OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Do not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990PF for instructions and the latest information.

For	alen	dar year 2021 or tax year beginning		, and ending		
Nai	ne of	foundation			A Employer identification numb	er
T	HE	GREATER MONTANA FOUNDA	TION		81-6009847	
		nd street (or P.O. box number if mail is not delivered to street	address)	Room/suite	<b>B</b> Telephone number	
		6 SCOTT DRIVE			406-698-8623	
-		own, state or province, country, and ZIP or foreign p ${ t ENA}$ , ${ t MT}$ ${ t 59601}$	ostal code		C If exemption application is pending,	check here
		all that apply: Initial return	Initial return of a fo	ormer public charity	<b>D</b> 1. Foreign organizations, checl	k here
		Final return	Amended return		0	
		X Address change	Name change		<ol><li>Foreign organizations meeting the check here and attach computati</li></ol>	e 85% test, on
H_(	_	type of organization: X Section 501(c)(3) ex	empt private foundation		E If private foundation status was	s terminated
$\perp$			Other taxable private founda	ation	under section 507(b)(1)(A), ch	eck here
		arket value of all assets at end of year   J Accounti		Accrual	F If the foundation is in a 60-more	
			ther (specify)	:- \	under section 507(b)(1)(B), ch	eck here
_	\$	12,382,923. (Part I, colun	nn (d), must be on cash bas	ils.)		٩٧
Pa	ırt I	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)	(a) Revenue and expenses per books	(b) Net investment income	income for	Disbursements charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	144,742.		N/A	
	2	Check if the foundation is not required to attach Sch. B				
	3	Interest on savings and temporary cash investments	12.	12.		TEMENT 1
	4	Dividends and interest from securities	174,863.	174,863.	STA	TEMENT 2
	5a	Gross rents				
	b	Net rental income or (loss)	500 004			
ě	6a	Net gain or (loss) from sale of assets not on line 10	730,234.			
Revenue	_b	Gross sales price for all assets on line 6a 1,651,036.	4	720 224		
Вè	7	Capital gain net income (from Part IV, line 2)		730,234.		
	8	Net short-term capital gain				
	10a	Income modifications Gross sales less returns				
		and allowances				
		Gross profit or (loss)				
	11	Other income				
	12	Total. Add lines 1 through 11	1,049,851.	905,109.		
	13	Compensation of officers, directors, trustees, etc.	26,625.	0.		26,625.
		Other employee salaries and wages				
ý		Pension plans, employee benefits				
	16a	Legal fees	40.005	1 000		46 545
De	b	Accounting fees STMT 3	18,385.	1,838.		16,547.
Û		Other professional fees STMT 4	54,230.	54,230.		0.
ăţ.	1/	Interest STMT 5	3,475.	3,475.		0.
stra	18 19	Depreciation and depletion	3,473.	3,4/3.		0.
n İn		Occupancy				
Adr		Travel, conferences, and meetings				
g		Printing and publications				
ıg a	23	Other expenses STMT 6	7,003.	0.		7,003.
atir		Total operating and administrative				
Operating and Administrative Expense		expenses. Add lines 13 through 23	109,718.	59,543.		50,175.
0	25	Contributions, gifts, grants paid	327,135.			327,135.
	26	Total expenses and disbursements.				
_		Add lines 24 and 25	436,853.	59,543.		377,310.
		Subtract line 26 from line 12:	640.000			
		Excess of revenue over expenses and disbursements	612,998.	045 566		
	1	Net investment income (if negative, enter -0-)		845,566.	N/A	
	C	Adjusted net income (if negative, enter -0-)			IN / A	

В		Ralance Shoots Attached schedules and amounts in the description	Beginning of year	End of	year
Р	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only.	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	17,809.	101,697.	101,697.
		Savings and temporary cash investments	276,682.	371,606.	
	1	Accounts receivable	,	,	•
		Less: allowance for doubtful accounts			
	4	Pledges receivable ▶			
		Less: allowance for doubtful accounts			
	5	Grants receivable			
		Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable			
	'	Less: allowance for doubtful accounts			
S	8	Inventories for sale or use			
Assets	q	Prepaid expenses and deferred charges			
Asi	102	Investments - U.S. and state government obligations			
		Investments - corporate stock STMT 8	2 957 042	2 939 570	6,120,048.
	0	Investments - corporate bonds STMT 9	1,862,853.	2,263,750.	2,256,744.
	1,1	Investments - land, buildings, and equipment: basis	1,002,033.	2,203,730.	2,230,744.
	'''	Investments "tanu, bunuings, and equipment basis"			
	10	Less: accumulated depreciation			
	1	Investments - mortgage loans	722,602.	717,073.	894,817.
	13	Investments - other STMT 10	122,002.	111,013.	034,017.
	14	Land, buildings, and equipment: basis			
	4-	Less: accumulated depreciation	2 212 225	2 071 222	2 620 011
	1	Other assets (describe ► STATEMENT 11)	2,212,825.	2,071,333.	2,638,011.
	16	Total assets (to be completed by all filers - see the	0 040 013	0 465 000	10 200 002
_	4-	instructions. Also, see page 1, item I)	8,049,813.	8,465,029.	12,382,923.
		Accounts payable and accrued expenses			
		Grants payable			
ies		Deferred revenue			
Ħ		Loans from officers, directors, trustees, and other disqualified persons			
Liabilities	21	Mortgages and other notes payable	1 255 572	4 266 652	
_	22	Other liabilities (describe <b>STATEMENT 12</b> )	1,366,670.	1,366,670.	
				4 044 4-0	
_	23	Total liabilities (add lines 17 through 22)	1,366,670.	1,366,670.	
		Foundations that follow FASB ASC 958, check here			
es		and complete lines 24, 25, 29, and 30.			
auc	1	Net assets without donor restrictions	5,836,988.	6,393,696.	
Fund Balaı	25	Net assets with donor restrictions	846,155.	704,663.	
μĒ		Foundations that do not follow FASB ASC 958, check here ▶ 📖			
Ē		and complete lines 26 through 30.			
ō	26	Capital stock, trust principal, or current funds			
ets	27	Paid-in or capital surplus, or land, bldg., and equipment fund			
Net Assets	28	Retained earnings, accumulated income, endowment, or other funds			
et /	29	Total net assets or fund balances	6,683,143.	7,098,359.	
Ž					
_	30	Total liabilities and net assets/fund balances	8,049,813.	8,465,029.	
P	art	Analysis of Changes in Net Assets or Fund Ba	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 2	29		
	(mus	st agree with end-of-year figure reported on prior year's return)		1	6,683,143.
		amount from Part I, line 27a			612,998.
3	Othe	r increases not included in line 2 (itemize)			0.
		lines 1, 2, and 3		4	7,296,141.
5	Decr	eases not included in line 2 (itemize) 🕨		TEMENT 7 5	197,782.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	lumn (b), line 29	6	7,098,359.

