Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

Department of the Treasury Internal Revenue Service

▶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.

Open to Public Inspection

		ndar year 2018 or tax year beginning 12/04/18 oundation	, and ending $12/3$	31/18		L	
,	ا ان اناما				A Emp	oloyer identification number	
1	FIVE	E POINTS FOUNDATION			83	-2759948	
		nd street (or P O box number if mail is not delivered to street address)	R	oom/suite		phone number (see instruction	ns)
!	<u>525</u>	JACK LEG LANE			40	6-223-3424	
		vn, state or province, country, and ZIP or foreign postal code			C If ex	emption application is pending	, check here
,		EMAN MT 59715			l	•	
. G	Спеск	<u> </u>	eturn of a former public c	harity	D 1 F	foreign organizations, check hi	ere
,			ed return		,	oreign organizations meeting	· · · · · · · · · · · · · · · · · · ·
		Address change Name	0-		- °	5% test, check here and attack	n computation
H		type of organization X Section 501(c)(3) exempt priv		00	•	vate foundation status was terr	minated under
بالا			able private foundation		Secil	on 507(b)(1)(A), check here	
		arket value of all assets at J Accounting metho		rual		foundation is in a 60-month te r section 507(b)(1)(B), check b	
		year (from Part II, col. (c), S 3, 256, 977 (Part I, column (d) mu	•		unde	. 30011011007(b)(1)(b); check f	
	art i	Analysis of Revenue and Expenses (The total of		T			(d) Disbursements
	WIT I	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per	(b) Net inv		(c) Adjusted net income	for charitable purposes
	, -	the amounts in column (a) (see instructions))	books	iii.con	···	income	(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	3,256,977				
	2	Check ► if the foundation is not required to attach Sch	В				
	3	Interest on savings and temporary cash investments				_	
	4	Dividends and interest from securities					
	5a	Gross rents					
9	b	Net rental income or (loss)					
Revenue	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a					
ě	7	Capital gain net income (from Part IV, line 2)			0		
<u></u>	8	Net short-term capital gain				0	
	9	Income modifications			•••••		
	10a	Gross sales less returns and allowances					
	b	Less Cost of goods sold					
	С	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	3,256,977		0	0	
Ś	13	Compensation of officers, directors, trustees, etc	0				
penses	14	Other employee salaries and wages					
ber	15	Pension plans, employee benefits		ECEIVE	- n		
EX	1	Legal fees (attach schedule)		LOLIVI		<u>) ! </u>	
ě	b	Accounting fees (attach schedule)	00 N	V 1 9 2			
Operating and Administrative	17	Other professional fees (attach schedule) Interest	100 N	JY J B Z	013	}	
str	18	Taxes (attach schedule) (see instructions)				<u> </u>	
ī	19	Depreciation (attach schedule) and depletion		GDEN,	U [
Ep	20	Occupanely					
Ř	21	Travel, conferences, and meetings					
ž.	22	Printing and publications					<u> </u>
Ď	23	Other expenses (att sch)					
Ē	24	Total operating and administrative expenses.					
era	1	Add lines 13 through 23	0	···	0	0	0
ğ	25	Contributions, gifts, grants paid	0				0
	26	Total expenses and disbursements. Add lines 24 and 25	0		0	0	0
	27	Subtract line 26 from line 12					
	а	Excess of revenue over expenses and disbursements	3,256,977				
	b	Net investment income (if negative, enter -0-)			0		
	С	Adjusted net income (if negative, enter -0-)				0	

