

**Return of Private Foundation**

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

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**2021**

Open to Public Inspection

Form **990-PF**

Department of the Treasury  
Internal Revenue Service

For calendar year 2021 or tax year beginning \_\_\_\_\_, and ending \_\_\_\_\_

Name of foundation <b>OP &amp; WE EDWARDS FOUNDATION INC</b>		<b>A Employer identification number</b> 13-6100965
Number and street (or P.O. box number if mail is not delivered to street address) <b>PO BOX 2445</b>	Room/suite	<b>B Telephone number</b> 406-425-5243
City or town, state or province, country, and ZIP or foreign postal code <b>RED LODGE, MT 59068-2445</b>		<b>C</b> If exemption application is pending, check here <input type="checkbox"/>
<b>G</b> Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		<b>D 1.</b> Foreign organizations, check here <input type="checkbox"/> <b>2.</b> Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>
<b>H</b> Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		<b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>
<b>I</b> Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ <b>22,883,442.</b>	<b>J</b> Accounting method: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____	<b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>

<b>Part I Analysis of Revenue and Expenses</b> <small>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)</small>	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
<b>1</b> Contributions, gifts, grants, etc., received	250,000.		N/A	
<b>2</b> Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
<b>3</b> Interest on savings and temporary cash investments	2,489.	2,489.		STATEMENT 1
<b>4</b> Dividends and interest from securities	390,434.	390,434.		STATEMENT 2
<b>5a</b> Gross rents				
<b>b</b> Net rental income or (loss)				
<b>6a</b> Net gain or (loss) from sale of assets not on line 10	648,141.			
<b>b</b> Gross sales price for all assets on line 6a	648,141.			
<b>7</b> Capital gain net income (from Part IV, line 2)		648,141.		
<b>8</b> Net short-term capital gain				
<b>9</b> Income modifications				
<b>10a</b> Gross sales less returns and allowances				
<b>b</b> Less: Cost of goods sold				
<b>c</b> Gross profit or (loss)				
<b>11</b> Other income	1,669,190.	273,200.		STATEMENT 3
<b>12 Total.</b> Add lines 1 through 11	2,960,254.	1,314,264.		
<b>13</b> Compensation of officers, directors, trustees, etc.	0.	0.		0.
<b>14</b> Other employee salaries and wages	70,718.	35,359.		35,359.
<b>15</b> Pension plans, employee benefits	17,517.	8,758.		8,759.
<b>16a</b> Legal fees				
<b>b</b> Accounting fees <b>STMT 4</b>	13,930.	6,965.		6,965.
<b>c</b> Other professional fees				
<b>17</b> Interest				
<b>18</b> Taxes <b>STMT 5</b>	16,066.	0.		0.
<b>19</b> Depreciation and depletion	373,504.	340.		
<b>20</b> Occupancy	10,564.	5,282.		5,282.
<b>21</b> Travel, conferences, and meetings	1,803.	901.		902.
<b>22</b> Printing and publications				
<b>23</b> Other expenses <b>STMT 6</b>	49,668.	43,308.		6,360.
<b>24 Total operating and administrative expenses.</b> Add lines 13 through 23	553,770.	100,913.		63,627.
<b>25</b> Contributions, gifts, grants paid	1,535,739.			1,535,739.
<b>26 Total expenses and disbursements.</b> Add lines 24 and 25	2,089,509.	100,913.		1,599,366.
<b>27</b> Subtract line 26 from line 12:				
<b>a</b> Excess of revenue over expenses and disbursements	870,745.			
<b>b Net investment income</b> (if negative, enter -0-)		1,213,351.		
<b>c Adjusted net income</b> (if negative, enter -0-)			N/A	

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only.			
		Beginning of year	End of year		
		(a) Book Value	(b) Book Value	(c) Fair Market Value	
Assets	1	Cash - non-interest-bearing .....			
	2	Savings and temporary cash investments .....	1,850,749.	2,151,015.	2,151,015.
	3	Accounts receivable ▶ .....			
		Less: allowance for doubtful accounts ▶ .....			
	4	Pledges receivable ▶ .....			
		Less: allowance for doubtful accounts ▶ .....			
	5	Grants receivable .....			
	6	Receivables due from officers, directors, trustees, and other disqualified persons .....			
	7	Other notes and loans receivable ▶ .....			
		Less: allowance for doubtful accounts ▶ .....			
	8	Inventories for sale or use .....			
	9	Prepaid expenses and deferred charges .....	5,542.		
	10a	Investments - U.S. and state government obligations .....			
	b	Investments - corporate stock .....	3,175,779.	2,970,851.	1,130,566.
	c	Investments - corporate bonds .....			
	11	Investments - land, buildings, and equipment: basis ▶ .....			
	Less: accumulated depreciation ▶ .....				
12	Investments - mortgage loans .....				
13	Investments - other .....	13,925,467.	14,732,769.	19,099,852.	
14	Land, buildings, and equipment: basis ▶ .....	30,125.			
	Less: accumulated depreciation ▶ .....	29,304.	2,134.	821.	
15	Other assets (describe ▶ .....	517,092.	501,188.	501,188.	
16	<b>Total assets</b> (to be completed by all filers - see the instructions. Also, see page 1, item I) .....	19,476,763.	20,356,644.	22,883,442.	
Liabilities	17	Accounts payable and accrued expenses .....	3,497.	12,633.	
	18	Grants payable .....			
	19	Deferred revenue .....			
	20	Loans from officers, directors, trustees, and other disqualified persons .....			
	21	Mortgages and other notes payable .....			
	22	Other liabilities (describe ▶ .....			
23	<b>Total liabilities</b> (add lines 17 through 22) .....	3,497.	12,633.		
Net Assets or Fund Balances	Foundations that follow FASB ASC 958, check here ▶ <input type="checkbox"/> and complete lines 24, 25, 29, and 30.				
	24	Net assets without donor restrictions .....			
	25	Net assets with donor restrictions .....			
	Foundations that do not follow FASB ASC 958, check here ▶ <input checked="" type="checkbox"/> and complete lines 26 through 30.				
	26	Capital stock, trust principal, or current funds .....	9,412,000.	9,412,000.	
	27	Paid-in or capital surplus, or land, bldg., and equipment fund .....	0.	0.	
	28	Retained earnings, accumulated income, endowment, or other funds .....	10,061,266.	10,932,011.	
29	<b>Total net assets or fund balances</b> .....	19,473,266.	20,344,011.		
30	<b>Total liabilities and net assets/fund balances</b> .....	19,476,763.	20,356,644.		

