EXTENDED TO NOVEMBER 15, 2019

The second of the second

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public.

► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Α	For the	2018 calendar year, or tax year beginning JUL 1, 2018 and e	enaing L	DEC 31, 2018		
В	Check if applicable:	C Name of organization		D Employer identific	cation number	
	Address change	YELLOWSTONE ART MUSEUM				
	Name chánge	Doing business as		81-6	014902	
	initial reducn	Number and street (or P.O. box if mall is not delivered to street address)	Room/suite	E Telephone number	•	
	Final return/	401 N 27TH ST		406-	256-6804	
	termin- ated	City or town, state or province, country, and ZIP or foreign postal code		G Grass receipts \$	890,571.	
	Amende return			H(a) Is this a group re	eturn	
	Applica-			for subordinates		
	pending	401 N 27TH ST, BILLINGS, MT 59101		H(b) Are all subordinates in		
1	Tay-exe	mpt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) o	or 527		list, (see instructions)	
		WWW.ARTMUSEUM.ORG	, 42,	H(c) Group exemption	•	
		rganization: X Corporation Trust Association Other	I Vear		State of legal domicile; MT	
		Summary	1 1 1001	Or Idemation: = = = = I	n oute or logar donners, == x	
ب		riefly describe the organization's mission or most significant activities: THE	YELLOW	STONE ART MU	JSEUM	
9	, F	EXHIBITS, INTERPRETS, COLLECTS, AND PRESE				
ופר	2 0	Check this box If the organization discontinued its operations or dispos				
Activities & Governance	3 1			3	23	
ć	4 1	lumber of independent voting members of the governing body (Part VI, line 1b)			23	
4		otal number of Individuals employed in calendar year 2018 (Part V, line 2a)		**************************************	35	
<u>.</u>	5 T				101	
3	6. 1	otal number of volunteers (estimate if necessary)			0.	
Ţ	7.a ⊺	otal unrelated business revenue from Part VIII, column (C), line 12			0.	
	<u> </u>	let unrelated business taxable income from Form 990-T, line 38	*****			
			-	Prior Year	Current Year	
9	8 0	Contributions and grants (Part VIII, line 1h)		1,110,622.	528,413.	
ĕ	9 F	Program service revenue (Part VIII, line 2g)		24,082.	66,817.	
Revenue	10 k	vestment income (Part VIII, column (A), lines 3, 4, and 7d)		217,483	101,959.	
Į,	11 0	other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	.,,.	450,346.	76,563.	
		otal revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		1,802,533.	773,752.	
	13 0	Brants and similar amounts paid (Part IX, column (A), lines 1-3)		500.	0.	
	14 E	enefits paid to or for members (Part IX, column (A), line 4)		0.	0.	
40	15 8	alaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		755,030.	403,739.	
Expenses	16a F	Professional fundraising fees (Part IX, column (A), line 11e)	<u> </u>	0.	0.	
ē	ьт	otal fundraising expenses (Part IX, column (D), line 25)	92.			
ű	17 (Other expenses (Part IX, column (A), lines 11a-11d, 11l-24e)		1,141,100.	444,632.	
		otal expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		1,896,630.	848,371.	
		levenue less expenses. Subtract line 18 from line 12		<94,097.>	<74,619.>	
50				eginning of Current Year	End of Year	
Sets	20 T	otal assets (Part X, line 16)		10,428,083.	10,044,501.	
32	21 T	otal liabilities (Part X, line 26)		425,166.	435,565.	
Net As	22 N	let assets or fund/balances, Subtract line 21 from line 20		10,002,917.	9,608,936.	
	art II	Signature Block	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		les of perjury, I déclare that I have examined this return, including accompanying schedules	s and statem	nents, and to the best of my	v knowledge and belief, it is	
		and complete. Declaration of preparer (other than officer) is based on all information of wh			The mode and Bollon it is	
Sign Here		and complete. Declaration of Proper of Country treat officer) to based on an information of an	non propers		77/2018	
		Signature of officer		Date 72	/////////////////////////////////////	
		PAUL COX, PRESIDENT		- 7	7	
He	re	Type or print name and titte		· · · ·		
				Date Check	PTIN	
m - f		Print/Type preparer's name Preparify's signature Preparify's signature	إيعيدا	الأمير سميم	Laararaa	
Preparet Fi		STEPENI S. PREESE, CFA				
		Firm's name ANDERSON ZURMUEHLEN & CO., P.C.		Firm's EIN ▶	81-0385940	
Use Only FI		Firm's address P.O. BOX 20435			C 045 510C	
		BILLINGS, MT 59104-0435		1 Phone no. 4 U	Phone no. 406-245-5136	
Ma	y the IR:	Sidiscuss this return with the preparer shown above? (see instructions)	* * * * * * * * * * * * * * * * * * * *	**************************	X Yes No	