	Part	Balance Sheets Attached schedules and amounts in the description colur	mn	Beginning of year	End of	f year
_	Part	should be for end-of-year amounts only (See instructions		(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash – non-interest-bearing				
	2	Savings and temporary cash investments			3,256,977	3,256,977
	3	Accounts receivable ▶				
		Less allowance for doubtful accounts ▶				
	4	Pledges receivable ▶				
	ł	Less allowance for doubtful accounts ▶		L		
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see				
		instructions)				
	7	Other notes and loans receivable (att schedule)				
		Less allowance for doubtful accounts ▶	0			
ţ	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
As	10a	Investments – U S and state government obligations (attach schedule)				
	b	Investments – corporate stock (attach schedule)				
	С	Investments - corporate bonds (attach schedule)				
	11	Investments – land, buildings, and equipment basis			İ	
		Less accumulated depreciation (attach sch.) ▶				
	12	Investments – mortgage loans				
1	13	Investments – other (attach schedule)				
	14	Land, buildings, and equipment basis ▶				
		Less accumulated depreciation (attach sch.)				
	15	Other assets (describe ▶)			
	16	Total assets (to be completed by all filers – see the				
╛		instructions Also, see page 1, item I)		0	3,256,977	3,256,977
	17	Accounts payable and accrued expenses	,			
	18	Grants payable				
Liabilities	19	Deferred revenue				
Ĭ	20	Loans from officers, directors, trustees, and other disqualified persons				
iat	21	Mortgages and other notes payable (attach schedule)				
ᅦ	22	Other liabilities (describe ▶)			
	23	Total liabilities (add lines 17 through 22)		0	0	
		Foundations that follow SFAS 117, check here	▶ X			
ces		and complete lines 24 through 26, and lines 30 and 31		ļ		
ũ	24	Unrestricted	ļ		3,256,977	
a	25	Temporarily restricted				
8	26	Permanently restricted				
Net Assets or Fund Baland		Foundations that do not follow SFAS 117, check here			1	
띰		and complete lines 27 through 31.				
ွ	27	Capital stock, trust principal, or current funds	Ĺ			
set	28	Paid-in or capital surplus, or land, bldg, and equipment fund	į.			
Aŝ	29	Retained earnings, accumulated income, endowment, or other funds	1			
e	30	Total net assets or fund balances (see instructions)		0	3,256,977	
Z	31	Total liabilities and net assets/fund balances (see				
┙		instructions)	l	0	3,256,977	
_	art I	I Analysis of Changes in Net Assets or Fund Balance	ces			
1	Total	net assets or fund balances at beginning of year – Part II, column (a), line	e 30 (mus	st agree with		
	end-o	f-year figure reported on prior year's return)			1	0
2	Enter	amount from Part I, line 27a			2	3,256,977
3	Other	increases not included in line 2 (itemize) ▶			3	2 256 255
4	Add li	nes 1, 2, and 3			4	3,256,977
		ases not included in line 2 (itemize)			5	2 056 055
6	Total	net assets or fund balances at end of year (line 4 minus line 5) – Part II, e	column (b), line 30	6	3,256,977
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Part IV Capital Gains a	and Losses for Tax on Investr	ment Income			
	e the kind(s) of property sold (for example, real estat warehouse, or common stock, 200 shs MLC Co)	e,	(b) How acquired P – Purchase D – Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a N/A					
b					
С					<u> </u>
<u>d</u>					
<u>e</u>	· · · · · · · · · · · · · · · · · · ·				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	1	other basis nse of sale	1	n or (loss) f) minus (g))
a				<u> </u>	
<u>b</u>		<u> </u>			
<u>c</u>		 		<u> </u>	
e d		 			
	ng gain in column (h) and owned by the	foundation on 12/31/6			
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess	s of col (i)	col (k), but not	(h) gain minus less than -0-) or om col (h))
a		 	<u> </u>		
b		. 			
С					
d					
е					
2 Capital gain net income or (net c	eapital loss) If gain, also enter ii If (loss), enter -0- ir			2	
3 Net short-term capital gain or (lo	ss) as defined in sections 1222(5) and (_			
If gain, also enter in Part I, line 8 Part I, line 8	, column (c) See instructions If (loss),	enter -0- ın		3	
	nder Section 4940(e) for Redu	ced Tax on Net I	nvestment Inco		
	e foundations subject to the section 494				
	·	o(a) tax on het investin	nent income)		/-
If section 4940(d)(2) applies, leave the	ііѕ рап біапк				N/A
Was the foundation liable for the sec	tion 4942 tax on the distributable amou	nt of any year in the ba	ase period?		Yes No
If "Yes," the foundation doesn't qualif	fy under section 4940(e) Do not comple	ete this part			
	each column for each year, see the inst	ructions before making	g any entries		
(a) Base penod years Calendar year (or tax year beginning in	(b) Adjusted qualifying distribution	s Net value	(c) of nonchantable-use asset		(d) nbution ratio divided by col (c))
2017					- <u>-</u>
2016					
2015					
2014	- +				
2013				- - ,	
2 Total of line 1, column (d)				2	
. , ,	5-year base period – divide the total on	line 2 by 5.0 or by		-	
<u> </u>	on has been in existence if less than 5 y	•		3	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, 55: 5			
4 Enter the net value of noncharitat	ble-use assets for 2018 from Part X, line	e 5		4	
5 Multiply line 4 by line 3				5	
6 Fator 40/ of act	(40/ of Port Line 27h)			6	
6 Enter 1% of net investment incom	1e (1% of Part I, line 27b)				
7 Add lines 5 and 6				7	
8 Enter qualifying distributions from				8	
·	n line 7, check the box in Part VI, line 1b	, and complete that pa	art using a 1% tax ra	ite See the	
Part VI instructions					Form 990-PF (2018