**Part III Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 29 (must agree with end-of-year figure reported on prior year's return) .....	1	19,473,266.
2	Enter amount from Part I, line 27a .....	2	870,745.
3	Other increases not included in line 2 (itemize) ▶ .....	3	0.
4	Add lines 1, 2, and 3 .....	4	20,344,011.
5	Decreases not included in line 2 (itemize) ▶ .....	5	0.
6	<b>Total net assets or fund balances at end of year</b> (line 4 minus line 5) - Part II, column (b), line 29 .....	6	20,344,011.

Form 990-PF (2021)

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)	
1a	CL&F RESOURCES L.P. ID #76-0690190	P			
b	CL&F RESOURCES L.P. ID #76-0690190	P			
c	DOMINI	P			
d	COOPERATIVE ASST FUND	P			
<b>e CAPITAL GAINS DIVIDENDS</b>					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) ((e) plus (f) minus (g))		
a	82,602.		82,602.		
b	392,236.		392,236.		
c	81,404.		81,404.		
d	53,380.		53,380.		
e	38,519.		38,519.		
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69.					
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	(l) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))		
a			82,602.		
b			392,236.		
c			81,404.		
d			53,380.		
e			38,519.		
2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 ..... }		2	648,141.
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6): If gain, also enter in Part I, line 8, column (c). See instructions. If (loss), enter -0- in Part I, line 8 .....	{ ..... }		3	N/A

**Part V Excise Tax Based on Investment Income (Section 4940(a), 4940(b), or 4948 - see instructions)**

1a	Exempt operating foundations described in section 4940(d)(2), check here <input type="checkbox"/> and enter "N/A" on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instructions)	1	16,866.
b	All other domestic foundations enter 1.39% (0.0139) of line 27b. Exempt foreign organizations, enter 4% (0.04) of Part I, line 12, col. (b) .....		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .....	2	0.
3	Add lines 1 and 2 .....	3	16,866.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-) .....	4	0.
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3. If zero or less, enter -0- .....	5	16,866.
<b>6 Credits/Payments:</b>			
a	2021 estimated tax payments and 2020 overpayment credited to 2021 .....	6a	8,000.
b	Exempt foreign organizations - tax withheld at source .....	6b	0.
c	Tax paid with application for extension of time to file (Form 8868) .....	6c	0.
d	Backup withholding erroneously withheld .....	6d	0.
7	Total credits and payments. Add lines 6a through 6d .....	7	8,000.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here <input checked="" type="checkbox"/> if Form 2220 is attached .....	8	193.
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than 7, enter <b>amount owed</b> <b>SEE STATEMENT 11</b> ▶	9	9,059.
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> ▶	10	
11	Enter the amount of line 10 to be: <b>Credited to 2022 estimated tax</b> ▶ <b>Refunded</b> ▶	11	

**Part VI-A Statements Regarding Activities**

	Yes	No
<b>1a</b> During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? .....		X
<b>1b</b> Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition ..... If the answer is "Yes" to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
<b>1c</b> Did the foundation file <b>Form 1120-POL</b> for this year? .....		X
<b>d</b> Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation. ▶ \$ <u>0.</u> (2) On foundation managers. ▶ \$ <u>0.</u>		
<b>e</b> Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. ▶ \$ <u>0.</u>		
<b>2</b> Has the foundation engaged in any activities that have not previously been reported to the IRS? .....		X
If "Yes," attach a detailed description of the activities.		
<b>3</b> Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes .....		X
<b>4a</b> Did the foundation have unrelated business gross income of \$1,000 or more during the year? .....	X	
<b>4b</b> If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? .....	X	
<b>5</b> Was there a liquidation, termination, dissolution, or substantial contraction during the year? .....		X
If "Yes," attach the statement required by <i>General Instruction T</i> .		
<b>6</b> Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? .....	X	
<b>7</b> 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 XIV .....	X	
<b>8a</b> Enter the states to which the foundation reports or with which it is registered. See instructions. ▶ <u>NY</u>		
<b>b</b> If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by <i>General Instruction G</i> ? If "No," attach explanation .....	X	
<b>9</b> Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2021 or the tax year beginning in 2021? See the instructions for Part XIII. If "Yes," complete Part XIII .....		X
<b>10</b> Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses .....		X
<b>11</b> 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 .....		X
<b>12</b> 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 .....		X
<b>13</b> Did the foundation comply with the public inspection requirements for its annual returns and exemption application? .....	X	
Website address ▶ <u>OPWEEDWARDS.ORG</u>		
<b>14</b> The books are in care of ▶ <u>THE ORGANIZATION</u> Telephone no. ▶ <u>406-425-5243</u> Located at ▶ <u>PO BOX 2445, RED LODGE, MT</u> ZIP+4 ▶ <u>59068-2445</u>		
<b>15</b> Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> - check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year .....	15	N/A
<b>16</b> At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? .....		X
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country ▶		

**Part VI-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
<b>1a</b> 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? .....	1a(1)	X
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? .....	1a(2)	X
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? .....	1a(3)	X
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? .....	1a(4)	X
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? .....		
(6) Agree to pay money or property to a government official? ( <b>Exception.</b> 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.) .....	1a(5)	X
	1a(6)	X
<b>b</b> If any answer is "Yes" to 1a(1)-(6), did <b>any</b> 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	X
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here .....		
<b>d</b> 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 2021? .....	1d	X
<b>2</b> 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)):		
<b>a</b> At the end of tax year 2021, did the foundation have any undistributed income (Part XII, lines 6d and 6e) for tax year(s) beginning before 2021? .....	2a	X
If "Yes," list the years ► _____, _____, _____, _____		
<b>b</b> Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer "No" and attach statement - see instructions.) .....	2b	N/A
<b>c</b> If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here. ► _____, _____, _____, _____		
<b>3a</b> Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? .....	3a	X
<b>b</b> If "Yes," did it have excess business holdings in 2021 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 Form 4720, Schedule C, to determine if the foundation had excess business holdings in 2021.) .....	3b	X
<b>4a</b> Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? .....	4a	X
<b>b</b> Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2021? .....	4b	X

Form 990-PF (2021)

**Part VI-B** Statements Regarding Activities for Which Form 4720 May Be Required (continued)

	Yes	No
<b>5a</b> During the year, did the foundation pay or incur any amount to:		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?		X
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, any voter registration drive?		X
(3) Provide a grant to an individual for travel, study, or other similar purposes?		X
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions	X	
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?		X
<b>b</b> If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions	X	
<b>c</b> Organizations relying on a current notice regarding disaster assistance, check here <input type="checkbox"/>		
<b>d</b> If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945-5(d).		X
<b>6a</b> Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.		X
<b>7a</b> At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?		X
<b>b</b> If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? N/A		
<b>8</b> Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?		X

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

**1** List all officers, directors, trustees, and foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (if not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 14		0.	0.	0.