Pa	rt IV Capital Gains	and Losses for Tax on Inv	estment Incom					
		the kind(s) of property sold (for example the kind(s) of common stock, 200 shs.		(b)	How acq P - Purcha D - Donati	uired ase on	) Date acquired mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a \	WELLS FARGO SU	MMARY						
ь 7	WELLS FARGO SU	MMARY						
c (	CAPITAL GAINS	DIVIDENDS						
d								
е								
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other b plus expense of s			((	(h) Gain or (loss) (e) plus (f) minus (	
a	167,168.		162	,326.	,			4,842.
b	1,461,690.			,476.				4,842. 703,214. 22,178.
С	22,178.							22,178.
d	•							
е								
(	Complete only for assets showing	g gain in column (h) and owned by th	e foundation on 12/31/6	69.		(I) G	ains (Col. (h) gain	minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. over col. (j), if a			col. (k	), but not less thar osses (from col. (l	1 -0-) <b>or</b>
а								4,842.
b								4,842. 703,214. 22,178.
С								22,178.
d								•
е								
3 No		pital loss)	n Part I, line 7 (6):	}	3		N/A	730,234.
		sed on Investment Income	(Section 4940)	a), 4940	(b), or	4948 - s		ons)
1a	Exempt operating foundations	described in section 4940(d)(2), check	here and e	nter "N/A" o	on line 1.	)		-
	Date of ruling or determination	( / ( / )				ions)	1	11,753.
b	-	enter 1.39% (0.0139) of line 27b. Exe		-		´ }		•
		2, col. (b)						
2		tic section 4947(a)(1) trusts and taxab					2	0.
		(-)(-)			- /		3	11,753.
		tic section 4947(a)(1) trusts and taxab			-0-)		4	0.
		<b>me.</b> Subtract line 4 from line 3. If zero					5	11,753.
	Credits/Payments:							
	*	nd 2020 overpayment credited to 202	1 6a		1.0	,800.		
		tax withheld at source				0.		
		tension of time to file (Form 8868)			3	,500.		
		y withheld				0.		
		d lines 6a through 6d					7	14,300.
8	Enter any nenalty for undernav	ment of estimated tax. Check here	if Form 2220 is atta				8	4.
		and 8 is more than 7, enter <b>amount ow</b>					9	
		than the total of lines 5 and 8, enter th					10	2,543.
		be: Credited to 2022 estimated tax				funded	11	<u> </u>

# Form 990-PF (2021) THE GREATER MONTANA FOUNDATION Part VI-A Statements Regarding Activities

Гα	Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	
	any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			
	Did the foundation file Form 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:			
	(1) On the foundation. $\blacktriangleright$ \$ (2) On foundation managers. $\blacktriangleright$ \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers. ► \$0 .			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		X
	If "Yes," attach a detailed description of the activities.			
3	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
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? N/A	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "Yes," attach the statement required by General Instruction T.			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
	By language in the governing instrument, or			
	• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6		Х
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XIV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered. See instructions.			
	MT			
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 General Instruction G? If "No," attach explanation	8b	X	
9	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	9		Х
	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
	section 512(b)(13)? If "Yes," attach schedule. See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?			
	If "Yes," attach statement. See instructions	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address WWW.GREATERMONTANA.ORG			
4	The books are in care of $\blacktriangleright$ BRUCE WHITTENBERG Telephone no. $\blacktriangleright$ 406-6		<u>623</u>	
	Located at ► 2076 SCOTT DRIVE, HELENA, MT ZIP+4 ►5	<u>9601</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041 -</b> check here		▶	
	and enter the amount of tax-exempt interest received or accrued during the year <b>\(\bigs\)</b>	N	/A	
16	At any time during calendar year 2021, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
	foreign country >			

Form 990-PF (2021) THE GREATER MONTANA FOUNDATION

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
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1a(1)		Х
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	1a(2)		Х
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1a(3)		Х
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1a(4)		Х
	(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? (Exception. Check "No"	1a(5)		Х
	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(6)		Х
b	o 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		
C	Organizations relying on a current notice regarding disaster assistance, check here			
d	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
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)):			
а	At the end of tax year 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 $\blacktriangleright$ ,,,,,			
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 all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	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>▶</b>			
За	a 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	o 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.) N/A	3b		
	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
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

