DESCRIPTION			вос	OK VALUE	FAIR MARKE VALUE	T
AMER FUNDS EUROPACIFIC GROWTH FUND CLASS F2 PIMCO STOCK PLUS INTERNATIONAL FUND AB LARGE CAP GROWTH FUND CLASS ADVISOR DELAWARE VALUE FUND INSTITUTIONAL CLASS I VANGUARD MID-CAP INDEX FUND ADMIRAL VANGUARD S&P 500 AMERICAN FUNDS NEW WORLD FD AMER FUNDS SMALLCAP WORLD FD BLACKROCK HIGH YIELD BD				18,197. 18,843. 17,933. 26,627. 18,911. 24,015. 12,868. 15,988. 12,361.	16,9 16,1 20,4 27,0 20,5 22,0 11,1 13,3	62. 73. 92. 06. 01.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B			165,743.	159,2	47.
FORM 990-PF	OTHER INV	ESTMENTS			STATEMENT	7
DESCRIPTION		LUATION ETHOD	вос	OK VALUE	FAIR MARKE VALUE	T
LORD ABBETT SHORT DURATION INFUND CLASS F PIMCO INCOME FUND CLASS P WISDOMTREE US SMALLCAP LORD ABBETT FLOATING RATE FD LORD ABBETT ULTRA SHORT BOND		COST COST COST COST COST		34,224. 28,220. 12,361. 12,180. 25,171.	32,8 27,4 13,2 11,5 25,1	78. 232. 545.