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

(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
AMY A HYFIELD PO BOX 2445, RED LODGE, MT 59068	EXECUTIVE DIRECTOR 40.00	69,028.	2,071.	0.

**Total** number of other employees paid over \$50,000 0

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

**3** Five highest-paid independent contractors for professional services. 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 VIII-A** Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
4	

**Part VIII-B** Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.	Amount
1 N/A	
2	
3 All other program-related investments. See instructions.	

Total. Add lines 1 through 3 ▶ 0.

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

1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:			
a	Average monthly fair market value of securities .....	1a	1,096,311.
b	Average of monthly cash balances .....	1b	1,954,649.
c	Fair market value of all other assets (see instructions) .....	1c	19,061,358.
d	<b>Total</b> (add lines 1a, b, and c) .....	1d	22,112,318.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) .....	1e	0.
2	Acquisition indebtedness applicable to line 1 assets .....	2	0.
3	Subtract line 2 from line 1d .....	3	22,112,318.
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for greater amount, see instructions) .....	4	331,685.
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 .....	5	21,780,633.
6	<b>Minimum investment return.</b> Enter 5% (0.05) of line 5 .....	6	1,089,032.

**Part X Distributable Amount** (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations, check here  and do not complete this part.)

1	Minimum investment return from Part IX, line 6 .....	1	1,089,032.
2a	Tax on investment income for 2021 from Part V, line 5 .....	2a	16,866.
b	Income tax for 2021. (This does not include the tax from Part V.) .....	2b	
c	Add lines 2a and 2b .....	2c	16,866.
3	Distributable amount before adjustments. Subtract line 2c from line 1 .....	3	1,072,166.
4	Recoveries of amounts treated as qualifying distributions .....	4	15,904.
5	Add lines 3 and 4 .....	5	1,088,070.
6	Deduction from distributable amount (see instructions) .....	6	0.
7	<b>Distributable amount</b> as adjusted. Subtract line 6 from line 5. Enter here and on Part XII, line 1 .....	7	1,088,070.

**Part XI Qualifying Distributions** (see instructions)

1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 .....	1a	1,599,366.
b	Program-related investments - total from Part VIII-B .....	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes .....	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required) .....	3a	
b	Cash distribution test (attach the required schedule) .....	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b. Enter here and on Part XII, line 4 .....	4	1,599,366.

Form 990-PF (2021)



**Part XII Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2020	(c) 2020	(d) 2021
1 Distributable amount for 2021 from Part X, line 7				1,088,070.
2 Undistributed income, if any, as of the end of 2021:				
a Enter amount for 2020 only			0.	
b Total for prior years:		0.		
3 Excess distributions carryover, if any, to 2021:				
a From 2016	1,124,322.			
b From 2017	136,639.			
c From 2018	1,014,281.			
d From 2019	983,673.			
e From 2020	714,598.			
f Total of lines 3a through e	3,973,513.			
4 Qualifying distributions for 2021 from Part XI, line 4: ▶ \$	1,599,366.			
a Applied to 2020, but not more than line 2a			0.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2021 distributable amount				1,088,070.
e Remaining amount distributed out of corpus	511,296.			
5 Excess distributions carryover applied to 2021 (If an amount appears in column (d), the same amount must be shown in column (a).)	0.			0.
6 Enter the net total of each column as indicated below:	4,484,809.			
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5				
b Prior years' undistributed income. Subtract line 4b from line 2b		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 2020. Subtract line 4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2021. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2022				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2016 not applied on line 5 or line 7	1,124,322.			
9 Excess distributions carryover to 2022. Subtract lines 7 and 8 from line 6a	3,360,487.			
10 Analysis of line 9:				
a Excess from 2017	136,639.			
b Excess from 2018	1,014,281.			
c Excess from 2019	983,673.			
d Excess from 2020	714,598.			
e Excess from 2021	511,296.			

**Part XIII Private Operating Foundations** (see instructions and Part VI-A, question 9) N/A

<p><b>1 a</b> If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2021, enter the date of the ruling <span style="float: right;">▶</span></p> <p><b>b</b> Check box to indicate whether the foundation is a private operating foundation described in section <span style="float: right;"><input type="checkbox"/> 4942(j)(3) or <input type="checkbox"/> 4942(j)(5)</span></p> <p><b>2 a</b> Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part IX for each year listed</p> <p><b>b</b> 85% (0.85) of line 2a</p> <p><b>c</b> Qualifying distributions from Part XI, line 4, for each year listed</p> <p><b>d</b> Amounts included in line 2c not used directly for active conduct of exempt activities</p> <p><b>e</b> Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c</p> <p><b>3</b> Complete 3a, b, or c for the alternative test relied upon:</p> <p><b>a</b> "Assets" alternative test - enter:</p> <p>(1) Value of all assets</p> <p>(2) Value of assets qualifying under section 4942(j)(3)(B)(i)</p> <p><b>b</b> "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed</p> <p><b>c</b> "Support" alternative test - enter:</p> <p>(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)</p> <p>(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)</p> <p>(3) Largest amount of support from an exempt organization</p> <p>(4) Gross investment income</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;">Tax year</th> <th colspan="3" style="text-align: center;">Prior 3 years</th> <th rowspan="2" style="text-align: center;">(e) Total</th> </tr> <tr> <th style="text-align: center;">(a) 2021</th> <th style="text-align: center;">(b) 2020</th> <th style="text-align: center;">(c) 2019</th> <th style="text-align: center;">(d) 2018</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>	Tax year	Prior 3 years			(e) Total	(a) 2021	(b) 2020	(c) 2019	(d) 2018																																																																																																									
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**Part XIV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.)**

**1 Information Regarding Foundation Managers:**

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

**JO ANN EDER**

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

**NONE**

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

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

- a** The name, address, and telephone number or email address of the person to whom applications should be addressed:
- b** The form in which applications should be submitted and information and materials they should include:
- c** Any submission deadlines:
- d** Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