_P	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		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► N/A			
14	The books are in care of ▶ CYNTHIA HUEMPFNER Telephone no ▶ 406-2	223-	342	4
	525 JACK LEG LANE			
	Located at ▶ BOZEMAN MT ZIP+4 ▶ 5971	5		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 – check here		1	▶ [
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			
	the foreign country			_
Pá	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
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 X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		- 1	
	the benefit or use of a disqualified person)? Yes X No		- [
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the			
	foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
С	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 2018? N/A	1c		
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))			
а	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2018?			
	If "Yes," list the years ▶ 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.) N/A	2.		
		2b		
С	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 2.4th (- 1	
	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
	· ', · · · · ', · · · ·			
	If "Yes," did it have excess business holdings in 2018 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 2018.)	3b	Ī	
	· · · · · · · · · · · · · · · · · · ·	4a	-+	X
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	74		
	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 2018?	4b		x
		orm 990)-PF	

P	art VII-B Statements	Regarding Activities for Which Fo	orm 4720 May Be i	Required (cor	ntinued)			
5a	During the year did the found	lation pay or incur any amount to					Yes	No
		otherwise attempt to influence legislation (sec	ction 4945(e))?		Yes X No			
		any specific public election (see section 4955						
	directly or indirectly, any				Yes X No			
		vidual for travel, study, or other similar purpos	es?		Yes X No			
		anization other than a charitable, etc , organiz				1		
	section 4945(d)(4)(A)? Se				Yes X No			
	, , , , ,	other than religious, charitable, scientific, litera	inv. or educational	لــا				
		ention of cruelty to children or animals?	iry, or educational		Yes X No			
b		•	under the eventions		165 26 140			
U)-(5), did any of the transactions fail to qualify			N/A	5b		
		or in a current notice regarding disaster assist			M/A	ac	$\vdash \neg \vdash$	
		rrent notice regarding disaster assistance, che						
С		tion 5a(4), does the foundation claim exemption	on from the tax	N7 / N 🖂				
		diture responsibility for the grant?		n/a	Yes U No			
_		required by Regulations section 53 4945-5(d)						
6а	_	year, receive any funds, directly or indirectly,	to pay premiums		🖼			
	on a personal benefit contract				Yes X No			
b		year, pay premiums, directly or indirectly, on	a personal benefit cont	ract?		6b		X
	If "Yes" to 6b, file Form 8870				(
7a	At any time during the tax year	ir, was the foundation a party to a prohibited to	ax shelter transaction?		Yes X No			
b		ceive any proceeds or have any net income at		ction?	N/A	7b		
8	Is the foundation subject to th	e section 4960 tax on payment(s) of more that	n \$1,000,000 in					
		hute payment(s) during the year?	·—		Yes X No	<u> </u>		
Pa	urt VIII Information A	bout Officers, Directors, Trustees,	Foundation Man	agers, Highly	Paid Employ	ees,		
	and Contract	ors			<u></u>			
1 L	ist all officers, directors, trus	stees, and foundation managers and their o	compensation. See in	structions.				
			(b) Title, and average	(c) Compensation	(d) Contributions to	1 _		
	(a	a) Name and address	hours per week	(if not paid,	employee benefit plans and deferred		pense ac r allowan	
			devoted to position	enter -0-)	compensation			
MI	CHAEL HUEMPFNER	BOZEMAN	PRESIDENT					
52	5 JACK LEG LANE	MT 59715	5.00	<u>o</u>		o		0
CY	NTHIA HUEMPFNER	BOZEMAN	TREASURER/SE					
52	5 JACK LEG LANE	MT 59715	5.00	o		اه		0
					1	ļ		
						1		
2	Compensation of five higher	st-paid employees (other than those include	ed on line 1 – see inst	ructions). If non	e. enter			
_	"NONE."	to para empreyees (earler anali areas merse			.,			
					(d) Contributions to	1		
	(a) Name and address of ear	ch employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit	1 ' '	ense aco	
	(-)		devoted to position	(-, ,	plans and deferred compensation	otnei	r allowan	ces
NO	NP				- <u>-</u>			
NO.	N.E.				İ	l		
						 		
			, ,		L	1.		
		·						
	number of other employees pa							

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3

All other program-related investments. See instructions

Total. Add lines 1 through 3

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P	Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign	gn fo	undations,
	see instructions)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		}
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	0
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c) ,	1d	0
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	0
4	Cash deemed held for charitable activities Enter 1½% of line 3 (for greater amount, see		
	instructions)	4	0
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	0
6	Minimum investment return Enter 5% of line 5	6	0
Pa	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	foun	idations
	and certain foreign organizations, check here ▶ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1_	
2a	Tax on investment income for 2018 from Part VI, line 5		
b	Income tax for 2018 (This does not include the tax from Part VI)		
С	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	
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	0
Pa	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	0
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	I	
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
1	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	0
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	0

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

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Adjusted qualifying distributions Subtract line 5 from line 4

qualifies for the section 4940(e) reduction of tax in those years

P	art XIII Undistributed Income (see instru	uctions)			
	•	(a)	(b)	(c)	(d)
1	Distributable amount for 2018 from Part XI,	Corpus	Years prior to 2017	2017	2018
	line 7				
2	Undistributed income, if any, as of the end of 2018				
а	Enter amount for 2017 only				
b					
3	Excess distributions carryover, if any, to 2018				
а					
b	From 2014				
С	From 2015				
d	From 2016	·			
e	From 2017				
f	Total of lines 3a through e				
4	Qualifying distributions for 2018 from Part XII,				
	line 4 ▶ \$				
а	Applied to 2017, but not more than line 2a				
	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required – see instructions)				
d	Applied to 2018 distributable amount				
	Remaining amount distributed out of corpus				
5	Excess distributions carryover applied to 2018				
	(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:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
þ	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	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				
ď	Subtract line 6c from line 6b Taxable				
	amount – see instructions				
е	Undistributed income for 2017 Subtract line				
	4a from line 2a Taxable amount – see				
	instructions				
f	Undistributed income for 2018 Subtract lines				
	4d and 5 from line 1. This amount must be				O
	distributed in 2019				<u> </u>
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 2013 not				
	applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2019.				
	Subtract lines 7 and 8 from line 6a				
10	Analysis of line 9				
а	Excess from 2014				
b	Excess from 2015				
С	Excess from 2016				
d	Excess from 2017				
e	Excess from 2018		11		000 DE

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

factors
NONE

Part XV Supplementary Information (c	ontinued)			
3' Grants and Contributions Paid During		r Future Payment	,	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
a Paid during the year		1	1	
N/A				
]]	
		-		
:				
			i i	
			1	
		J]	
			ŀ	
]	
			-	
Total		<u> </u>	▶ 3a	
b Approved for future payment				
N/A				
İ				
Total	L		▶ 3b	
· Otal				

Enter gross	amounts unless otherwise indicated	Unrelate	ed business income	Exclude	d by section 512, 513, or 514	(0)
4.5		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
_	service revenue	-		—	<u> </u>	
		-				
ŭ		-	· · · · · · · · · · · · · · · · · · ·	 		
ç		-		 		
f		-		 		
· 	and contracts from accomment accomme	-		 		
	and contracts from government agencies this dues and assessments			 		
	in savings and temporary cash investments	<u> </u>		1		<u> </u>
	s and interest from securities					
	I income or (loss) from real estate					
	financed property			 		<u></u>
	ebt-financed property			 		
	I income or (loss) from personal property			11		
	estment income					
	oss) from sales of assets other than inventory					
	ne or (loss) from special events			i		
	ofit or (loss) from sales of inventory		· · · · · · · · · · · · · · · · · · ·			
	enue a	-				
b						
С						
е		1				
	Add columns (b), (d), and (e)		0		0	0
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Form 990-PF	(2018) FIVE POI	NTS FOUNDATION	T .	83-2759948		Page '
Part XVI	-	garding Transfers To	and Transactions ar	nd Relationships W	ith Noncharitable Ex	empt
4 D.d.th.	Organizations					W 1 N
		directly engage in any of the	-			Yes N
	zations?	tion 501(c)(3) organizations)	or in section 527, relating	to political		
-		dation to a noncharitable exe	empt organization of			
(1) Ca		dation to a nonchantable exe	mpt organization or		1a(1)	X
• •	ner assets				1a(2)	3
, ,	ransactions				10(2)	
	les of assets to a nonchari	table exempt organization			16(1)	K
		oncharitable exempt organiz	ation		1b(2)	K
(3) Re	ntal of facilities, equipmen	t, or other assets			1b(3)	K
(4) Re	imbursement arrangement	ts			1b(4)	X
(5) Loa	ans or loan guarantees				1b(5)	X
(6) Per	formance of services or m	embership or fundraising sol	icitations		16(6)	X
		nailing lists, other assets, or p	· •		1c	X
d If the a	nswer to any of the above	is "Yes," complete the follow	ing schedule Column (b)	should always show the f	aır market	
		or services given by the repo	•			
		g arrangement, show in colur				
(a) Line no	(b) Amount involved	(c) Name of noncharitable ex	empt organization	(d) Description of transfers, to	ransactions, and sharing arrangemen	its
M/A						
		 				
						
		-				
		 				
					<u> </u>	
2a Is the fo	undation directly or indirec	ctly affiliated with, or related to	o, one or more tax-exemp	t organizations		
	` ' '	than section 501(c)(3)) or in	section 527?		Yes	s X No
b If "Yes,"	complete the following sci		·			
37/3	(a) Name of organization	(b) Type of	forganization	(c) Descrip	tion of relationship	
N/A						
						
Unde	r penalties of perjury, I declare the	at I have examined this return, including	ing accompanying schedules and	statements, and to the best of	my knowledge and belief, it is true,	
corre	ct, and complete Declaration of p	reparer (other than taxpayer) is base	ed on all information of which prep	parer has any knowledge	May the IRS discuss this retu	urn
Sign					with the preparer shown belo	οw,
Here .	11/1			11-	See instructions X Y	es No
\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	Mullerla	1 Chances	ah 1/1/15	1/9 PRES	IDENT	
	Signature of officer or trustee	The state of the s	Dake	Title		
Prır	nt/Type preparer's name		Preparer's signature		Date	Check
Paid			1		s	elf-employed
Preparer BEI	NJAMIN F. YONCE,		1 mi June	<u> </u>	11-7-19	
Use Only		L & ASSOCIATES			PTIN P009435	
Firm	n's address ► 3819	STEPHENS AVE S	TE 100		Firm's EIN ▶ 81-0513	444

406-728-8858

MISSOULA, MT

5980<u>1</u>-6853

Schedule B (Form 990, 990-EZ,

or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

2018

Name of the organization

Employer identification number

FIVE POINTS F	OUNDATION	83-2759948				
Organization type (check on	e)					
Filers of:	Section					
Form 990 or 990-EZ	501(c)() (enter number) organization					
	4947(a)(1) nonexempt chantable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	X 501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
	overed by the General Rule or a Special Rule .), (8), or (10) organization can check boxes for both the General Rule and a Special Rule	See				
General Rule						
or more (in money or p	For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions					
Special Rules						
regulations under secti 13, 16a, or 16b, and th	escribed in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ¹ /3% support test or ions 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part lat received from any one contributor, during the year, total contributions of the greater of e amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I	II, line (1)				
contributor, during the literary, or educational	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 crueity to children or animals. Complete Parts I (entering) "N/A" in column (b) instead of the contributor name and address), II, and III					
contributor, during the contributions totaled m during the year for an e	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, chantable, 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, chantable, etc., purpose. Don't 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.					
990-EZ, or 990-PF), but it mus	sn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form t answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990 certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990).	90-EZ or on its				

Name of organization FIVE POINTS FOUNDATION Employer identification number

83-2759948

Part I	Contributors (see instructions). Use dupli	icate copies of Part I if additional space is n	eeded
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MIKE & CYNTHIA HUEMPFNER 525 JACK LEG LANE BOZEMAN MT 5	\$ 3,256,977 9715	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
NO	Name, address, and ZIP + 4	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	ridine, address, and En TT	\$	Person Payroll Noncash (Complete Part II for noncash contributions)

	tributors		City, State, Zip	55 55 55 55 55 55 55 55 55 55 55 55 55	
tements	Line 10 - Substantial Con			BOZEMAN MT 59715	BOZEMAN MT 59715
Federal Statements	Statement 1 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors		Address	LEG LANE	LEG LANE
	Statement 1	Name		ER 525 JACK LEG FP	IEK 525 JACK LEG LANE
83-2759948		~		MICHAEL HUEMPFNER	CINIDIA DOEMFFNE

Form 990-PF, Part XV, Line 2b - Application Format and Required Content Description WRITTEN REQUEST Form 990-PF, Part XV, Line 2c - Submission Deadlines Description NONE Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations Description NONE	83-2759948	Federal Statements
Form 990-PF, Part XV, Line 2c - Submission Deadlines Description NONE Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations Description		rm 990-PF, Part XV, Line 2b - Application Format and Required Contents
Form 990-PF, Part XV, Line 2c - Submission Deadlines Description NONE Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations Description		Description
Description NONE Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations Description	WRITTEN REC	
Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations Description		Form 990-PF, Part XV, Line 2c - Submission Deadlines
Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations Description		Description
Description	NONE	
		Form 990-PF, Part XV, Line 2d - Award Restrictions or Limitations
NONE .		Description
	NONE	

c,