Form	n 990 (2018) YELLOWSTONE ART MUSEUM 81-60149	02 Page 2				
Pa	rt III Statement of Program Service Accomplishments	,				
	Check if Schedule O contains a response or note to any line in this Part iti					
1	Briefly describe the organization's mission:	-				
	THE YELLOWSTONE ART MUSEUM EXHIBITS, INTERPRETS, COLLECTS, AND					
	PRESERVES ART, WITH AN EMPHASIS ON MONTANA AND SURROUNDING REGION	S, .				
	FOR THE ENRICHMENT, EDUCATION, INSPIRATION, AND ENJOYMENT OF ALL.					
2	Did the organization undertake any significant program services during the year which were not listed on the					
_	prior Form 990 or 990-EZ?	Yes X No				
	If "Yes," describe these new services on Schedule O.					
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes 🗓 No				
J	If "Yes," describe these changes on Schedule O.					
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by exp	ansas				
-	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total exper					
	revenue, if any, for each program service reported.	1303, al lu				
-	E20 172	13,476.				
4a	(Code:) (Expenses \$ 530,373 Including grants of \$) (Revenue \$ 1 THE CURATORIAL FUNCTION OVERSES THE CARE AND DOCUMENTATION OF THE					
	PERMANENT COLLECTION, RESEARCHES AND COORDINATES TEMPORARY AND	1.15				
	PERMANENT EXHIBITIONS, RESEARCHES AND WRITES ART-RELATED PUBLICATIONS	TONG				
	AND COORDINATES AN ANNUAL SERIES OF ADULT PROGRAMS.	TOND,				
	AND COORDINATES AN ANNUAL SERIES OF ADOLI PROGRAMS.					
	· · · · · · · · · · · · · · · · · · ·					
	77. V CA					

	C. C	· · · · · · · · · · · · · · · · · · ·				
<u></u>	400 540	23,430.)				
4b	(Code:) (Expenses \$ 109,510. Including grants of \$					
	ENRICHMENT PROGRAMS TO CHILDREN PRE-K THROUGH HIGH SCHOOL, BOTH (
	AND THROUGH OUTREACH PROGRAMMING THE EDUCATION PROGRAM HAS PROGRAMS					
	FOR ALL AGES, INCLUDING ADULTS AND THE WOMEN'S PRISON.					
	CIT THE TAXABLE AND ALTO A PROPERTY OF THE PRO					
4c	(Code:) (Expenses \$) (Revenue \$) (Revenue \$)	,				
						
						
		<u> </u>				
	· · · · · · · · · · · · · · · · · · ·					
		· · · · · · · · · · · · · · · · · · ·				
_						
4đ	Other program services (Describe in Schedule 0.)					
	(Expenses \$ Including grants of \$) (Revenue \$)	 				
<u>4e</u>	Total program service expenses ► 639,883.	000				
		Form 990 (2018)				

			Yes	No
1	is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	<u> </u>
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Χ	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	_3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		Χ.
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(o)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7_		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8_	X	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, og debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D. Parts VI, VII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X inte 12 that is 5% or more of its total			
	assets reported in Part X, line 167 /f "Yes," complete Schedule D, Part VIII	<u>11b</u>	X	
c	Did the organization report an amount for investments - program related Rart X, in 13 that is 5% or more of its total			
	assets reported in Part X, line 167 /f "Yes," complete Schedule D. Part VIII	11c		<u> </u>
d	Did the organization report an amount for other assets in Part X ine 15 that's 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		<u> X</u>
0	Did the organization report an amount for other liabilities in Part X, tine 25° it "Yes," complete Schedule D, Part X	11e	Х	<u> </u>
•	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			,,
	the organization's flability for uncertain tax positions under FIN 48 (ASC 740)? If *Yes, * complete Schedule D, Part X	111		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	١	· v	
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	<u> </u>	<u> </u>
Þ	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			1
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000	146		Х
4=	or more? If "Yes," complete Schedule F, Parts I and IV	14b		1
15		1=		x
40	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	15		42
16		16		х
47	or for foreign individuals? If *Yes," complete Schedule F, Parts III and IV Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	"		
17		17	1	X
18	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		
10		18	х	
19	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	19.		
13		19		x
20a	complete Schedule G, Part III	20a	 	X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	-	
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
~ '	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		х
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Form		14902	P	<u>age 4</u>
Par	t IV Checklist of Required Schedules (continued)	 ,		
	7149 4 B 4 B 74 A 700 4 B 1 B 1 B 1 B 1 B 1 B 1 B 1 B 1 B 1 B		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			Х
••	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			l
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1 00		x
	Schedule J	23		<u>^</u>
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	24a		X
	Schedule K. If "No," go to line 25a	••		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease	240		
c	· · · · · · · · · · · · · · · · · · ·	24c		l
	any tax-exempt bonds? Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	•••	,	
		240		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	25a		x
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	238		
Þ	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			ł
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete	25.		Х
~~	Schedule L. Part I	25b		<u> </u>
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or pagables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			ĺ
		۱ مد		x
	complete Schedule L, Part II	26		
27	Did the organization provide a grant or other assistance to an officer, director, trustee key employee, substantial			ĺ
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			х
	of any of these persons? If "Yes," complete Schedule L, Part III	27	el ava	A SAME
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			7000
	Instructions for applicable filing thresholds, conditions, and exceptions):			X
	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	1		X
	A family member of a current or former officer, director, trustee, or key employee? It yes, " complete Schedule L, Part IV			
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			v
	director, trustee, or direct or indirect owner? If "Yes," complete schedule Part IV			X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		┢┸
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	000		v
	contributions? // "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations?	ايما		v
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			l x
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		_^_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			v
	Part V, line 1			X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		
þ	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity	05,		
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			<u> </u>
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization	L I		v
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			•
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197		v	
3 D W.	Note. All Form 990 filers are required to complete Schedule O Statements Regarding Other IRS Filings and Tax Compliance	,,,, 38	X	
Par	Check If Schedule O contains a response or note to any line in this Part V			
	Officery is contenting to contrasting at Leasholling on Horse to with title to miss unit a			لحسا
	1.1	1	Yes	No
	Enter the number reported in Box 3 of Form 1096, Enter -0- if not applicable			
	Enter the number of Forms W-2G included in line 1a, Enter -0- If not applicable	U		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming		•	
	(gambling) winnings to prize winners?	<u>10</u> -	X	<u></u>
832004	. 12-81-18	Form	220	(2018