**Part XIV** Supplementary Information *(continued)*

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<b>a Paid during the year</b>				
AMERICAN BIBLE SOCIETY 101 NORTH INDEPENDENCE MALL EAST PHILADEPHIA, PA 19106	NONE		PHILANTHROPIC PURPOSE	6,000.
AMERICAN CIVIL LIBERTIES UNION OF MONTANA FOUNDATION (ACLU-MT) PO BOX 1968 MISSOULA, MT 59806	NONE		PHILANTHROPIC PURPOSE	20,000.
ASBURY UNIVERSITY 1 MACKLEM DRIVE WILMORE, KY 40390	NONE		PHILANTHROPIC PURPOSE	60,600.
BEARTOOTH BILLINGS CLINIC FOUNDATION P.O. BOX 590 RED LODGE, MT 59068	NONE		PHILANTHROPIC PURPOSE	30,000.
BOY SCOUTS OF AMERICA - BLACK SWAMP AREA COUNCIL 2100 BROAD AVE. FINDLAY, OH 45856	NONE		PHILANTHROPIC PURPOSE	6,000.
<b>Total</b> ..... <b>SEE CONTINUATION SHEET(S)</b> ..... ▶ <b>3a</b>				1,535,739.
<b>b Approved for future payment</b>				
<b>NONE</b>				
<b>Total</b> ..... ▶ <b>3b</b>				0.

Part XV-A Analysis of Income-Producing Activities

Table with columns: (a) Business code, (b) Amount, (c) Exclusion code, (d) Amount, (e) Related or exempt function income. Rows include Program service revenue, Membership dues, Interest on savings, Dividends, Net rental income, Other investment income, Gain or loss on sales, and Subtotal.

(See worksheet in line 13 instructions to verify calculations.)

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

Table with 2 columns: Line No., Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment of the foundation's exempt purposes.

Part XVI Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
a Transfers from the reporting foundation to a noncharitable exempt organization of:
(1) Cash
(2) Other assets
b Other transactions:
(1) Sales of assets to a noncharitable exempt organization
(2) Purchases of assets from a noncharitable exempt organization
(3) Rental of facilities, equipment, or other assets
(4) Reimbursement arrangements
(5) Loans or loan guarantees
(6) Performance of services or membership or fundraising solicitations
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

Table with 4 columns: (a) Line no., (b) Amount involved, (c) Name of noncharitable exempt organization, (d) Description of transfers, transactions, and sharing arrangements. Content includes 'N/A' in column (c).

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

b If "Yes," complete the following schedule. Table with 3 columns: (a) Name of organization, (b) Type of organization, (c) Description of relationship. Content includes 'N/A' in column (a).

Sign Here: Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Signature of officer or trustee: KENDRA A. MORAN, CPA. Date: 09/19/22. Title: PRESIDENT.

Paid Preparer Use Only: Print/Type preparer's name: KENDRA A. MORAN, CPA. Preparer's signature: KENDRA A. MORAN. Date: 09/19/22. Check self-employed: [ ]. PTIN: P00814196. Firm's name: ANDERSON ZURMUEHLEN & CO., P.C. Firm's EIN: 81-0385940. Firm's address: P.O. BOX 20435, BILLINGS, MT 59104-0435. Phone no.: 406-245-5136.

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

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
BOYS & GIRLS CLUB OF CARBON COUNTY 24 9TH STREET, WEST PO BOX 11 RED LODGE, MT 59068	NONE		PHILANTHROPIC PURPOSE	35,000.
BOYS & GIRLS CLUB OF THE FLATHEAD RESERVATION AND LAKE COUNTY PO BOX 334 RONAN, MT 59864	NONE		PHILANTHROPIC PURPOSE	15,000.
BOYS & GIRLS CLUB OF THE NORTHERN CHEYENNE NATION PO BOX 309 LAME DEER, MT 59043	NONE		PHILANTHROPIC PURPOSE	45,000.
BOYS AND GIRLS CLUB OF LODGE GRASS PO BOX 454 LODGE GRASS, MT 59050	NONE		PHILANTHROPIC PURPOSE	20,000.
CANDID 32 OID SLIP, 24TH FLOOR NEW YORK, NY 10005	NONE		PHILANTHROPIC PURPOSE	2,500.
CHILD CARE CONNECTIONS 1143 STONERIDGE DR SUITE 1 BOZEMAN, MT 59718	NONE		PHILANTHROPIC PURPOSE	20,000.
DSVS PO BOX 314 RED LODGE, MT 59068	NONE		PHILANTHROPIC PURPOSE	40,000.
FLORENCE CRITTENTON HOME & SERVICES 901 N HARRIS ST HELENA, MT 59601	NONE		PHILANTHROPIC PURPOSE	30,000.
FRIENDSHIP HOUSE 3123 8TH AVE. SOUTH BILLINGS, MT 59101	NONE		PHILANTHROPIC PURPOSE	30,000.
HOPA MOUNTAIN 234 E. BABCOCK, SUITE E BOZEMAN, MT 59715	NONE		PHILANTHROPIC PURPOSE	62,500.
<b>Total from continuation sheets</b>				<b>1,413,139.</b>

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

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
LEIPSIC LOCAL SCHOOL DISTRICT 232 OAK ST. LEIPSIC, OH 45856	NONE		PHILANTHROPIC PURPOSE	30,300.
LEIPSIC UNITED METHODIST CHURCH 127 WEST MAIN ST. LEIPSIC, OH 45856	NONE		PHILANTHROPIC PURPOSE	90,900.
LET'S GROW KIDS 19 MARBLE AVENUE, SUITE 4 BURLINGTON, VT 05401	NONE		PHILANTHROPIC PURPOSE	30,000.
LIFE ENRICHING COMMUNITIES FOUNDATION 9840 MONTGOMERY ROAD CINCINNATI, OH 45242	NONE		PHILANTHROPIC PURPOSE	60,600.
MEALS ON WHEELS OF SW OH & N KY FORMERLY WESLEY COMMUNITY SERVICES 2091 RADCLIFF DRIVE CINCINNATI, OH 45204	NONE		PHILANTHROPIC PURPOSE	60,600.
MONTANA CHILD CARE RESOURCE AND REFERRAL NETWORK P.O. BOX 808 LOLO, MT 59847	NONE		PHILANTHROPIC PURPOSE	10,000.
MONTANA COMMUNITY FOUNDATION PO BOX 1145 HELENA, MT 59624	NONE		PHILANTHROPIC PURPOSE	2,000.
MONTANA NONPROFIT ASSOCIATION P.O. BOX 1744 HELENA, MT 59624	NONE		PHILANTHROPIC PURPOSE	18,000.
MOUNTAIN HOME MONTANA 2606 SOUTH AVE. WEST MISSOULA, MT 59804	NONE		PHILANTHROPIC PURPOSE	20,000.
P.E.C.E.S. PO BOX 647 PUNTA SANTIAGO, PR 00741	NONE		PHILANTHROPIC PURPOSE	50,000.
<b>Total from continuation sheets</b>				

