DLN: 93491253007030

OMB No 1545-0052

2019

Return of Private Foundation

Department of the Treasury Internal Revenue Service

Form 990-PF

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 <u>www.irs.gov/Form990PF</u> for instructions and the latest information.

Open to Public Inspection

For	caler	ndar year 2019, or tax year beginning 05-01-20)19 , aı	nd ending 04-30-	2020	
		indation Schuetze Foundation		A Employer ıd	entification numbe	er
		schuetze Foundation Ican State Bank & Trust Co		45-6063398		
		street (or P O box number if mail is not delivered to street address)	Room/suite	B Telephone nu	mber (see instructio	ns)
Р	O Box 1	446		(701) 774-4100	•	,
		n, state or province, country, and ZIP or foreign postal code D 588011446		, ,	application is pendir	g, check here
-	neck al	I that apply Initial return Initial return of a	former public charity	D 1 Foreign or	ganizations, check h	ere
u ci	ieck ai	Final return Amended return	• •		ganizations meeting	▶ ⊔
		Address change Name change			k here and attach co	
H Ch	neck tv	rpe of organization ☑ Section 501(c)(3) exempt private	foundation		undation status was	
_		1 4947(a)(1) nonexempt charitable trust Other taxabl		under sectio	n 507(b)(1)(A), che	k nere - —
			☑ Cash ☐ Accru	ıal F If the founda	ation is in a 60-mont	h termination
		rom Part II, col (c), ▶\$ 845,803 ☐ Other (specify)			n 507(b)(1)(B), che	ck here ▶ Ш
11110	10)	(Part I, column (d) must	be on cash basis)			
Pa	rt I	Analysis of Revenue and Expenses (The total	(a) Revenue and			(d) Disbursements
		of amounts in columns (b), (c), and (d) may not necessarily	expenses per books	(b) Net investment income	(c) Adjusted net income	for charitable purposes
	Ι.	equal the amounts in column (a) (see instructions))	DOOKS			(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	3,101			
	2	Check ► ✓ If the foundation is not required to attach				
	_	Sch B				
	3	Interest on savings and temporary cash investments	4,987			
	4	Dividends and interest from securities	6,445	<u> </u>		
	5a b	Net rental income or (loss) 8,029	9,920	9,920		
<u>e</u>	6a	Net gain or (loss) from sale of assets not on line 10	17,206			
e K	b					
Revenue	7	Gross sales price for all assets on line 6a 498,248 Capital gain net income (from Part IV, line 2)		17,206		
ш	8	Net short-term capital gain		,		
	9	Income modifications				
	10a	Gross sales less returns and allowances				
	ь	Less Cost of goods sold				
	С	Gross profit or (loss) (attach schedule)				
	11	Other income (attach schedule)	6,742	6,742		
	12	Total. Add lines 1 through 11	48,401	45,300		
	13	Compensation of officers, directors, trustees, etc	6,796	2,064		4,732
	14	Other employee salaries and wages				
es	15	Pension plans, employee benefits	44.1			
ens	16a	Legal fees (attach schedule)	5,086			5,086
χ	b	Accounting fees (attach schedule)	2,773			2,773
/e [С	Other professional fees (attach schedule)	215	215		0
atı	17	Interest	00-1 2.717	1 000		_
and Administrative Expenses	18	Taxes (attach schedule) (see instructions)	2,717	1,880		0
Ē	19	Depreciation (attach schedule) and depletion				
Adı	20 21	Occupancy				
nd	22	Printing and publications				
g g	23	Other expenses (attach schedule)	461	11		450
Operating	24	Total operating and administrative expenses.				1
ær		Add lines 13 through 23	18,048	4,170		13,041
Ö	25	Contributions, gifts, grants paid	30,925			30,925
	26	Total expenses and disbursements. Add lines 24 and				
		25	48,973	4,170		43,966
	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and disbursements	-572			
	ь	Net investment income (If negative, enter -0-)		41,130		
	С	Adjusted net income (If negative, enter -0-)				
For	Paper	work Reduction Act Notice, see instructions.		Cat No 11289>	(Fo	rm 990-PF (2019)

54,860

665,090

665.090

665,090

665.090

124,050

9

50,839

681.050

681.050

681,050

681.050

1

2

3

4

5

6

665,090

16,532

681,050

681,050 Form **990-PF** (2019)

-572

0

124,050

270,400

37,045

845,803

Less accumulated depreciation (attach schedule)

Less accumulated depreciation (attach schedule) ▶ _____

Accounts payable and accrued expenses

Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule).