	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
		5 議議		
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2ь	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	SATES AND ADDRESS.		4424
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	T	- Frank-pi-gri	X
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O			
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X
ь	If "Yes," enter the name of the foreign country:	5,616.19		
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	- THE SHAPE OF BUILD	X
Ь	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			Х
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor	? 7a	X	APLEST WELST
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which rewas required			
	to file Form 8282?	7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly on a personal benefit contract?	7 1		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	79		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8	<u> </u>	
9	Sponsoring organizations maintaining donor advised funds.			
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
þ	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10	Section 501(c)(7) organizations. Enter:		With the	
а	Initiation fees and capital contributions included on Part VIII, line 12			
þ	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders 11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against			
	amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filling Form 990 in lieu of Form 1041?	12a	728/97920	era usan
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		Cincator	
8	Is the organization licensed to issue qualified health plans in more than one state?	13a	1965	. Sections
_	Note. See the instructions for additional information the organization must report on Schedule O,			
Þ	Enter the amount of reserves the organization is required to maintain by the states in which the			distr
	organization is licensed to issue qualified health plans			
Ç	Enter the amount of reserves on hand	RESEARCH	HEREILES.	77
14a	Did the organization receive any payments for Indoor tanning services during the tax year?		\vdash	X
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	. 14b	\vdash	-
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	1.	[w
	excess parachute payment(s) during the year?	15	September 1	X
46	If "Yes," see instructions and file Form 4720, Schedule N. Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	1900		X
16	If "Yes," complete Form 4720, Schedule O.	16	MARKET PAR	
	II 199, WHIPPORT FULLIFITATION, CONTOURING CI.	Parison in	990	/ 3 010\
		ruiti	, 550	(ZV [0]

Form 990 (2018) YELLOWSTONE ART MUSEUM 81-6014902 Pag
Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management	********	<i>/</i>	
		-	Yes	No
10	Enter the number of voting members of the governing body at the end of the tax year		W.	
•4	If there are material differences in voting rights among members of the governing body, or if the governing		W.	
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
_	Enter the number of voting members included in line 1a, above, who are independent 1b 23			
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
2			Menden.	v
_	officer, director, trustee, or key employee?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision	_		***
	of officers, directors, or trustees, or key employees to a management company or other person?	3	_	X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6	<u> </u>	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
	more members of the governing body?	7a	<u> </u>	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8 b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section Agino cannot be reached at the			
	organization's mailing address? If "Yes." provide the names and addresses in Schedule®	9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 9900 all members of its governing body before filing the form?	11a	Х	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		in the	EG-740
12a	Did the organization have a written conflict of interest policy? If "No got line 13	12a	X	K4221.79)(42
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? // "Yes," describe			
•	in Schedule O how this was done	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Diddie and the first transfer of the second and the	14	X	
	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent			war con Fr
15	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			ne ori
_		45-	X	
a 	The organization's CEO, Executive Director, or top management official	15a		Х
b	Other officers or key employees of the organization	15b		A
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
168	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			v
_	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b	Щ,	
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed NONE			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s	onty) a	vailat	le
	for public inspection. Indicate how you made these available. Check all that apply,			
	X Own website X Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financi	al	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	THE ORGANIZATION - 406-256-6804			
	401 N. 27TH STREET, BILLINGS, MT 59101			
			200	