**Part XIV** Supplementary Information

**3 Grants and Contributions Paid During the Year (Continuation)**

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
PACIFIC GARDEN MISSION 1458 S. CANAL ST CHICAGO, IL 60607	NONE		PHILANTHROPIC PURPOSE	6,000.
RED LODGE AREA COMMUNITY FOUNDATION PO BOX 1871 RED LODGE, MT 59068	NONE		PHILANTHROPIC PURPOSE	39,964.
ROCKY MOUNTAIN COLLEGE 1511 POLY DRIVE BILLINGS, MT 59102	NONE		PHILANTHROPIC PURPOSE	10,000.
SCHOOL OF THE BEARTOOTH DBA MOUNTAIN BLUEBELLS PRESCHOOL 501 NORTH COOPER AVE RED LODGE, MT 59068	NONE		PHILANTHROPIC PURPOSE	25,000.
THE FLAGSHIP PROGRAM 1321 WYOMING ST MISSOULA, MT 59801	NONE		PHILANTHROPIC PURPOSE	10,000.
THE LINEAGE PROJECT 228 PARK AVE. SOUTH, PMB 98592 NEW YORK, NY 10003	NONE		PHILANTHROPIC PURPOSE	15,000.
THE PINEY WOODS SCHOOL 5096 HIGHWAY 49 SOUTH, BOX 99 PINEY WOODS, MS 39148	NONE		PHILANTHROPIC PURPOSE	30,300.
THE SALVATION ARMY 114 EAST CENTRAL PARKWAY CINCINNATI, OH 45202	NONE		PHILANTHROPIC PURPOSE	30,300.
THE STARR COMMONWEALTH SCHOOLS 13725 STARR COMMONWEALTH ROAD ALBION, MI 49224	NONE		PHILANTHROPIC PURPOSE	30,300.
THE UNITED METHODIST CHURCH, WEST OHIO CONFERENCE 32 WESLEY BLVD. WORTHINGTON, OH 43085	NONE		PHILANTHROPIC PURPOSE	60,600.
<b>Total from continuation sheets</b>				



**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

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
THRIVE 400 EAST BABCOCK STREET BOZEMAN, MT 59715	NONE		PHILANTHROPIC PURPOSE	30,000.
TRILOGY FOUNDATION 303 N. HURSTBOURNE PKWY SUITE 200 LOUISVILLE, KY 40222	NONE		PHILANTHROPIC PURPOSE	6,000.
UNITED MOVEMENT TO END CHILD SOLDIERING (UM ECS) P.O. BOX 66296 WASHINGTON, DC 20035	NONE		PHILANTHROPIC PURPOSE	32,500.
VAMOS!, INC. BOX 212 WESTON, VT 05161	NONE		PHILANTHROPIC PURPOSE	25,000.
VERMONT COMMUNITY LOAN FUND PO BOX 827 / 15 STATE STREET MONTPELIER, VT 05601	NONE		PHILANTHROPIC PURPOSE	30,000.
VILLAGE OF LEIPSIK TOWN HALL, 142 E. MAIN ST. LEIPSIK, OH 45856	NONE		PHILANTHROPIC PURPOSE	6,000.
WINSTON PROUTY CENTER FOR CHILD AND FAMILY DEVELOPMENT 209 AUSTINE DRIVE THOMAS HALL BATTLEBORO, VT 05301	NONE		PHILANTHROPIC PURPOSE	10,000.
WYCLIFFE BIBLE TRANSLATORS, INC. PO BOX 628200 ORLANDO, FL 32862	NONE		PHILANTHROPIC PURPOSE	6,000.
YELLOWSTONE WILDLIFE SANCTUARY 615 2ND ST E, BOX 675 RED LODGE, MT 59068	NONE		PHILANTHROPIC PURPOSE	44,000.
YOUNG FAMILIES EARLY HEAD START, INC. 1020 COOK AVENUE BILLINGS, MT 59102	NONE		PHILANTHROPIC PURPOSE	35,000.
<b>Total from continuation sheets</b>				

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

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
UNIVERSITY OF MONTANA 32 CAMPUS DRIVE MISSOULA, MT 59812	NONE		PHILANTHROPIC PURPOSE	10,000.
TRUST MONTANA PO BOX 8791 MISSOULA, MT 59807	NONE		PHILANTHROPIC PURPOSE	18,000.
ST. LABRE INDIAN SCHOOL 112 ST. LABRE CAMPUS DRIVE ASHLAND, MT 59003	NONE		PHILANTHROPIC PURPOSE	20,000.
SOCIETY OF WAR DANCERS PO BOX 84 BUSBY, MT 59016	NONE		PHILANTHROPIC PURPOSE	5,000.
SHARE OUR STRENGTH - NO KID HUNGRY MONTANA PO BOX 4210 HELENA, MT 59620	NONE		PHILANTHROPIC PURPOSE	5,000.
MONTANA AFTER SCHOOL ALLIANCE 4055 VALLEY COMMONS DR UNIT G BOZEMAN, MT 59718	NONE		PHILANTHROPIC PURPOSE	5,000.
RED LODGE FIRE RESCUE FOUNDATION PO BOX 318 RED LODGE, MT 59068	NONE		PHILANTHROPIC PURPOSE	250.
NATIVE AMERICAN DEVELOPMENT CORPORATION 17 N 26TH ST BILLINGS, MT 59101	NONE		PHILANTHROPIC PURPOSE	20,000.
MONTANA ASSOCIATION FOR THE EDUCATION OF YOUNG CHILDREN PO BOX 601 KALISPELL, MT 59903	NONE		PHILANTHROPIC PURPOSE	5,000.
MONTANA WILDERNESS SCHOOL PO BOX 1183 BOZEMAN, MT 59771	NONE		PHILANTHROPIC PURPOSE	2,700.
<b>Total from continuation sheets</b>				