Part VI-B	Statements Regarding Activities for Which F	Form 4720 May Be F	Required (contin	ued)			
5a During the	year, did the foundation pay or incur any amount to:					Yes	No
(1) Carry	on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?			5a(1)		Х
	ice the outcome of any specific public election (see section 4955); o						
any vo	ter registration drive?				5a(2)		Х
(3) Provid	e a grant to an individual for travel, study, or other similar purposes'	?			5a(3)		Х
	e a grant to an organization other than a charitable, etc., organization						
• •	d)(4)(A)? See instructions				5a(4)		Х
	e for any purpose other than religious, charitable, scientific, literary,						
	evention of cruelty to children or animals?				5a(5)		Х
<b>b</b> If any answ	rer is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify unc	der the exceptions described i	n Regulations				
	4945 or in a current notice regarding disaster assistance? See instru			N/A	5b		
	ns relying on a current notice regarding disaster assistance, check h						
	er is "Yes" to question 5a(4), does the foundation claim exemption fr						
expenditure responsibility for the grant? N/A							
	ach the statement required by Regulations section 53.4945-5(d).				5d		
	ndation, during the year, receive any funds, directly or indirectly, to p	nav nramiume on					
	benefit contract?				6a		Х
h Did the fou	ndation, during the year, pay premiums, directly or indirectly, on a p	arcanal hanafit contract?			6b		X
	indation, during the year, pay premiums, directly of multectly, on a p	ersonal Denemi Contract:			00		- 22
	,	holter transaction?			7a		Х
	during the tax year, was the foundation a party to a prohibited tax s the foundation receive any proceeds or have any net income attribu				7b		Λ
	dation subject to the section 4960 tax on payment(s) of more than \$			1117.25	70		
	,				8		v
Part VII	achute payment(s) during the year? Information About Officers, Directors, Trusto		nagore Highly		0		<u> </u>
1 art vii	Paid Employees, and Contractors	ees, Foundation wa	magers, mgm	,			
1 List all offic	cers, directors, trustees, and foundation managers and t	heir compensation.					
	, , , ,	(b) Title, and average	(c) Compensation	(d) Contributions t	0	<b>(e)</b> Exp	ense
	(a) Name and address	hours per week devoted to position	(If not paid,	(d) Contributions t employee benefit pla and deferred compensation	is a	ccount, allowar	other
		ιο μοδιτίστι	enter -0-)	compensation		allowal	1063
CEE CUV	гемент 13		26,625.	0			0.
DEE DIA	IEMBNI IS		20,025.		•		<u> </u>
2 Compones	tion of five highest-paid employees (other than those inc	luded on line 1) If none	optor "NONE "				
2 Compensa	tion of five highest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions t	o	(e) Exp	ense
<b>(a)</b> Nar	ne and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit pla and deferred	is a	ccount,	other
	227	devoted to position		compensation		allowar	nces
N	ONE						
					-		
					$\perp$		
Total number o	f other employees paid over \$50,000						0

3 Five highest-paid independent contractors for professional services. If no	ne, enter "NONE."	
(a) Name and address of each person paid more than \$50,000	<b>(b)</b> Type of service	(c) Compensation
NONE	( ) 31	
110112		
Total number of others receiving over \$50,000 for professional services		• C
Part VIII-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include rele	vant statistical information such as the	
number of organizations and other beneficiaries served, conferences convened, research p		Expenses
1 N/A		
-1/		-
2		
	4	-
3		
×		
4		
Part VIII-B   Summary of Program-Related Investments		•
Describe the two largest program-related investments made by the foundation during the ta	x year on lines 1 and 2.	Amount
1 N/A		
2		
		]
All other program-related investments. See instructions.		
3		
		1
		1
		1
		1
Total. Add lines 1 through 3	<b>•</b>	0.

Part IX Minimum Investment Return (All domestic	foundations must complete th	is part. Foreign foundation	s, see instructions.)
1 Fair market value of assets not used (or held for use) directly in carry	ing out charitable, etc., purposes:		
a Average monthly fair market value of securities		1a	8,958,627.
			443,142.
c Fair market value of all other assets (see instructions)		1c	
d Total (add lines 1a, b, and c)		1d	9,401,769.
e Reduction claimed for blockage or other factors reported on lines 1a			•
1c (attach detailed explanation)	1e	0.	
2 Acquisition indebtedness applicable to line 1 assets		2	0.
Subtract line 2 from line 1d			9,401,769.
4 Cash deemed held for charitable activities. Enter 1.5% (0.015) of line	3 (for greater amount, see instruct	ions) 4	141,027.
Net value of noncharitable-use assets. Subtract line 4 from line 3			9,260,742.
			463,037.
Part X Distributable Amount (see instructions) (Sect foreign organizations, check here ▶ and do not co		erating foundations and certain	
Minimum investment return from Part IX, line 6		1	463,037.
2a Tax on investment income for 2021 from Part V, line 5		11,753.	•
<b>b</b> Income tax for 2021. (This does not include the tax from Part V.)	2b	•	
c Add lines 2a and 2b	·	2c	11,753.
B Distributable amount before adjustments. Subtract line 2c from line 1		3	451,284.
Recoveries of amounts treated as qualifying distributions			0.
5 Add lines 3 and 4			451,284.
B Deduction from distributable amount (see instructions)			0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter h			451,284.
Part XI Qualifying Distributions (see instructions)			•
Amounts paid (including administrative expenses) to accomplish cha			
a Expenses, contributions, gifts, etc total from Part I, column (d), line			377,310.
<b>b</b> Program-related investments - total from Part VIII-B		1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carr			
Amounts set aside for specific charitable projects that satisfy the:			
a Suitability test (prior IRS approval required)		3a	
<b>b</b> Cash distribution test (attach the required schedule)			
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on			377,310.

### Part XII Undistributed Income (see instructions)

		(a) Corpus	(b) Years prior to 2020	(c) 2020	( <b>d</b> ) 2021
1	Distributable amount for 2021 from Part X,	оограз	10ar3 prior to 2020	2020	
_	line 7				451,284.
_	Undistributed income, if any, as of the end of 2021:			12 002	
	a Enter amount for 2020 only			12,002.	
ı	o Total for prior years:		0		
	Excess distributions carryover, if any, to 2021:		0.		
	L F 0047				
	5 0040				
	<b>c</b> From 2018 <b>d</b> From 2019				
	- F 0000				
	f <b>Total</b> of lines 3a through e	0.			
	Qualifying distributions for 2021 from	0.			
4	Part XI, line 4: > \$ 377,310.				
	a Applied to 2020, but not more than line 2a			12,002.	
	<b>b</b> Applied to undistributed income of prior			12,002.	
'	years (Election required - see instructions)		0.		
	c Treated as distributions out of corpus		<u></u>		
,	(Election required - see instructions)	0.	A		
	d Applied to 2021 distributable amount	0.			365,308.
	e Remaining amount distributed out of corpus	0.			303,300.
	Excess distributions carryover applied to 2021	0.			
J	(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:				
	2 Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0.			
ı	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		0.		
	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			0.	
	lines 4d and 5 from line 1. This amount must				
	be distributed in 2022				85,976.
7	Amounts treated as distributions out of				03,370.
•	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	0.			
9	Excess distributions carryover to 2022.				
-	Subtract lines 7 and 8 from line 6a	0.			
10	Analysis of line 9:				
	a Excess from 2017				
	b Excess from 2018				
	c Excess from 2019				
	d Excess from 2020				
	Excess from 2021				

123601 12-10-21 Form **990-PF** (2021)

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

FOR 2021 GRANTS THE DEADLINE IS APRIL 1, 2021

MEETS GOALS OF FOUNDATION.

	l			
Recipient	If recipient is an individual, show any relationship to	Foundation	Purpose of grant or	
Name and address (home or business)	any foundation manager	status of	contribution	Amount
Name and address (nome or business)	or substantial contributor	recipient	**	
a Paid during the year				
ROW LANGUAGE CONSORTIUM	N/A	501(C)(3)	TO HELP PRODUCE A	
925 GRAND AVE, SUITE 127			YOUTUBE CHILDREN'S	
BILLINGS, MT 59102			VIDEO SERIES,	
,			FEATURING NATIVE	
			LANGUAGE SPEAKERS IN	7,000
				,
RIENDS OF MONTANA PBS	N/A	501(C)(3)	SUPPORT FOR NUMEROUS	
.O. BOX 10715			PROGRAMS INCLUDING	
OZEMAN, MT 59719			BACKROADS OF MONTANA,	
			11TH AND GRANT, AND	
			NEW PROGRAMS.	50,000
MAPS MEDIA INSTITUTE	N/A	501(C)(3)	CONTINUED SUPPORT FOR	
15 MADISON ST			THE AWARD-WINNING FREE	
AMILTON, MT 59840			AFTER-SCHOOL PROGRAM	
			SERVING FOUR COUNTY	
			SCHOOLS.	24,000
ONDANA DROADGAGEERG AGGOGTAETON	NT / 2	ASSOCIATION	ED AWADDO EOD	
ONTANA BROADCASTERS ASSOCIATION	N/A	ASSOCIATION	EB AWARDS FOR	
3914 RAINBOW BEND DRIVE			EXCELLENCE IN	
BONNER, MT 59823			COMMERCIAL	
			BROADCASTING.	21,635
MONTANA FREE PRESS	N/A	501(C)(3)	NEW SEASON OF THE	
PO BOX 1425	,		"LONG STREETS	
HELENA MT 59624			PROJECT."	20 000
<del>·</del>	ONTINUATION SHE	፲ ፻ጥ ( S )	PROJECT. ▶ 3a	20,000 327,135
b Approved for future payment	<u> </u>	22.(.2.)	, , , , , , , , , , , , , , , , , , ,	327,133
NONE				
			▶ 3b	

### Part XV-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
•	(a) Business	<b>(b)</b> Amount	(c) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	7 illiount	code	Amount	Tunicuon moonio
a					
b					
C					
d					
e					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments			14	12.	
4 Dividends and interest from securities			14	174,863.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
<b>b</b> Not debt-financed property					
6 Net rental income or (loss) from personal property					
7 Other investment income					
8 Gain or (loss) from sales of assets other than inventory			14	22,178.	708,056.
9 Net income or (loss) from special events				,	•
<b>10</b> Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
c					
d					
e					
12 Subtotal. Add columns (b), (d), and (e)		0.		197,053.	708,056.
13 Total. Add line 12, columns (b), (d), and (e)				13	905,109.
(See worksheet in line 13 instructions to verify calculations.)					

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

Line No.	Explain below how each activity for which income is reported in column (e) of Part XV-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
8	THE GREATER MONTANA FOUNDATION BENEFITS THE PEOPLE OF MONTANA BY
	ENCOURAGING ELECTRONIC COMMUNICATIONS WITH AN EMPHASIS ON ISSUES,
	TRENDS AND VALUES OF IMPORTANCE TO PRESENT AND FUTURE GENERATIONS
-	OF MONTANANS.
-	
-	

## THE GREATER MONTANA FOUNDATION 81-6009847 Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations Part XVI

				ig with any other organizatio	on described in sec	ction 501(c)		res	NO
,	, , , , =	•		g to political organizations?					
	s from the reporting founda		-	=			4 (4)		37
									X
							1a(2)		X
<b>b</b> Other tra							41.74		37
									_X_
									X
									X
									X
									X
				ons					X
				ployees				oto	X
				edule. Column (b) should alv				eis,	
	<b>d)</b> the value of the goods, (			ed less than fair market valu	ie iii any transactio	in or snaring arrangen	ient, snow m		
(a) Line no.	(b) Amount involved			e exempt organization	(d) December	an of transfers transaction	a and abouted as		
(a) Line no.	(b) Amount involved	(c) Name of		5 exempt organization	(u) Description	on of transfers, transaction	s, and snaring an	rangeme	nts
			N/A						
					4				
				1					
20 le the for	undation directly or indirect	ly affiliated with or r	olated to one	or more tax-exempt organi	zatione described				
	-	-					□ vaa	v	No
			2/16 11011				Yes	LA	_ NO
<b>b</b> If Yes, C	complete the following sche (a) Name of org			(b) Type of organization	<u> </u>	(c) Description of rela	ationchin		
	. ,	allization		(b) Type of organization		(c) Description of rel	alionsnip		
	N/A								
and h				ng accompanying schedules and n taxpayer) is based on all inform			May the IRS	discuss t	this
Sign	onor, it is true, correct, and con	proto. Beolaration of pre	paror (outor tha	I axpayor, to based on all fillers	Nation of Which propar	or nas any knowleage.	return with the shown below	? See in	er str.
Here					TRUST	EE	_ X Yes		No
Sig	nature of officer or trustee			Date	Title				
<u> </u>	Print/Type preparer's na	me	Preparer's s	ignature	Date	Check if	PTIN		
	ALEX L. SC	HILLINGER	,			self- employed			
Paid	CPA		-				P01699	401	
Preparer		KERMIER C	LARK . C	AMPANELLA, ST	EVENS P	C Firm's FIN ► 81			
Use Only			,	,	, _ , _ •			. •	
• •	Firm's address ► 30	60 СУВЕВИ	EU UB	STE 2					
	1	LENA, MT	-	211 2		Phone no. (40	6) 442	_60	<b>0</b> 1
	1112.	LLIKA, KI	<u> </u>			Tritonolio. (4)	Form <b>99</b> (		

204 500.

Part XIV Supplementary Information **Grants and Contributions Paid During the Year (Continuation)** If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount contribution any foundation manager status of Name and address (home or business) recipient or substantial contributor MONTANA PUBLIC RADIO 501(C)(3) CONTINUED PROGRAM N/A 32 CAMPUS DR SUPPORT IN AREAS SUCH MISSOULA, MT 59812-8064 AS GENERAL ECONOMIC REPORTING AND OTHER PROGRAMS. 25,000. 501(C)(3) UNIVERSITY OF MONTANA SCHOOL OF N/A IN CONTINUED SUPPORT JOURNALISM FOR VARIOUS PROGRAMS 32 CAMPUS DR AND FOR THE PURCHASE MISSOULA, MT 59812 OF EQUIPMENT. 19,500. MONTANA TELEVISION NETWORK N/A COMMERCIAL CONTINUED SUPPORT FOR THE STORY-TELLING 100 W LYNDALE HELENA, MT 59601 SERIES, "UNDER THE BIG SKY." 40,000. MONTANA HISTORY FOUNDATION N/A 501(C)(3) AN ORIGINAL PODCAST 1750 WASHINGTON ST SERIES, "REFRAMING HELENA, MT 59601 RURAL." 8,000. MONTANA STATE UNIVERSITY FOUNDATION N/A 501(C)(3) FOR A FILM BASED ON A 1501 SOUTH 11TH AVE SPECIAL REPORT OF THE BOZEMAN, MT 59712 WORK AT MONTANA STATE UNIVERSITY, CLIMATE 10,000. CHANGE, AND HUMAN 501(C)(3) FROM THE HEART PRODUCTIONS N/A FOR MONTANA SESSIONS, 1455 MANDALAY BEACH ROAD A COLLECTION OF SHORT OXNARD, CA 93035-2845 FILMS FEATURING SOME OF MONTANA'S FINEST MUSICIANS PERFORMING 20,000. N/A 501(C)(3) ONE MONTANA TO SUPPORT BRIEF 280 W KAGY BLVD D233 VIDEOS, INCLUDING "THE BOZEMAN, MT 59715 MONTANA WAY," TO HELP BRIDGE THE URBAN-RURAL DIVIDE. 5,000. 501(C)(3) MONTANA KIDS CO-OP N/A FOR SHORT, CHILD-FOCUSED VIDEOS, 34224 S FINLEY POINT RD POLSON, MT 59860 EMPHASIZING NATIVE AMERICAN FOODS AND HEALTHY EATING. 14,500. BIG SKY FILM INSTITUTE N/A 501(C)(3) FOR THE YOUTH AND 113 W FRONT ST #105 NATIVE AMERICAN MISSOULA, MT 59802 DOCUMENTARY OUTREACH PROGRAM, WITH A FOCUS ON NONFICTION FILMS. 10,000. GRANITE COUNTY HISTORICAL SOCIETY FOR "MONTANA RISK N/A 501(C)(3) 135 S SANSOME ST TAKERS," A PROPOSED DOCUMENTARY ON THE PHILIPSBURG, MT 59858 HISTORY OF MINING IN THE PHILIPSBURG AREA, 20,000.

Total from continuation sheets

Part XIV Supplementary Information **Grants and Contributions Paid During the Year (Continuation)** If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to Amount any foundation manager or substantial contributor Name and address (home or business) MONTANA PLAYWRIGHTS NETWORK N/A 501(C)(3) FOR "MONTANANS AT WORK" RADIO SERIES. 1319 HELENA AVE HELENA, MT 59601 3,000. 501(C)(3) UNIVERSITY OF MONTANA SCHOOL OF N/A SUPPORT FOR THE JOURNALISM MONTANA MEDIA LAB AT 32 CAMPUS DR THE UNIVERSITY OF MISSOULA, MT 59812 MONTANA SCHOOL OF JOURNALISM. 5,500. MAPS MEDIA INSTITUTE N/A 501(C)(3) CONTINUED SUPPORT FOR 515 MADISON ST THE SUCCESSFUL HAMILTON, MT 59840 STATEWIDE OUTREACH PROGRAM. 24,000.

Total from continuation sheets

Part XIV Supplementary Information
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution
NAME OF RECIPIENT - CROW LANGUAGE CONSORTIUM
TO HELP PRODUCE A YOUTUBE CHILDREN'S VIDEO SERIES, FEATURING NATIVE
LANGUAGE SPEAKERS IN BOTH CROW AND NORTHERN CHEYENNE.
NAME OF RECIPIENT - MONTANA STATE UNIVERSITY FOUNDATION
FOR A FILM BASED ON A SPECIAL REPORT OF THE WORK AT MONTANA STATE
UNIVERSITY, CLIMATE CHANGE, AND HUMAN HEALTH IN MONTANA.
NAME OF RECIPIENT - FROM THE HEART PRODUCTIONS
FOR MONTANA SESSIONS, A COLLECTION OF SHORT FILMS FEATURING SOME OF
MONTANA'S FINEST MUSICIANS PERFORMING LIVE IN OUTDOOR LOCATIONS
THROUGHOUT THE STATE.

### Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Organization type (check one):

### **Schedule of Contributors**

Attach to Form 990 or Form 990-PF.
 Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Name of the organization

THE GREATER MONTANA FOUNDATION

81-6009847

Filers of:	Section:
Form 990 or 990-EZ	501(c)( ) (enter number) organization
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation
	527 political organization
Form 990-PF	X 501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
Check if your organization i	s covered by the <b>General Rule</b> or a <b>Special Rule.</b>
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	
X For an organizatio	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or
	one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.
1 1 37	
Special Rules	
Fau an annaiseatia	
	n described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under 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
	g 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;
	, line 1. Complete Parts I and II.
	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one
	g the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, onal purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering
	o) instead of the contributor name and address), II, and III.
	n described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the
	s exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box here the total contributions that were received during the year for an exclusively religious, charitable, etc.,
•	mplete any of the parts unless the <b>General Rule</b> applies to this organization because it received <i>nonexclusively</i>
religious, charitabl	le, etc., contributions totaling \$5,000 or more during the year
Coution. An avantiantian th	not ion't covered by the Congrel Bule and/or the Special Bules descrit file School de D./Ferm 200\ hut it was
•	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it <b>must</b> e 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
•	ig requirements of Schedule B (Form 990).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2021)

Name of organization

Employer identification number

### THE GREATER MONTANA FOUNDATION

81-6009847

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	ıl space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	EMILY J CRANEY FAMILY EDUCATION TRUST  2076 SCOTT DRIVE  HELENA, MT 59601	\$ <u>140,069</u> .	Person Payroll Noncash X (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	EMILY J CRANEY FAMILY EDUCATION TRUST  2076 SCOTT DRIVE  HELENA, MT 59601	\$4,673.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization Employer identification number

### THE GREATER MONTANA FOUNDATION

81-6009847

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	MISCELLANEOUS PUBLICLY TRADED STOCKS, ETFS, AND MUTUAL FUNDS		
		\$140,069.	09/16/21
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		\$	Sahadula B (Farm 000) (0004)

Name of organization **Employer identification number** 81-6009847 THE GREATER MONTANA FOUNDATION 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 Part III 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. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. fŕom (c) Use of gift (b) Purpose of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. fŕom (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

**Underpayment of Estimated Tax by Corporations** 

Attach to the corporation's tax return.

FORM 990-PF

OMB No. 1545-0123

Department of the Treasury Internal Revenue Service

► Go to www.irs.gov/Form2220 for instructions and the latest information.

THE GREATER MONTANA FOUNDATION

**Employer identification number** 81-6009847

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							
							44 850
1 Total tax (see instructions)						1	11,753.
<b>2 a</b> Personal holding company tax (Schedule PH (Form 1120), li	ne 26	) included on line 1		2a			
<b>b</b> Look-back interest included on line 1 under section 460(b)(2				24		-	
contracts or section 167(g) for depreciation under the incom	•			2b			
00.11 acts 0. 000.10.1 (9) 10. acp. 00.11.0.1 and 1.10 1.100.1						•	
c Credit for federal tax paid on fuels (see instructions)				2c			
d Total. Add lines 2a through 2c						2d	
3 Subtract line 2d from line 1. If the result is less than \$500, d							
does not owe the penalty						3	11,753.
4 Enter the tax shown on the corporation's 2020 income tax re	eturn.	See instructions. Caution	: If the tax	is zero			
or the tax year was for less than 12 months, skip this line an	d ente	r the amount from line 3	on line 5 $_{\cdot\cdot}$			4	5,750.
<b>5 Required annual payment.</b> Enter the <b>smaller</b> of line 3 or lin	e 4. If	the corporation is require	d to skip li	ne 4,			
enter the amount from line 3						5	5,750.
Part II Reasons for Filing - Check the boxes be even if it does not owe a penalty. See instructions.		at apply. If any boxes are	checked, t	ne corporation	must file Form 22	220	
The corporation is using the adjusted seasonal insta							
7 The corporation is using the annualized income insta			n the prior	unaria tav			
8 The corporation is a "large corporation" figuring its fi Part III Figuring the Underpayment	istret	quired installment based t	ni ule prior	year s lax.			
Tart in Tigaring the Onderpayment		(a)		(b)	(c)		(d)
9 Installment due dates. Enter in columns (a) through (d) the		(a)	-	(0)	(6)		(u)
15th day of the 4th (Form 990-PF filers: Use 5th month),	1						
6th, 9th, and 12th months of the corporation's tax year	9	05/15/21	06/	15/21	09/15/	21	12/15/21
O Required installments. If the box on line 6 and/or line 7		03/13/21	007	13, 11	03/13/		12,13,21
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	3						
for the amounts to enter. If none of these boxes are checked							
enter 25% (0.25) of line 5 above in each column	10	1,438.		1,437.	1,4	38.	1,437.
1 Estimated tax paid or credited for each period. For		•		•	•		
column (a) only, enter the amount from line 11 on line 15.							
See instructions	11			2,900.	1,4	50.	6,450.
Complete lines 12 through 18 of one column							
before going to the next column.							
2 Enter amount, if any, from line 18 of the preceding column	12					25.	37.
3 Add lines 11 and 12	13			2,900.	1,4	75.	6,487.
4 Add amounts on lines 16 and 17 of the preceding column	14	_		1,438.			
5 Subtract line 14 from line 13. If zero or less, enter -0-	15	0.		1,462.	1,4	75.	6,487.
6 If the amount on line 15 is zero, subtract line 13 from line							
14. Otherwise, enter -0-	16			0.		0.	
7 Underpayment. 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		1 420					
column. Otherwise, go to line 18	17	1,438.					
8 Overpayment. If line 10 is less than line 15, subtract line 10	4.0			25.		27	
from line 15. Then go to line 12 of the next column to to Part IV on page 2 to figure the penalty. Do not go to Part	18 IV if ti	l here are no entries on lin	ie 17 - no r			37.	

LHA For Paperwork Reduction Act Notice, see separate instructions. Form 2220 (2021)

Form 2220 (2021)

81-6009847 Page 2

Part IV Figuring the Penalty

	Enter the date of payment or the 15th day of the 4th month after the close of the tax year, whichever is earlier.  C corporations with tax years ending June 30 and S corporations: Use 3rd month instead of 4th month.  Form 990-PF and Form 990-T filers: Use 5th month instead of 4th month.) See instructions  Number of days from due date of installment on line 9 to the date shown on line 19  Number of days on line 20 after 4/15/2021 and before 7/1/2021  Underpayment on line 17 x Number of days on line 21 x 3% (0.03)  Number of days on line 20 after 6/30/2021 and before 10/1/2021  Underpayment on line 17 x Number of days on line 23 x 3% (0.03)	19 20 21 22 23	\$			
	Number of days on line 20 after 4/15/2021 and before 7/1/2021  Underpayment on line 17 x Number of days on line 21 x 3% (0.03) 365  Number of days on line 20 after 6/30/2021 and before 10/1/2021	21	\$			
	Number of days on line 20 after 4/15/2021 and before 7/1/2021  Underpayment on line 17 x Number of days on line 21 x 3% (0.03)  365  Number of days on line 20 after 6/30/2021 and before 10/1/2021	21	\$			
	Underpayment on line 17 x Number of days on line 21 x 3% (0.03) $\dots$ 365 Number of days on line 20 after 6/30/2021 and before 10/1/2021	22	\$			
ľ	365  Number of days on line 20 after 6/30/2021 and before 10/1/2021		\$			
ı		23		\$	\$	\$
١	Indernaument on line 17 v Number of days on line 99 v 99/ (0.00)					
	Underpayment on line 17 x Number of days on line 23 x 3% (0.03)	24	\$	\$	\$	\$
	Number of days on line 20 after 9/30/2021 and before 1/1/2022	25				
ι	Underpayment on line 17 x Number of days on line 25 x 3% (0.03) 365	26	\$	\$	\$	\$
١	Number of days on line 20 after 12/31/2021 and before 4/1/2022	27	SEI	E ATTACHED	WORKSHEET	
ι	Underpayment on line 17 x Number of days on line 27 x 3% (0.03) $\dots$ 365	28	\$	\$	\$	\$
١	Number of days on line 20 after 3/31/2022 and before 7/1/2022	29				
ι	Underpayment on line 17 x Number of days on line 29 x *%	30	\$	\$	\$	\$
١	Number of days on line 20 after 6/30/2022 and before 10/1/2022	31				
ι	Underpayment on line 17 x Number of days on line 31 x *%	32	\$	\$	\$	\$
١	Number of days on line 20 after 9/30/2022 and before 1/1/2023	33				
ι	Underpayment on line 17 x Number of days on line 33 x *%	34	\$	\$	\$	\$
١	Number of days on line 20 after 12/31/2022 and before 3/16/2023	35				
ι	Underpayment on line 17 x Number of days on line 35 x *%	36	\$	\$	\$	\$
Å	Add lines 22, 24, 26, 28, 30, 32, 34, and 36	37	\$	\$	\$	\$
	Penalty. Add columns (a) through (d) of line 37. Enter the to				I	

line for other income tax returns

\* 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. You can also call 1-800-829-4933 to get interest rate information.

Form **2220** (2021)

# FORM 990-PF UNDERPAYMENT OF ESTIMATED TAX WORKSHEET

Name(s)				Identifying Numb	oer
THE GREATER	MONTANA FOUN	IDATION		81-6009	847
(A) *Date	(B) Amount	(C) Adjusted Balance Due	(D) Number Days Balance Due	(E) Daily Penalty Rate	(F) Penalty
		-0-			
05/15/21	1,438.	1,438.	31	.000082192	
06/15/21	1,437.	2,875.			
06/15/21	-2,900.	-25.			
09/15/21	1,438.	1,413.			
09/15/21	-1,450.	-37.			
12/15/21	1,437.	1,400.			
12/15/21	-6,450.	-5,050.	1		
03/31/22	0.	-5,050.	43	.000109589	
05/13/22	-3,500.	-8,550.		·	
nalty Due (Sum of Colum	nn F).				

<sup>\*</sup> Date of estimated tax payment, withholding credit date or installment due date.

FORM 990-PF INTERE	ST ON SAVIN	GS AND TEM	PORARY CA	SH IN	VESTMENTS	STATEMENT	1
SOURCE		(A REVE PER BO	NUE N	ET IN	(B) VESTMENT COME	(C) ADJUSTED NET INCOME	
WELLS FARGO - CHECK	ING		12.				
TOTAL TO PART I, LI	NE 3		12.		12.		_
FORM 990-PF	DIVIDENDS	AND INTER	EST FROM	SECUR	ITIES	STATEMENT	2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	REVE	NUE	(B) NET INVES MENT INCO		
WELLS FARGO - DIV WELLS FARGO - INT	155,301. 41,740.	-		,123. ,740.	133,12 41,74		
TO PART I, LINE 4	197,041.	22,17	8. 174	,863.	174,86	3.	_
FORM 990-PF		ACCOUNTI	NG FEES			STATEMENT	3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC	ST-	(C) ADJUSTED NET INCOM		
ACCOUNTING FEES		18,385.	1,	838.		16,54	7.
TO FORM 990-PF, PG	1, LN 16B	18,385.	1,	838.		16,54	7.
FORM 990-PF	OT	HER PROFES	SIONAL FE	ES		STATEMENT	<u> </u>
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM		
WELLS FARGO INVESTM FEES INVESTMENT FEES	ENT	54,192. 38.	54,	192. 38.			0.
TO FORM 990-PF, PG	1, LN 16C	54,230.	54,	230.			0.
	==						

FORM 990-PF	TAX	ES	S	STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITAI PURPOSI	
FOREIGN TAXES	3,475.	3,475.			0.
- TO FORM 990-PF, PG 1, LN 18 =	3,475.	3,475.			0.
FORM 990-PF	OTHER E	XPENSES	S	STATEMENT	6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITAI PURPOSI	
OFFICE SUPPLIES TRAVEL/MEETINGS LIABILITY INSURANCE MEMBERSHIPS/DUES ADVERTISING & MARKETING POSTAGE	187. 2,862. 1,108. 230. 2,406. 210.	0. 0. 0. 0. 0.		2,80 1,10 2, 2,40	08. 30.
TO FORM 990-PF, PG 1, LN 23	7,003.	0.		7,0	03.
FORM 990-PF OTHER DECREASE	ES IN NET AS	SETS OR FUND I	BALANCES S	TATEMENT	7
DESCRIPTION	U			AMOUNT	
EXCISE TAX PAID NOT REFLECTEI RECONCILIATION AMOUNT UNREALIZED BOOK LOSS REFLECTE UNREALIZED GAIN ON DONATED ST	ED ON CRUT S'	TATEMENTS		11,9 17,1 141,4	61.
INCOME	TOOK THOUGH	Z III COMINIDO		27,1	51.
TOTAL TO FORM 990-PF, PART II	II, LINE 5			197,78	82.

FORM 990-PF C	ORPORATE STOCK		STATEMENT 8
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
MARKETABLE SECURITIES		2,939,570.	6,120,048.
TOTAL TO FORM 990-PF, PART II, LI	NE 10B	2,939,570.	6,120,048.
FORM 990-PF C	ORPORATE BONDS		STATEMENT 9
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
BONDS		2,263,750.	2,256,744.
TOTAL TO FORM 990-PF, PART II, LI	NE 10C	2,263,750.	2,256,744.
FORM 990-PF OT	HER INVESTMENTS		STATEMENT 10
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
OTHER INVESTMENTS	FMV	717,073.	894,817.
TOTAL TO FORM 990-PF, PART II, LI	NE 13	717,073.	894,817.
FORM 990-PF	OTHER ASSETS		STATEMENT 11
DESCRIPTION	BEGINNING OF YR BOOK VALUE	END OF YEAR BOOK VALUE	FAIR MARKET VALUE
BROADCASTING BOOK CHARITABLE REMAINDER UNITRUSTS	7,632. 2,205,193.	7,632. 2,063,701.	7,632.
TO FORM 990-PF, PART II, LINE 15	2,212,825.	2,071,333.	2,638,011.

FORM 990-PF	OTHER LIABILITIES		STAT	EMENT 12	
DESCRIPTION	DESCRIPTION			AMOUNT	
PRESENT VALUE OF PLANNED GI LIABILITY	FT	1,366,6	1,366,670. 1,36		
TOTAL TO FORM 990-PF, PART	II, LINE 22	1,366,6	70. 1	,366,670.	
FORM 990-PF PART VII TRUSTE	- LIST OF OFFICERS, DI		STATI	EMENT 13	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB		
BRODY CRANEY 768 E 400 S RIVER HEIGHTS, UT 84321	TRUSTEE 1.00	0.	0.	0.	
RONALD DAVIS P.O. BOX 3389 BUTTE, MT 59702	CHAIRMAN 1.00	0.	0.	0.	
DARLENE CRANEY 784 STEWART HILL COURT RIVER HEIGHTS, UT 84321	TRUSTEE 1.00	0.	0.	0.	
ROB MCDONALD 39373 OVERLOOK BLVD POLSON, MT 59860	TRUSTEE 1.00	0.	0.	0.	
JIM SENST 1300 CENTRAL AVE W GREAT FALLS, MT 59404	VICE CHAIRMAN 1.00	0.	0.	0.	
EDWIN JOHNSON 28 LONESOME LN ANACONDA, MT 59711	TRUSTEE 1.00	0.	0.	0.	
SIDNEY O'MALLEY ARMSTRONG 1038 MONROE AVE HELENA, MT 59601	EXECUTIVE DIRE 5.00	ECTOR (FORMER 26,625.	•	0.	
MICK ROBINSON 4957 FOX TROT DR HELENA, MT 59602	TREASURER 1.00	0.	0.	0.	

THE GREATER MONTANA FOUNDATION			81-6009847	
MONTY WALLIS 4165 JUNE DRIVE BILLINGS, MT 59106	TRUSTEE 1.00	0.	0.	0.
MARY WILLMARTH 220 38TH AVE NE GREAT FALLS, MT 59404	SECRETARY 1.00	0.	0.	0.
LINDA GRAY 2719 PINNACLE PLACE MISSOULA, MT 59808	TRUSTEE 1.00	0.	0.	0.
LEO BERRY P.O. BOX 1697 HELENA, MT 59624	TRUSTEE 1.00	0.	0.	0.
SYDNI TANGARO 3191 FIELDSTONE DR BOZEMAN, MT 59715	TRUSTEE 1.00	0.	0.	0.
BRUCE WHITTENBERG 2076 SCOTT DR HELENA, MT 59601	EXECUTIVE DIRECT 5.00	COR (CURRENT)	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE 6,	PART VII	26,625.	0.	0.