Total liabilities(add lines 17 through 22)

Foundations that do not follow FASB ASC 958, check here 🕨 🗹

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Total net assets or fund balances at beginning of year—Part II, column (a), line 29 (must agree with end-

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 29

Analysis of Changes in Net Assets or Fund Balances

Foundations that follow FASB ASC 958, check here ▶

Capital stock, trust principal, or current funds

Paid-in or capital surplus, or land, bldg, and equipment fund

Total assets (to be completed by all filers—see the

Deferred revenue

and complete lines 24, 25, 29 and 30. Net assets without donor restrictions . . .

Net assets with donor restrictions . . .

and complete lines 26 through 30.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Other increases not included in line 2 (itemize) -

Enter amount from Part I, line 27a

Investments—other (attach schedule)

Land, buildings, and equipment basis ▶ _

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -

Grants payable

12

13

14

15

16

17 18

19 20

21 22

23

24 25

28

30

Part III

2

3

Liabilities

Balances

Fund

ŏ 26

Assets 27

Net 29

	e the kınd(s) of property sold (e g , arehouse, or common stock, 200 shs		How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a Publicly Traded Securitie	s		D DOMESTIC		
b Land Sale			D	1984-01-16	2019-05-30
c Capital Gains Dividends			Р		
d					
e					
(e)	(f)		(g)	(1	h)
Gross sales price	Depreciation allowed		other basis		r (loss)
·	(or allowable)	pius exp	ense of sale	(e) plus (r) minus (g)
	3,426		477,021		-33,595
	5,600		4,021		35,579
	5,222				15,222
d				 	
е					
Complete only for assets	s showing gain in column (h) and ow	i			1)
(i)	(j)		(k) of col (ı)		h) gain minus less than -0-) or
F M V as of 12/31/69	Adjusted basis as of 12/31/69		(1) (1) (1) (1) (1) (1) (1) (1)		om col (h))
a	43 01 12,01,03	070,00	(3)) !! (3)!)	(1)	-33,595
b					35,579
c					15,222
d					
		If gain, also enter in P	Part I line 7		
•	gain or (loss) as defined in sections : rt I, line 8, column (c) (see instructions :		· I	3	17,206
	Jnder Section 4940(e) for Re				
	•			- ,	
If section 4940(d)(2) applies, le	eave this part blank				
	e section 4942 tax on the distributal ot qualify under section 4940(e) Do		•	·	es 🔽 No
1 Enter the appropriate an	nount in each column for each year,	see instructions before	making any entries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitab	ole-use assets	(d) Distribution rati (col (b) divided by c	
2018	39,041		904,013		0 043186
2017	39,819		853,680		0 046644
2016	38,840		770,697		0 050396
2015	38,323		770,655		0 049728
2014	81,560		940,054		0 086761
2 Total of line 1, column (d)		2		0 276715
	for the 5-year base period—divide t		0, or by the		
	ndation has been in existence if less		3		0 055343
	ncharitable-use assets for 2019 from		4		875,400
5 Multiply line 4 by line 3			5		48,447
	ent income (1% of Part I, line 27b)		6		411
7 Add lines 5 and 6			7		48,858
If line 8 is equal to or gre	ions from Part XII, line 4 , . Pater than line 7, check the box in Pa		<u>8</u> nplete that part usin	g a 1% tax rate Se	43,966 e the Part VI
instructions					000 DE (2010)

Par	rt VII-B Statements Regard	ling	Activities for Which	Form 4720 May Be	Required (cont	inuec	1)			
5a	During the year did the foundation p	ay o	r incur any amount to						Yes	No
	(1) Carry on propaganda, or otherw	ise a	ttempt to influence legisl	ation (section 4945(e))?		V	.	_		
	(2) Influence the outcome of any sp	or otherwise attempt to influence legislation (section 4945(e))? Yes No No								
	on directly or indirectly any voter registration drive?									
	(3) Provide a grant to an individual	Provide a grant to an individual for travel, study, or other similar numbers?								
	(4) Provide a grant to an organization	on ot	her than a charitable, etc	, organization described		Yes	N₁	°		
	ın section 4945(d)(4)(A)? See ir	stru	tions			Yes	✓ N	_		
	(5) Provide for any purpose other th	nan r	eligious, charitable, scien	tific, literary, or		165	- IN	١ ١		
	educational purposes, or for the	prev	ention of cruelty to childr	ren or animals?		Yes	✓ N	_		
b	If any answer is "Yes" to $5a(1)$ – (5) ,	dıd a	iny of the transactions fa	ul to qualify under the ex	ceptions described	in	<u> </u>	١ ١		
	Regulations section 53 4945 or in a	curre	nt notice regarding disas	ter assistance? See instr	uctions			5b		No
	Organizations relying on a current n	otice	regarding disaster assist	ance check here		•	П			
C	If the answer is "Yes" to question 5a	ı(4),	does the foundation clain	n exemption from the						
	tax because it maintained expenditu	re re	sponsibility for the grant	·	· ·	Yes	□ N	_ ا		
	If "Yes," attach the statement requir	red b	y Regulations section 53	4945-5(d)	_			"		
6а	Did the foundation, during the year,	rece	ive any funds, directly or	indirectly, to pay premiu	ıms on					
	a personal benefit contract?				. \Box	Vac	✓ N	_		
b	Did the foundation, during the year,	pay	premiums, directly or ind	lirectly, on a personal be	nefit contract?			6b		No
	If "Yes" to 6b, file Form 8870									_
7a	At any time during the tax year, was	s the	foundation a party to a p	prohibited tax shelter tran	nsaction?	Yes	✓ N			
b	If "Yes", did the foundation receive a	any p	roceeds or have any net	income attributable to th	e transaction? .			7b		
В	Is the foundation subject to the sect	ion 4	960 tax on payment(s) o	of more than \$1,000,000	ın remuneratıon oı	r				
	excess parachute payment during th	ne ye	ar [?]		· ·	Yes	✓ N	ຸ 📖		
	Information About C	offic	ers, Directors, Trust	tees, Foundation Ma						
Par	and Contractors			•			-	•		
1	List all officers, directors, trustee	es, fo	oundation managers ar	nd their compensation.	See instructions	•				
			b) Title, and average	(c) Compensation (If	(d) Contributi	ons to		(e) Exper	se acc	ount.
	(a) Name and address		hours per week devoted to position	not paid, enter -0-)	employee benefit deferred compe		and '	other a		
meri	can State Bank	Trust	·	5,896	dererred compe	iisatio	0			
	x 1446	2 00		3,090			Ĭ			U
	con, ND 58801									
aula	Dehner	Advis	or	300			0			0
	x 1446 con, ND 58801	0 10								
	lohnston	Advis	or	300			0			0
	x 1446	0 10	OI .	300			ď			U
	con, ND 58801									
udy F	Romo	Advis	or	300			0			0
	x 1446 con, ND 58801	0 10								
	·	id en	nlovees (other than t	hose included on line 1	—see instruction	s). If	none	. enter "	NONE	,,
_	Tomponoution of the management put		• • •		(d) Contributi			, сс.		
(a) [Name and address of each employee	paid	(b) Title, and average hours per week	(c) Compensation	employee be	nefit		e) Expen		
	more than \$50,000		devoted to position	(c) compensation	plans and det			other all	owance	es
IONE	=				compensat	.1011				
IONE	=									
	1		0.000							
ota	I number of other employees paid over	er \$5	0,000			<u> </u>				0
							I	Form 99 0	0-PF (2019)

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Part VIII Information About Officers, Directors, Trustees, and Contractors (continued)	Foundation Managers, Highly Pa	id Employees,
3 Five highest-paid independent contractors for professional service	es (see instructions). If none, enter	"NONE".
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services		0
Part IX-A Summary of Direct Charitable Activities		·
List the foundation's four largest direct charitable activities during the tax year. Include rele- organizations and other beneficiaries served, conferences convened, research papers produc		of Expenses
1		
2		
3		
4		
Part IX-B Summary of Program-Related Investments (see II	nstructions)	
Describe the two largest program-related investments made by the foundation during th	<u> </u>	Amount
1	,	
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		• 0
		Form 990-PF (2019)

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

Amounts set aside for specific charitable projects that satisfy the

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

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

3

4

5

2

3a 3b

4

5

43.966

43.966

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Page 9

59,479

296l

0

59,183

Form **990-PF** (2019)

Form	990-PF	(201
Pa	rt XII	1

0-PF (20	19)
XIII	Undistributed Income (see instructions

-PF	(20	019)
		_	_

- 1 Distributable amount for 2019 from Part XI, line 7
- 2 Undistributed income, if any, as of the end of 2019 a Enter amount for 2018 only.
- Excess distributions carryover, if any, to 2019
- **b** Total for prior years a From 2014.
- **b** From 2015.

c Treated as distributions out of corpus (Election required—see instructions).

5 Excess distributions carryover applied to 2019

a Corpus Add lines 3f, 4c, and 4e Subtract line 5 **b** Prior years' undistributed income Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed. d Subtract line 6c from line 6b Taxable amount e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020

(If an amount appears in column (d), the

6 Enter the net total of each column as

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 2014 not

9 Excess distributions carryover to 2020.

10 Analysis of line 9 a Excess from 2015. . **b** Excess from 2016. . c Excess from 2017. . . . d Excess from 2018. . . e Excess from 2019. . .

applied on line 5 or line 7 (see instructions) . . .

Subtract lines 7 and 8 from line 6a

indicated below:

d Applied to 2019 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

- c From 2016. . .
- d From 2017.
- e From 2018.
- f Total of lines 3a through e. 4 Qualifying distributions for 2019 from Part
 - XII, line 4 ▶ \$
- a Applied to 2018, but not more than line 2a
- **b** Applied to undistributed income of prior years
 - (Election required—see instructions).

(a)

Corpus

(b)

Years prior to 2018

<u>~</u>

0

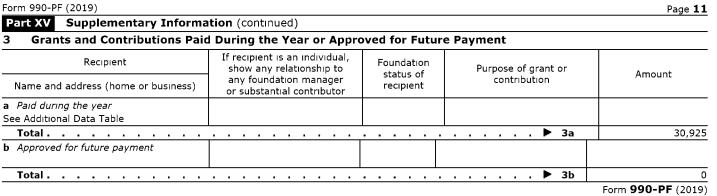
0

(c)

2018

43,670

Benefits Culbertson, MT and area residents



1 Program service revenue	Enter gross amounts unless otherwise indicated	Unrelated b	usiness income	Excluded by sectio	n 512, 513, or 514	(e) Related or exempt
b c d d d d d d d d d d d d d d d d d d	1 Program service revenue					
c d d d d d d d d d d d d d d d d d d d						
d						
g Fees and contracts from government agencies 2 Membership dues and assessments						
g Fees and contracts from government agencies Membership dues and assessments						
2 Membership dues and assessments	f					
3 Interest on savings and temporary cash investments						
Investments						
4 Dividends and interest from securities				14	4,987	
a Debt-financed property	4 Dividends and interest from securities					
b Not debt-financed property						
6 Net rental income or (loss) from personal property 7 Other investment income				16	8 029	
8 Gain or (loss) from sales of assets other than inventory	, , ,			10	5,623	
9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue a b c d e 12 Subtotal Add columns (b), (d), and (e). 13 Total. Add line 12, columns (b), (d), and (e). (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See	7 Other investment income			15	6,742	
9 Net income or (loss) from special events 10 Gross profit or (loss) from sales of inventory 11 Other revenue a b c d e 12 Subtotal Add columns (b), (d), and (e). 13 Total. Add line 12, columns (b), (d), and (e). 143,409 (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See	• •					
10 Gross profit or (loss) from sales of inventory 11 Other revenue a b c d e 12 Subtotal Add columns (b), (d), and (e). 13 Total. Add line 12, columns (b), (d), and (e). 143,409 (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See	·			18	17,206	
11 Other revenue a						
c						
d						
e						
13 Total. Add line 12, columns (b), (d), and (e)						
(See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See	12 Subtotal Add columns (b), (d), and (e)		0		43,409	C
Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See						
Line No. Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes) (See	Total. Add line 12, columns (b), (d), and (e).			1	.3	43,409
	(See worksheet in line 13 instructions to verify calcu	ulations)			.3	43,409
	(See worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities to the line No. Explain below how each activity for which	ulations) he Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contrib	uted importantly to	
	(See worksheet in line 13 instructions to verify calcular to the complete to t	ulations) he Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contrib	uted importantly to	
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	(See worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities to the Line No. Explain below how each activity for which the accomplishment of the foundation's e	ulations) he Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contrib	uted importantly to	
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	(See worksheet in line 13 instructions to verify calcular XVI-B Relationship of Activities to the Line No. Explain below how each activity for which the accomplishment of the foundation's e	ulations) he Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contrib	uted importantly to	
	(See worksheet in line 13 instructions to verify calcular to the control of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation of the founda	ulations) he Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contrib	uted importantly to	
	(See worksheet in line 13 instructions to verify calcular to the control of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain below how each activity for which the accomplishment of the foundation's explain the foundation of the founda	ulations) he Accomplisi income is report	hment of Exem	pt Purposes f Part XVI-A contrib	uted importantly to	

	Information Regarding Transfers To and Transactions and Relationships With Noncharita Exempt Organizations	ble	
Did the organ	pization directly or indirectly engage in any of the following with any other organization described in section E01		$\overline{}$

Pa	rt XVII	Exempt Organi	-	ansic	.15 10 0	ilia ITalisacti	Olis (and Kelation	isinps with No	iiciiaiic	abic		
		ganization directly or in than section 501(c)(3)	directly enga							on 501		Yes	No
а Т	ransfers f	rom the reporting foun	dation to a ne	, onchari	table exe	empt organizatio	n of	-		ŀ			
(1) Cash.									.	1a(1)		No
(2) Other	assets								. [1a(2)		No
b 0	ther trans	sactions								[
(1) Sales	of assets to a nonchar	table exempt	t organı	ızatıon.					[1 b(1)		No
(2) Purch	ases of assets from a r	oncharitable	exemp	t organız	ation				[1b(2)		No
(3) Renta	il of facilities, equipmer	nt, or other as	ssets.						[1b(3)		No
(4	4) Reimb	oursement arrangemen	ts							. [1b(4)		No
(5) Loans	or loan guarantees.								.	1b(5)		No
(6) Perfori	mance of services or m	embership or	fundra	using soli	icitations				.	1b(6)		No
	-	facilities, equipment, r			-					. [1 c		No
01	f the good	ver to any of the above ds, other assets, or ser ssaction or sharing arra	vices given b	y the re	eporting 1	foundation If the	e four	ndation received	d less than fair mar	rket value			
"	i aliy ti ali	isaction of snaring arra	ngement, sit	JW III CC	Jianini (a	i) the value of th	ie god	ous, other asset	s, or services recei	iveu			
(a) Li	ne No	(b) Amount involved	(c) Name of	nonchari	itable exer	mpt organization	(0	d) Description of t	ransfers, transactions	, and shar	ng arra	ngemen	ts
		idation directly or indire	•			·				_			
		in section 501(c) (other		1 501(c))(3)) or ı	n section 527? .	•		LIY	'es ⊻	No		
b If	"Yes," co	omplete the following s											
		(a) Name of organization	on	+	(E) Type of organiza	tion		(c) Description	n of relation	nship		
	of m	er penalties of perjury, y knowledge and belief	, it is true, co										
Sig	n ,	h preparer has any kno *****	wiedge		2020-09-08				e IRS dı	scuss th	iis		
Her	.e							_			e prepa	rer show	vn
	 	Signature of officer or t	rustee			Date		Title		below		a –	.
										(see in	str) 🗹	Yes [No
		Print/Type preparer's	name	Prepar	er's Sign	nature	Da	ate		PTIN			
									Check if self-		200484	1560	
		Kım Hunwardsen O	PA					2020-09-04	employed ▶ ☐		0010	1500	
Pai													
	parer		Bailly LLP				•			Fırm's EI	N ▶45	-02509	58
JSE	Only		O Nicollat Ma	II C+^ 1	300								
		Firm's address ► 80	0 Nicollet Ma	ıı ste 1	300					Dh a		\ 252 -	
		Mı	nneapolis, M i	N 5540	27033					Phone no	(612) 253-6	5500
		1											

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

Abigail AtorPO Box 102	None	Т	Scholarship	1.025
a Paid during the year				
,	or substantial contributor			

Medicine Lake, MT 59247	None	1	Scholarship	
Alicia Lagerguist225 Jefferson Rd	None	I	Scholarship	

Total .

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

Alicia Lagerquist225 Jefferson Rd None I Scholarship Westby, MT 59275	:

Westby, MT 59275	None	1	Scholarship	1,025
Ally Bummer4099 Road 2030	None	I	Scholarship	1,025

Scholarship	1,025
	Scholarship

	i			
Ally Bummer4099 Road 2030	None	I	Scholarship	1,02
Reserve, MT 59258				·

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
Alyssa Hurst329 N Main St Plentywood, MT 59254	None	I	Scholarship	900

Plentywood, MT 59254				
Ashtyn AtorPO Box 102 Medicine Lake, MT 59247	None	I	Scholarship	

Total .

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

Aubarr Diseard 40.44 Dd 40.00	NI	-	Calcalanatan	000
Medicine Lake, MT 59247			·	
Ashtyn AtorPO Box 102	None	I	Scholarship	900

Medicine Lake, MT 59247				
	None	I	Scholarship	900
I B 11 MT 50040		I	'	1

icaleme Lake/111 33217				
ubrey Pıcard4944 Rd 1006	None	I	Scholarship	90
annulla MT FOO10				

Aubrey Picard4944 Rd 1006	None	I	Scholarship	9
Rainville MT 50212				ı

Recipient Foundation Purpose of grant or If recipient is an individual, Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
Baily Christoffersen4304 Highway 16	None	I	Scholarship	

Froid, MT 59226	None	1	Scholarship	
Bonny Krogedal5144 Hwy 405 N	None	I	Scholarship	

Bonny Krogedal5144 Hwy 405 N Baınvılle, MT 59212	None	I	Scholarship	1

Total.

Bonny Krogedal5144 Hwy 405 N Bainville, MT 59212	None	I	Scholarship	1,025
Brenna Osksa124 Lamıgra Rd	None	I	Scholarship	1,025

Salitylile, MT 39212				
Brenna Osksa124 Lamigra Rd	None	I	Scholarship	1,02

1.025

Brenna Osksa124 Lamıgra Rd	None	I	Scholarship	1,025
Plentywood, MT 59254				

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

, ,	or substantial contributor			
a Paid during the year				
Bryce Osksa124 Lamigra Rd	None	I	Scholarship	1,025

Plentywood, MT 59254	Hone	_	Scholarship	1
Carson Ulmer4349 Road 1007	None	I	Scholarship	

Total .

Carson Ulmer4349 Road 1007 Froid, MT 59226	None	I	Scholarship	900

Froid, MT 59226	None	1	Scholarship	900
Clayton MarchwickPO Box 686	None	I	Scholarship	900

Froid, M1 59226				
Clayton MarchwickPO Box 686	None	I	Scholarship	900

Clayton MarchwickPO Box 686	None	I	Scholarship	90
Culbertson, MT 59218				i

Recipient If recipient is an individual, Purpose of grant or Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
Culbertson MuseumPO Box 95 Culbertson, MT 59218	N/A	PC	General Operations	900

Culbertson, Pri 39210				
Daulton HolecekPO Box 63 Westby, MT 59275	None	I	Scholarship	1,025
				1

Westby, MT 59275	None	1	Scholarship	1,023
Gabriel Granada31797 County Rd 148	None	I	Scholarship	900

Westby, PH 39273				
Gabriel Granada31797 County Rd 148	None	I	Scholarship	900
Brockton, MT 59213				

30,925

Gabriel Granada31797 County Rd 148	None	I	Scholarship	g
Brockton, MT 59213				

Total.

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor

a Paid during the year				
Hannah BawdenPO Box 708 Culbertson, MT 59218	None	I	Scholarship	1,025

Culbertson, MT 59218				· ·
Jacob CrowderPO Box 506 Culbertson, MT 59218	None	I	Scholarship	900

Jacob CrowderPO Box 506 Culbertson, MT 59218	None		Scholarship	900
Jacob Martin1170 Rosa Way Unit H	None	I	Scholarship	1,025

Culbertson, MT 59218				
Jacob Martin1170 Rosa Way Unit H	None	I	Scholarship	1,02
I B 14T F0740		l		

Total .

Culbertson, Pri 33210				
Jacob Martin1170 Rosa Way Unit H	None	I	Scholarship	1,0
Bozeman, MT 59718				

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to contribution status of any foundation manager recipient

a Paid during the year				
James Simon302 West 1st Ave	None	I	Scholarship	1.025

Plentywood, MT 59254	None	Ī	Scholarship	1.
Jaxon Pedersen618 E 3rd Ave	None	I	Scholarship	1

	FlentyWood, MT 39234				
ı	Jaxon Pedersen618 E 3rd Ave Plentywood, MT 59254	None	I	Scholarship	

Total .

lay Voder71	1 Fact Spring Crook Pd	None	T _T	Scholarchin	ann
Jaxon Peder Plentywood,	rsen618 E 3rd Ave , MT 59254	None	I	Scholarship	1,025

Plentywood, MT 59254				
Jay Yoder71 East Spring Creek Rd	None	I	Scholarship	900

Jay Yoder71 East Spring Creek Rd	None	I	Scholarship	
Paymond MT 50256				

Jay Yoder71 East Spring Creek Rd	None	I	Scholarship	
Raymond MT 59256				

y roder/1 cast Spring Creek Rd	None	<u>1</u>	Scholarship	
aymond, MT 59256				

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

I	1 B+202 Character d Ch	N	-	Calcalanalana	000
I	a Paid during the year				
l	Name and address (nome or business)	or substantial contributor	·		

Jenna Rust203 Stromstad St Alkabo, ND 58845	None	I	Scholarship	900
Joseph BawdenPO Box 708	None	I	Scholarship	1,025

Joseph BawdenPO Box 708 Culbertson, MT 59218	None	I	Scholarship	1,0

Culbertson, MT 59218	None	*	Scholarship	1,02.
Kacie Wacker143 Muddy Loop	None	I	Scholarship	1.02!

Culbertson, Pri 39210				<u> </u>
Kacıe Wacker143 Muddy Loop	None	I	Scholarship	1,02

Cacle Wacker143 Muddy Loop	None	I	Scholarship	1.02
lentywood MT 59254		-		_,-

Kacie Wacker143 Muddy Loop	None	I	Scholarship	1
Plentywood, MT 59254				

lentywood, MT 59254		

Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

	or substantial contributor			
a Paid during the year				
Kalı Edge88 N Westby Rd	None	I	Scholarship	900

Westby, MT 59275			·	
Kelsie Williams623 3rd Ave E Culbertson, MT 59218	None	I	Scholarship	900

Kelsie Williams623 3rd Ave E Culbertson, MT 59218	None	I	Scholarship	900
Kiylee Kellis1102 5th Ave W	None	Ī	Scholarshin	900

Culbertson, MT 59216				
Kiylee Kellis1102 5th Ave W	None	I	Scholarship	900

Kıylee Kellıs1102 5th Ave W	None	I	Scholarship	g
Williston, ND 58801			•	

Total .

I VIEE KEIIISTTOZ JUI AVE W	None	<u>-</u>	Cholarship	
/illiston, ND 58801				

Recipient Purpose of grant or If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

Name and address (nome or business)	or substantial contributor	·	
a Paid during the year			

Lucas OelkersPO Box 742 Culbertson, MT 59218	None	I	Scholarship	1,025
Mason Morgan113 1st Ave	None	I	Scholarship	1,025

ason Morgan113 1st Ave ornestead, MT 59242	None	I	Scholarship

Total .

		_		
Mason Morgan113 1st Ave Hornestead, MT 59242	None	I	Scholarship	:

Hornestead, MT 59242	Thomas and the second s	•	Silolalomp	1,020
Owen Nelson883 N Dagmar Rd	None	I	Scholarship	900

1101110510447111 53212				
Owen Nelson883 N Dagmar Rd	None	I	Scholarship	900
Wasthy MT FOOTE		1		

Owen Nelson883 N Dagmar Rd	None	Ι	Scholarship	90
Westby, MT 59275				

Purpose of grant or Recipient If recipient is an individual, Foundation Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business)

	or substantial contributor			
a Paid during the year				
Payton HaugePO Box 852	None	I	Scholarship	900

1	Banna CalkaraDO Bay 743	Nama	т	Cahalarahin	
	Culbertson, MT 59218	None	1	Scholarship	

04156145011,111 55216				
Renne OelkersPO Box 742	None	I	Scholarship	1,
Culhertson MT 59218		I		

Renne OelkersPO Box 742	None	I	Scholarship	1,025
Culbertson, MT 59218				

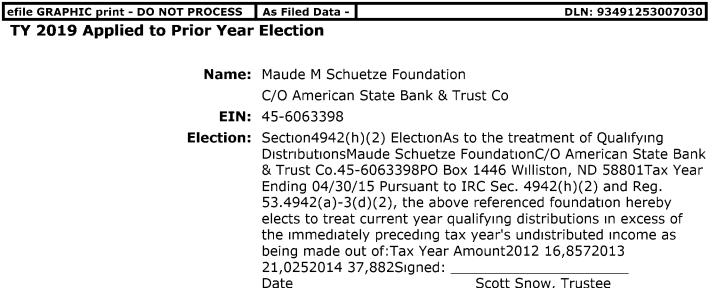
Renne DeikersPO Box 742	ivone	1	Scholarship	i ±,
Culbertson, MT 59218				

efile GRAPHIC print - DO NOT PI	ROCESS	As Filed Data	-	DI	N: 93491253007030		
TY 2019 Accounting Fees Schedule							
	Name: Maude M Schuetze Foundation						
		C/O America	n State Bank &	Trust Co			
	EIN:	45-6063398					
Category	Amo	ount No	et Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

2,773

2,773

Accounting



efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491253007030				
TY 2019 Investments Corporate Bonds Schedule						

Name: Maude M Schuetze Foundation

C/O American State Bank & Trust Co

EIN: 45-6063398

Investments Corporate Bonds Schedule					
Name of Bond	End of Year Book Value	End of Year Fair Market Value			
Dodge & Cox Income Fund Common	6,735	6,947			
Federated Instl Tr Federated Short Inter Totalreturn Bd Fund Instl Shs	4	4			
Fidelity Advisor Total Bond Fund CLASS Z	6,718	6,891			
JP Morgan Core Bond Fund CLASS R6	6,747	6,820			
Vanguard Core Bond Fund CLASS Admıral Mf	6,689	6,820			
Western Asset Core Plus Bond Fund CLASS Is Mf	6 798	6 943			

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491253007030

TY 2019 Investments Corporate Stock Schedule

Name: Maude M Schuetze Foundation

C/O American State Bank & Trust Co

EIN: 45-6063398

Investments Corporation Stock Schedule		
Name of Stock	End of Year Book Value	End of Year Fair Market Value
American Funds Mutual Fund CLASS F-2 MF	37,325	40,294
Dodge & Cox Funds Intl Stk Fund	18,976	19,457
Fidelity Contrafund Contra Mf	24,248	27,645
Fidelity Low Price Stock Priced Mf	9,954	10,300
Fidelity Small Cap Growth Fund CLASS Z Mf	17,600	19,379
Harbor Fund Cap Appreciation Fund Instl Class	25,664	28,558
Harbor Small Cap Value Fund CLASS Retrmnt MF	10,011	10,555
T Rowe Price Diversified Mid-Cap Growth Fund T Div Mid Cap	13,873	15,941
Vanguard Index Funds 500 Index Fund Admıral	24,334	31,711
JP Morgan Emrgng Mkts Eqt R6 Mf	13,200	14,553
JP Morgan Equity Income Fund Eqy CLASS R6 Mf	36,562	41,006
JP Morgan Small Cap Growth Fund	8,800	10,872
Vanguard Total International Stock Index Fund	17,600	19,339

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DL	N: 93491253007030	
TY 2019 Legal Fees Schedu	le	_			
Name: Maude M Schuetze Foundation					
	C/O American State Bank & Trust Co				
EI	IN: 45-6063398				
				1	
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
Legal Fees	5,086	0		5,086	

enie diafriic print - Do Not Frocess	AS I lica bata	DEN: 35431233007030
TY 2019 Other Assets Schedul	e	
Name	Maude M Schuetze Foundatı	on

Mineral Interests

	EIN: 45-6063398	
Other Assets Schedule		

	EIN:	45-6063398	3	
Other Assets Schedule				

C/O American State Bank & Trust Co

DIN: 02/01252007020

124,050

Book Value

End of Year - Book Value

124,050

End of Year - Fair Market Value

37,045

Description

efile CPAPHIC print - DO NOT PPOCESS | As Filed Data -

Beginning of Year -

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491253007030		
TY 2019 Other Expenses Schedule						
Name:	Name: Maude M Schuetze Foundation					
	C/O American State Bank & Trust Co					
EIN:	1: 45-6063398					
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		
Appraisal Fee	450	0		450		
Insurance	11	11		0		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491253007030
TY 2019 Other Income Schedul	e	
Name . A	Anida M Cabiata	Farradation

Name: Maude M Schuetze Foundation C/O American State Bank & Trust Co

EIN: 45-6063398

O	Other Income Schedule					
	Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income		
	Oil Royalties, Net	6,742	6,742	6,742		

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN: 93491253007030			
TY 2019 Other Increases Schedule						
Name:	Maude M Schu	etze Foundation				
	C/O American	State Bank & Trust Co				
EIN:	45-6063398					
De	escription		Amount			
Return of PY Scholarship			1,100			
Reimbursement of PY Exp			15,432			

efile GRAPHIC print - DO NOT PROCESS	S As Filed Data	- [DLN	N: 93491253007030		
TY 2019 Other Professional Fees Schedule						
Nam	Name: Maude M Schuetze Foundation					
C/O American State Bank & Trust Co						
EIN: 45-6063398						
Category Amount Net Investment Adjusted Net Disbursements						
		Income	Income	for Charitable Purposes		

Broker fees

efile GRAPHIC print - DO NOT PROCES	S As Filed Data	-	DLI	N: 93491253007030			
TY 2019 Taxes Schedule							
Name: Maude M Schuetze Foundation							
C/O American State Bank & Trust Co							
EIN: 45-6063398							
Category Amount Net Investment Adjusted Income Income				Disbursements for Charitable Purposes			
Tax Expense, Net Refund	837	0		0			
Real Estate Taxes	1,880	1,880		0			
Near Estate Taxes	1,000	1,000					