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

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
MONTANA PEDIATRICS 310 SUNNYVIEW LANE KALISPELL, MT 59901	NONE		PHILANTHROPIC PURPOSE	25,000.
MONTANA AUDUBON PO BOX 595 HELENA, MT 59624	NONE		PHILANTHROPIC PURPOSE	5,000.
MONGOL ECOLOGY CENTER 2242 E 4TH ST TUCSON, AZ 85719	NONE		PHILANTHROPIC PURPOSE	2,500.
LOWELL OBSERVATORY 1400 W MARS HILL RD FLAGSTAFF, AZ 86001	NONE		PHILANTHROPIC PURPOSE	25,000.
LAKOTA WELLNESS SOCIETY PO BOX 7 PARMELEE, SD 57566	NONE		PHILANTHROPIC PURPOSE	8,325.
INTERNATIONAL TRADITIONAL GAMES SOCIETY PO BOX 535 GREAT FALLS, MT 59403	NONE		PHILANTHROPIC PURPOSE	20,000.
CODE GIRLS UNITED PO BOX 8272 KALISPELL, MT 59904	NONE		PHILANTHROPIC PURPOSE	5,000.
BIG BROTHERS BIG SISTERS OF YELLOWSTONE COUNTY 3203 3RD AVE N STE 308 BILLINGS, MT 59101	NONE		PHILANTHROPIC PURPOSE	12,500.
ARLEE COMMUNITY DEVELOPMENT CORP PO BOX 452 ARLEE, MT 59821	NONE		PHILANTHROPIC PURPOSE	10,500.
AMERICAN INDIAN BUSINESS LEADERS GALLAGHER BUSINESS BUILDING, STE 250 MISSOULA, MT 59812	NONE		PHILANTHROPIC PURPOSE	24,000.
<b>Total from continuation sheets</b>				

**Part XIV Supplementary Information**

**3 Grants and Contributions Paid During the Year (Continuation)**

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
FRIENDS FOREVER MENTORING 1 EISENHOWER ST SW RONAN, MT 59864	NONE		PHILANTHROPIC PURPOSE	25,000.
MONTANA RENEWABLE ENERGY ASSOCIATION PO BOX 673 MISSOULA, MT 59806	NONE		PHILANTHROPIC PURPOSE	5,000.
<b>Total from continuation sheets</b> .....				

**Schedule B**  
**(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Schedule of Contributors**

▶ Attach to Form 990 or Form 990-PF.  
▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2021**

Name of the organization

**OP & WE EDWARDS FOUNDATION INC**

Employer identification number

**13-6100965**

Organization type (check one):

**Filers of:**

**Section:**

Form 990 or 990-EZ

501(c)( ) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

**General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

**Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. 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 ..... ▶ \$ \_\_\_\_\_

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

Name of organization  <b>OP &amp; WE EDWARDS FOUNDATION INC</b>	Employer identification number  <b>13-6100965</b>
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**Part I Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	JO ANN EDER  PO BOX 2445  RED LODGE, MT 59068	\$ 250,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization  <b>OP &amp; WE EDWARDS FOUNDATION INC</b>	<b>Employer identification number</b>  13-6100965
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**Part II Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	
		\$ _____	

Name of organization <b>OP &amp; WE EDWARDS FOUNDATION INC</b>	Employer identification number <b>13-6100965</b>
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**Part III** Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ▶ \$ \_\_\_\_\_  
Use duplicate copies of Part III if additional space is needed.

<b>(a) No. from Part I</b>	<b>(b) Purpose of gift</b>	<b>(c) Use of gift</b>	<b>(d) Description of how gift is held</b>
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
_____ _____ _____		_____ _____ _____	
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
_____ _____ _____		_____ _____ _____	
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
_____ _____ _____		_____ _____ _____	
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____
<b>(e) Transfer of gift</b>			
<b>Transferee's name, address, and ZIP + 4</b>		<b>Relationship of transferor to transferee</b>	
_____ _____ _____		_____ _____ _____	
_____	_____ _____ _____	_____ _____ _____	_____ _____ _____



# Underpayment of Estimated Tax by Corporations

▶ Attach to the corporation's tax return. **FORM 990-PF**

▶ Go to [www.irs.gov/Form2220](http://www.irs.gov/Form2220) for instructions and the latest information.

**2021**

Name **OP & WE EDWARDS FOUNDATION INC** Employer identification number **13-6100965**

**Note:** Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 38, on the estimated tax penalty line of the corporation's income tax return, but **do not** attach Form 2220.

## Part I Required Annual Payment

1	Total tax (see instructions) .....	1	16,866.
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1 .....		
2b	Look-back interest included on line 1 under section 460(b)(2) for completed long-term contracts or section 167(g) for depreciation under the income forecast method .....		
2c	Credit for federal tax paid on fuels (see instructions) .....		
2d	<b>Total.</b> Add lines 2a through 2c .....	2d	
3	Subtract line 2d from line 1. If the result is less than \$500, <b>do not</b> complete or file this form. The corporation does not owe the penalty .....	3	16,866.
4	Enter the tax shown on the corporation's 2020 income tax return. See instructions. <b>Caution:</b> If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5 .....	4	7,639.
5	<b>Required annual payment.</b> Enter the <b>smaller</b> of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3 .....	5	7,639.

## Part II Reasons for Filing - Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220 even if it does not owe a penalty. See instructions.

- 6  The corporation is using the adjusted seasonal installment method.
- 7  The corporation is using the annualized income installment method.
- 8  The corporation is a "large corporation" figuring its first required installment based on the prior year's tax.

## Part III Figuring the Underpayment

	(a)	(b)	(c)	(d)
9 <b>Installment due dates.</b> Enter in columns (a) through (d) the 15th day of the 4th (Form 990-PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year .....	05/15/21	06/15/21	09/15/21	12/15/21
10 <b>Required installments.</b> If the box on line 6 and/or line 7 above is checked, enter the amounts from Sch A, line 38. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% (0.25) of line 5 above in each column .....	1,910.	6,523.	4,217.	4,216.
11 Estimated tax paid or credited for each period. For column (a) only, enter the amount from line 11 on line 15. See instructions .....	5,542.			2,458.
<b>Complete lines 12 through 18 of one column before going to the next column.</b>				
12 Enter amount, if any, from line 18 of the preceding column .....		3,632.		
13 Add lines 11 and 12 .....		3,632.		2,458.
14 Add amounts on lines 16 and 17 of the preceding column .....			2,891.	7,108.
15 Subtract line 14 from line 13. If zero or less, enter -0- .....	5,542.	3,632.	0.	0.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0- .....		0.	2,891.	
17 <b>Underpayment.</b> If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18 .....		2,891.	4,217.	4,216.
18 <b>Overpayment.</b> If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column .....	3,632.			

**Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 - no penalty is owed.**

**Part IV Figuring the Penalty**

	(a)	(b)	(c)	(d)
<b>19</b> Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier. <b>(C corporations with tax years ending June 30 and S corporations:</b> Use 3rd month instead of 4th month. <b>Form 990-PF and Form 990-T filers:</b> Use 5th month instead of 4th month.) See instructions .....	<b>19</b>			
<b>20</b> Number of days from due date of installment on line 9 to the date shown on line 19 .....	<b>20</b>			
<b>21</b> Number of days on line 20 after 4/15/2021 and before 7/1/2021 .....	<b>21</b>			
<b>22</b> Underpayment on line 17 x $\frac{\text{Number of days on line 21} \times 3\% (0.03)}{365}$ ...	<b>22</b>	\$	\$	\$
<b>23</b> Number of days on line 20 after 6/30/2021 and before 10/1/2021 .....	<b>23</b>			
<b>24</b> Underpayment on line 17 x $\frac{\text{Number of days on line 23} \times 3\% (0.03)}{365}$ ...	<b>24</b>	\$	\$	\$
<b>25</b> Number of days on line 20 after 9/30/2021 and before 1/1/2022 .....	<b>25</b>			
<b>26</b> Underpayment on line 17 x $\frac{\text{Number of days on line 25} \times 3\% (0.03)}{365}$ ...	<b>26</b>	\$	\$	\$
<b>27</b> Number of days on line 20 after 12/31/2021 and before 4/1/2022 .....	<b>27</b>	<b>SEE ATTACHED WORKSHEET</b>		
<b>28</b> Underpayment on line 17 x $\frac{\text{Number of days on line 27} \times 3\% (0.03)}{365}$ ...	<b>28</b>	\$	\$	\$
<b>29</b> Number of days on line 20 after 3/31/2022 and before 7/1/2022 .....	<b>29</b>			
<b>30</b> Underpayment on line 17 x $\frac{\text{Number of days on line 29} \times \%}{365}$ .....	<b>30</b>	\$	\$	\$
<b>31</b> Number of days on line 20 after 6/30/2022 and before 10/1/2022 .....	<b>31</b>			
<b>32</b> Underpayment on line 17 x $\frac{\text{Number of days on line 31} \times \%}{365}$ .....	<b>32</b>	\$	\$	\$
<b>33</b> Number of days on line 20 after 9/30/2022 and before 1/1/2023 .....	<b>33</b>			
<b>34</b> Underpayment on line 17 x $\frac{\text{Number of days on line 33} \times \%}{365}$ .....	<b>34</b>	\$	\$	\$
<b>35</b> Number of days on line 20 after 12/31/2022 and before 3/16/2023 .....	<b>35</b>			
<b>36</b> Underpayment on line 17 x $\frac{\text{Number of days on line 35} \times \%}{365}$ .....	<b>36</b>	\$	\$	\$
<b>37</b> Add lines 22, 24, 26, 28, 30, 32, 34, and 36 .....	<b>37</b>	\$	\$	\$
<b>38 Penalty.</b> Add columns (a) through (d) of line 37. Enter the total here and on Form 1120, line 34; or the comparable line for other income tax returns .....	<b>38</b>	\$		<b>193.</b>

\* Use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at [www.irs.gov](http://www.irs.gov). You can also call 1-800-829-4933 to get interest rate information.

**FORM 990-PF  
UNDERPAYMENT OF ESTIMATED TAX WORKSHEET**

Name(s) <b>OP &amp; WE EDWARDS FOUNDATION INC</b>					Identifying Number <b>13-6100965</b>
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			
05/15/21	1,910.	1,910.			
05/15/21	-5,542.	-3,632.			
06/15/21	6,523.	2,891.	92	.000082192	22.
09/15/21	4,217.	7,108.	76	.000082192	44.
11/30/21	-2,458.	4,650.	15	.000082192	6.
12/15/21	4,216.	8,866.	106	.000082192	77.
03/31/22	0.	8,866.	45	.000109589	44.
Penalty Due (Sum of Column F) .....					<b>193.</b>

\* Date of estimated tax payment, withholding credit date or installment due date.

## FORM 990-PF INTEREST ON SAVINGS AND TEMPORARY CASH INVESTMENTS STATEMENT 1

SOURCE	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
ALTANA CREDIT UNION	511.	511.	
BANK OF RED LODGE	354.	354.	
FIRST INTERSTATE BANK	429.	429.	
INCOME FROM CL&F RESOURCES L.P. ID#76-0690190	1,195.	1,195.	
TOTAL TO PART I, LINE 3	2,489.	2,489.	

## FORM 990-PF DIVIDENDS AND INTEREST FROM SECURITIES STATEMENT 2

SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
DOMINI INCOME FROM CL&F RESOURCES L.P. ID#76-0690190	39,406.	38,519.	887.	887.	
	389,547.	0.	389,547.	389,547.	
TO PART I, LINE 4	428,953.	38,519.	390,434.	390,434.	

## FORM 990-PF OTHER INCOME STATEMENT 3

DESCRIPTION	(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
INCOME FROM CL&F RESOURCES L.P. ID#76-0690190	268,159.	268,159.	
INTEREST INCOME FROM COMMUNITY INVESTMENT NOTES	3,590.	3,590.	
INTEREST INCOME FROM LOANS RECEIVABLE FROM EXEMPT COMMUNITY ORGANIZATIONS	1,451.	1,451.	
INCOME FROM CL&F RESOURCES L.P. ID#76-0690190	1,395,990.	0.	
TOTAL TO FORM 990-PF, PART I, LINE 11	1,669,190.	273,200.	

FORM 990-PF		ACCOUNTING FEES		STATEMENT 4	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
ACCOUNTING	13,930.	6,965.		6,965.	
TO FORM 990-PF, PG 1, LN 16B	13,930.	6,965.		6,965.	

FORM 990-PF		TAXES		STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FEDERAL EXCISE TAX	16,066.	0.		0.	
TO FORM 990-PF, PG 1, LN 18	16,066.	0.		0.	

FORM 990-PF		OTHER EXPENSES		STATEMENT 6	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
DUES & SUBSCRIPTIONS	7,158.	3,579.		3,579.	
BANK & CREDIT CARD CHARGES	232.	116.		116.	
OFFICE & POSTAGE	5,210.	2,605.		2,605.	
SEC 1231 LOSS - CL&F					
RESOURCES LP EIN 76-0690190	36,948.	36,948.		0.	
MISCELLANEOUS	120.	60.		60.	
TO FORM 990-PF, PG 1, LN 23	49,668.	43,308.		6,360.	

FORM 990-PF	CORPORATE STOCK	STATEMENT 7
DESCRIPTION	BOOK VALUE	FAIR MARKET VALUE
COOPERATIVE ASSISTANCE FUND	33,333.	33,333.
DOMINI IMPACT EQUITY FUND	475,271.	695,832.
CONTINENTAL LAND & FUR CO INC	2,462,247.	401,401.
TOTAL TO FORM 990-PF, PART II, LINE 10B	2,970,851.	1,130,566.

FORM 990-PF	OTHER INVESTMENTS	STATEMENT 8	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
CL&F RESOURCES LP	FMV	14,732,769.	19,099,852.
TOTAL TO FORM 990-PF, PART II, LINE 13		14,732,769.	19,099,852.

FORM 990-PF	DEPRECIATION OF ASSETS NOT HELD FOR INVESTMENT	STATEMENT 9	
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
FURNITURE - JO ANN'S DESK	2,552.	2,552.	0.
COMPUTER - JO ANN'S TOWER	4,098.	4,098.	0.
PRINTER/SCANNER/FAX HP LASER	670.	670.	0.
COMPUTERS - 2 MACBOOK PRO	7,709.	7,709.	0.
MAC MINI & ACCESSORIES	2,084.	2,084.	0.
MAC BOOK PRO	3,149.	3,149.	0.
2 FILE CABINETS	906.	906.	0.
SCANNER	258.	258.	0.
SOFTWARE	7,000.	7,000.	0.
MAC BOOK PRO	1,699.	878.	821.
TOTAL TO FM 990-PF, PART II, LN 14	30,125.	29,304.	821.

FORM 990-PF	OTHER ASSETS		STATEMENT 10
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
LOANS RECEIVABLE FROM EXEMPT COMMUNITY ORGANIZATIONS	237,023.	237,023.	237,023.
COMMUNITY INVESTMENT NOTES	280,069.	264,165.	264,165.
TO FORM 990-PF, PART II, LINE 15	517,092.	501,188.	501,188.

FORM 990-PF	INTEREST AND PENALTIES	STATEMENT 11
TAX DUE FROM FORM 990-PF, PART V		8,866.
UNDERPAYMENT PENALTY		193.
LATE PAYMENT INTEREST		180.
LATE PAYMENT PENALTY		222.
TOTAL AMOUNT DUE		9,461.

FORM 990-PF	LATE PAYMENT INTEREST						STATEMENT 12
DESCRIPTION	DATE	AMOUNT	BALANCE	RATE	DAYS	INTEREST	
TAX DUE	05/15/22	8,866.	8,866.	.0400	46	45.	
INTEREST RATE CHANGE	06/30/22	0.	8,911.	.0500	92	113.	
INTEREST RATE CHANGE	09/30/22	0.	9,024.	.0600	15	22.	
DATE FILED	10/15/22		9,046.				
TOTAL LATE PAYMENT INTEREST						180.	

FORM 990-PF	LATE PAYMENT PENALTY					STATEMENT 13
DESCRIPTION	DATE	AMOUNT	BALANCE	MONTHS	PENALTY	
TAX DUE	05/15/22	8,866.	8,866.	5	222.	
DATE FILED	10/15/22		8,866.			
TOTAL LATE PAYMENT PENALTY					222.	

FORM 990-PF PART VII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS STATEMENT 14

NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
JO ANN EDER PO BOX 2445 RED LODGE, MT 59068	PRESIDENT 15.00	0.	0.	0.
GISELA GAMPER PO BOX 2445 RED LODGE, MT 59068	VICE PRESIDENT 1.00	0.	0.	0.
MARK D EDER PO BOX 2445 RED LODGE, MT 59068	TREASURER 1.00	0.	0.	0.
CHRISTOPHER E GAMPER PO BOX 2445 RED LODGE, MT 59068	DIRECTOR 1.00	0.	0.	0.
JESSICA DUNBAR PO BOX 2445 RED LODGE, MT 59068	DIRECTOR 1.00	0.	0.	0.
YOGEEETA GAMPER PO BOX 2445 RED LODGE, MT 59068	SECRETARY 1.00	0.	0.	0.
MAYA TILLO PO BOX 2445 RED LODGE, MT 59068	DIRECTOR 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6, PART VII		0.	0.	0.



2021 DEPRECIATION AND AMORTIZATION REPORT

FORM 990-PF PAGE 1

990-PF

Asset No.	Description	Date Acquired	Method	Life	Conv	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	* Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
1	FURNITURE - JO ANN'S DESK	04/17/02	SL	7.00		16	2,552.				2,552.	2,552.		0.	2,552.
2	COMPUTER - JO ANN'S TOWER	03/28/05	SL	5.00		16	4,098.				4,098.	4,098.		0.	4,098.
3	PRINTER/SCANNER/FAX HP LASER	06/06/07	SL	5.00		16	670.				670.	670.		0.	670.
4	COMPUTERS - 2 MACBOOK PRO	10/14/08	SL	5.00		16	7,709.				7,709.	7,709.		0.	7,709.
5	MAC MINI & ACCESSORIES	09/01/11	SL	5.00		16	2,084.				2,084.	2,084.		0.	2,084.
6	MAC BOOK PRO	07/19/12	SL	5.00		16	3,149.				3,149.	3,149.		0.	3,149.
7	2 FILE CABINETS	09/21/12	SL	7.00		16	906.				906.	906.		0.	906.
8	SCANNER	06/19/13	SL	5.00		16	258.				258.	258.		0.	258.
9	SOFTWARE	06/08/18	SL	3.00		16	7,000.				7,000.	6,027.		973.	7,000.
10	MAC BOOK PRO	05/29/19	SL	5.00		16	1,699.				1,699.	538.		340.	878.
	* TOTAL 990-PF PG 1 DEPR						30,125.				30,125.	27,991.		1,313.	29,304.

128111 04-01-21

(D) - Asset disposed

\* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone