Form **990-PF**

For calendar year 2023 or tax year beginning

Return of Private Foundation

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

, and ending

		oundation	A Empi	oyer identification numi	oer		
		ANTINE FAMILY FUND					
		THE COMMUNITY FOUND. SRVNG SW		1 . 1		-6026270	r' - \
		nd street (or P.O. box number if mail is not delivered to street addr $\mathbf{0X} \ 1673$	oom/suite		hone number (see instruction	ctions)	
		n, state or province, country, and ZIP or foreign postal code					
D	JRAI	NGO CO 81302			C If exe	mption application is pen	ding, check here
3 C	heck a	ıll that apply: Initial return Initial retur	n of a former public cl	narity	D 1. Fo	reign organizations, chec	k here
		Final return Amended	•	,		reign organizations meet	
		Address change Name cha	nge			% test, check here and a	_
- C	heck t	ype of organization: X Section 501(c)(3) exempt private	foundation		F If priv	ate foundation status was	s terminated under
\neg			e private foundation			n 507(b)(1)(A), check he	
		ket value of all assets at J Accounting method:		rual	F If the	foundation is in a 60-mor	th termination
en	d of ve	ear (from Part II, col. (c), Other (specify)				section 507(b)(1)(B), che	
	e 16)	\$ 5,848,388 (Part I, column (d), must					
Pa	rt I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(In) NI - 4 i		(a) A diverte due at	(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books	(b) Net invinco		(c) Adjusted net income	for charitable purposes
		the amounts in column (a) (see instructions).)	DOOKS				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)					
	2	Check X if the foundation is not required to attach Sch. B	815		815		
	3	Interest on savings and temporary cash investments	87,767				
	4	Dividends and interest from securities	61,161		87,767		
	5a	Gross rents					
ne	b	Net rental income or (loss)	329,785				
en,	6a b	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 409, 674	329,103				
Revenue	_	Capital gain net income (from Part IV, line 2)		વ	29,785		
Œ	7 8			J	29,103	0	
	9	Net short-term capital gain				<u> </u>	
	10a	Income modifications Gross sales less returns and allowances					
	b	Less: Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule)					
	12	Total. Add lines 1 through 11	418,367	4	18,367	0	
	13	Compensation of officers, directors, trustees, etc.	0	1			
Expenses	14	Other employee salaries and wages					
î	15	Pension plans, employee benefits					_
ğ	16a	Legal fees (attach schedule)					
_	b	Accounting fees (attach schedule) STMT 1	3,000		1,500		1,500
Ξ̈́	С	Other professional fees (attach schedule) STMT 2	27,028		1,351		25,676
rat	17	Interest					
ist	18	Taxes (attach schedule) (see instructions) STMT 3	3,354		3,354		
Ë	19	Depreciation (attach schedule) and depletion					
þ	20	Occupancy					
₹	21	Travel, conferences, and meetings					
aĎ	22	Printing and publications	155		155		
Operating and Administrative	23		473		473		
æ	24	Total operating and administrative expenses.			_		
ēr		Add lines 13 through 23	34,010		6,833	0	27,176
g	25	Contributions, gifts, grants paid	364,725	1			364,725
_	26	Total expenses and disbursements. Add lines 24 and 25	398,735		6,833	0	391,901
	27	Subtract line 26 from line 12:	40.000				
	a	Excess of revenue over expenses and disbursements	19,632	10	11 504		
	b	Net investment income (if negative, enter -0-)		4	11,534	2	
	С	Adjusted net income (if negative, enter -0-)				0	

Form 990-PF (2023) BALLANTINE FAMILY FUND

Part II Balance Sheets Attached schedules and amounts in the description column Beginning of year End of year should be for end-of-year amounts only. (See instructions.) (a) Book Value (b) Book Value (c) Fair Market Value 20,940 Cash — non-interest-bearing 61,522 20,940 Savings and temporary cash investments 2 Accounts receivable _____ 3 Less: allowance for doubtful accounts 4 Pledges receivable Less: allowance for doubtful accounts 5 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions) Other notes and loans receivable (att. schedule) 7 Less: allowance for doubtful accounts Inventories for sale or use 8 Prepaid expenses and deferred charges 9 Investments — U.S. and state government obligations (attach schedule) 10a Investments — corporate stock (attach schedule) b Investments — corporate bonds (attach schedule) c Investments — land, buildings, and equipment: basis 11 Less: accumulated depreciation (attach sch.) Investments — mortgage loans 12 1,137,523 Investments — other (attach schedule) SEE STATEMENT 5 1,077,309 5,827,448 13 14 Land, buildings, and equipment: basis Less: accumulated depreciation (attach sch.) Other assets (describe) 15 **Total assets** (to be completed by all filers — see the 16 1,138,831 1,158,463 5,848,388 instructions. Also, see page 1, item I) Accounts payable and accrued expenses 17 18 Grants payable iabilities. 19 Loans from officers, directors, trustees, and other disqualified persons 20 Mortgages and other notes payable (attach schedule) 21 22 Other liabilities (describe) Total liabilities (add lines 17 through 22)_____ 0 0 23 Foundations that follow FASB ASC 958, check here and complete lines 24, 25, 29, and 30. Balances Net assets without donor restrictions 24 25 Net assets with donor restrictions Net assets with donor restrictions

Foundations that do not follow FASB ASC 958, check here Fund and complete lines 26 through 30. Capital stock, trust principal, or current funds 240,911 240,911 26 Net Assets or Paid-in or capital surplus, or land, bldg., and equipment fund 31,832 31,832 27 Retained earnings, accumulated income, endowment, or other funds 885,720 28 866,088 1,138,831 29 Total net assets or fund balances (see instructions) 1,158,463 30 Total liabilities and net assets/fund balances (see 1,138,831 1,158,463 instructions) **Analysis of Changes in Net Assets or Fund Balances** Part III 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) 1,138,831 1 2 2 Enter amount from Part I, line 27a 19,632 Other increases not included in line 2 (itemize) 3 1,158,463 Add lines 1, 2, and 3 4 5 Decreases not included in line 2 (itemize) 5 6 Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 29 6 1,158,463

Form **990-PF** (2023)

Forn	n 990-PF (2023) BALLAN'I	INE FAMILY FUND		84-6026270		Page 3
100000000000000000000000000000000000000		and Losses for Tax on Investme				<u> </u>
	(a) List and describe th	ne kind(s) of property sold (for example, real esta ehouse; 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	SEE WORKSHEET					
b						
С						
d						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or plus expen		` '	n or (loss) f) minus (g))
а						
b						
С						
d						
е						
	Complete only for assets showin	g gain in column (h) and owned by the fou	ndation on 12/31/69		(I) Gains (Co	l. (h) gain minus
	(i) FMV as of 12/31/69 (j) Adjusted basis (k) Excess of col. (i) as of 12/31/69 over col. (j), if any				` '	t less than -0-) or rom col. (h))
а						
b						
c						
d						
е						
2	Capital gain net income or (net	If gain, also enter in	•			329,785
•	Net chest town conital main on (If (loss), enter -0- in	_		2	329,163
3	, ,	loss) as defined in sections 1222(5) and (6	<i>'</i>			
		8, column (c). See instructions. If (loss), e	niter -0- in			
D,		sed on Investment Income (Sect	ion 4940(a) 49	40(h) or 4948—	3 =see instructio	ne)
-		described in section 4940(d)(2), check her		er "N/A" on line 1.		110)
1a					ions) 1	5,720
b		letter: (attach copy enter 1.39% (0.0139) of line 27b. Exempt			ions)	3,720
b			0 0	is, enter		
2		. (b) tic section 4947(a)(1) trusts and taxable fo		ore optor 0)	2	0
3	Add lines 1 and 2	tic section 4347 (a)(1) trusts and taxable to	undations only, othe	, enter -0-)	3	5,720
4		stic section 4947(a)(1) trusts and taxable fo	undations only: othe	 are enter -N-)		0,:20
5		come. Subtract line 4 from line 3. If zero or		513, 611161 -0-7	5	5.720
6	Credits/Payments:	come. Subtract line 4 from line 3. if 2010 of	1033, 01101 -0-			3,:=0
а	-	and 2022 overpayment credited to 2023	6a	2	,400	
b		- tax withheld at source			7 - 0 - 0	
C		ktension of time to file (Form 8868)				
d	Backup withholding erroneous					
7	Total credits and payments. Ac	Lat Para a Constitution of the Constitution of	· · · · · · · · · · · · · · · · · · ·		7	2,400
8	• •	•	Form 2220 is attack	hed		
9		and 8 is more than line 7, enter amount o				3,320
10		e than the total of lines 5 and 8, enter the a				3,320
11		be: Credited to 2024 estimated tax	Jane Ovorpaid	Refunded		
	10 to	and the second s		<u> </u>	<u> </u>	

Pa	art VI-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it		Yes	No
	participate or intervene in 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		X
	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.			
С	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. \$ (2) On foundation managers. \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers. \$			
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	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	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	X	
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. CO			
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	Х	
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 2023 or the tax year beginning in 2023? See instructions for Part XIII. If "Yes,"			
	complete Part XIII	9		X
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10		X
1	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions	11		X
2	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified			
	person had advisory privileges? If "Yes," attach statement. See instructions	12		X
3	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address BALLANTINE FAMILY FUND. COM			
4	The books are in care of COMMUNITY FOUNDATION SERVING SWCO Telephone no. 970-3 PO BOX 1673	175 –	580	7
	Located at DURANGO CO ZIP+4 81302	<u>2</u>		
5	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check here			
	and enter the amount of tax-exempt interest received or accrued during the year			
6	At any time during calendar year 2023, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			

the foreign country

Pa	art 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)		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)?	1a(5)		<u> </u>
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation			
	agreed to make a grant to or to employ the official for a period after termination of government service, if			
	terminating within 90 days.)	1a(6)		<u> </u>
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in			
	Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions N/A	1b		
С	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 2023? N/A	1d		
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 2023, did the foundation have any undistributed income (Part XIII, lines 6d and 6e) for			
	tax year(s) beginning before 2023? If "Yes," list the years	2a		<u> </u>
	20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement — see instructions.)	2b		
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	20 , 20 , 20 , 20			
3a	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	If "Yes," did it have excess business holdings in 2023 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 2023.) N/A	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable	_		3.5
	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			7.7
	in 2023?	4b		X

Pa	Part VI-B Statements Regarding Activities for Whice	<u>:h Form 4720 May Be I</u>	Required (cont	inuea)			
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 4945(e))?			5a(1)		X
	(2) Influence the outcome of any specific public election (see section	4955); or to carry on, directly	or				
	indirectly, any voter registration drive?				5a(2)		X
	(3) Provide a grant to an individual for travel, study, or other similar pu	urposes?			5a(3)		X
	(4) Provide a grant to an organization other than a charitable, etc., organization	ganization described in sectio	n 4945(d)				
	(4)(A)? See instructions				5a(4)		X
	(5) Provide for any purpose other than religious, charitable, scientific,						
	the prevention of cruelty to children or animals?				5a(5)		X
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 disaste				5b		
С	Organizations relying on a current notice regarding disaster assistance	e, check here					
d	If the answer is "Yes" to question 5a(4), does the foundation claim exe	emption from the tax because	it				
				N/A	5d		
	If "Yes," attach the statement required by Regulations section 53.4945	i-5(d).					
6a	Did the foundation, during the year, receive any funds, directly or indire	ectly, to pay premiums on a p	ersonal				
	benefit contract?				6a		Х
b	Did the foundation, during the year, pay premiums, directly or indirectly	y, on a personal benefit contra	act?		6b		X
	If "Yes" to 6b, file Form 8870.						
		• •			7a		X
b	If "Yes," did the foundation receive any proceeds or have any net income			N/A	7b		
8	Is the foundation subject to the section 4960 tax on payment(s) of mor						
	excess parachute payment(s) during the year?				8		X
Pa		itees, Foundation Man	agers, Hignly	Paid Employ	ees, a	and	
	Part VII Information About Officers, Directors, Trus	itooo, i ouiiuutioii iiiui	0 , 0 ,	. ,			
1 1	Contractors	<u> </u>		. ,			
1 L		<u> </u>			· · ·		
1 L	Contractors	<u> </u>		(d) Contributions to employee benefit plans and deferred compensation		oense ac r allowar	
	Contractors List all officers, directors, trustees, and foundation managers and	their compensation. See in (b) Title, and average hours per week devoted to position	structions. (c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred			
	Contractors List all officers, directors, trustees, and foundation managers and (a) Name and address	their compensation. See in (b) Title, and average hours per week devoted to position	structions. (c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred			
	Contractors List all officers, directors, trustees, and foundation managers and (a) Name and address SEE STATEMENT 6	their compensation. See in (b) Title, and average hours per week devoted to position	structions. (c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred			
	Contractors List all officers, directors, trustees, and foundation managers and (a) Name and address SEE STATEMENT 6	their compensation. See in (b) Title, and average hours per week devoted to position	structions. (c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred			
	Contractors List all officers, directors, trustees, and foundation managers and (a) Name and address SEE STATEMENT 6	their compensation. See in (b) Title, and average hours per week devoted to position	structions. (c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred			
	Contractors List all officers, directors, trustees, and foundation managers and (a) Name and address SEE STATEMENT 6	their compensation. See in (b) Title, and average hours per week devoted to position	structions. (c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred			
	Contractors List all officers, directors, trustees, and foundation managers and (a) Name and address SEE STATEMENT 6	their compensation. See in (b) Title, and average hours per week devoted to position	structions. (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation			
SE	Contractors List all officers, directors, trustees, and foundation managers and (a) Name and address SEE STATEMENT 6 Compensation of five highest-paid employees (other than those	their compensation. See in (b) Title, and average hours per week devoted to position	structions. (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp		account,
2	Contractors List all officers, directors, trustees, and foundation managers and (a) Name and address SEE STATEMENT 6 Compensation of five highest-paid employees (other than those "NONE."	their compensation. See in (b) Title, and average hours per week devoted to position included on line 1 — see in (b) Title, and average hours per week	structions. (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation ne, enter (d) Contributions to employee benefit plans and deferred	(e) Exp	r allowar	account,
2	Contractors List all officers, directors, trustees, and foundation managers and (a) Name and address EEE STATEMENT 6 Compensation of five highest-paid employees (other than those "NONE."	their compensation. See in (b) Title, and average hours per week devoted to position included on line 1 — see in (b) Title, and average hours per week	structions. (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation ne, enter (d) Contributions to employee benefit plans and deferred	(e) Exp	r allowar	account,
2	Contractors List all officers, directors, trustees, and foundation managers and (a) Name and address EEE STATEMENT 6 Compensation of five highest-paid employees (other than those "NONE."	their compensation. See in (b) Title, and average hours per week devoted to position included on line 1 — see in (b) Title, and average hours per week	structions. (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation ne, enter (d) Contributions to employee benefit plans and deferred	(e) Exp	r allowar	account,
2	Contractors List all officers, directors, trustees, and foundation managers and (a) Name and address EEE STATEMENT 6 Compensation of five highest-paid employees (other than those "NONE."	their compensation. See in (b) Title, and average hours per week devoted to position included on line 1 — see in (b) Title, and average hours per week	structions. (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation ne, enter (d) Contributions to employee benefit plans and deferred	(e) Exp	r allowar	account,
2	Contractors List all officers, directors, trustees, and foundation managers and (a) Name and address EEE STATEMENT 6 Compensation of five highest-paid employees (other than those "NONE."	their compensation. See in (b) Title, and average hours per week devoted to position included on line 1 — see in (b) Title, and average hours per week	structions. (c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation ne, enter (d) Contributions to employee benefit plans and deferred	(e) Exp	r allowar	account,

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

Contractors (continued)	igers, nighiy Paid Em	pioyees, and
3 Five highest-paid independent contractors for professional services. See instruction	ns. 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 organizations and other beneficiaries served, conferences convened, research papers produced, etc.	such as the number of	Expenses
1 NO DIRECT CHARITABLE ACTIVITIES		
2		
3		
4		
Part VIII-B Summary of Program-Related Investments (see instructions)		
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		
All other program-related investments. See instructions.		
3		
<u> </u>		

Total. Add lines 1 through 3

Pá	art IX Minimum Investment Return (All domestic foundations	s must complete	this part. Foreigi	n found	dations, see
	instructions.)		Į.		
1	Fair market value of assets not used (or held for use) directly in carrying out char	itable, etc.,			
	purposes:				
а	Average monthly fair market value of securities			1a	5,751,592
b	Average of monthly cash balances			1b	0
С	Fair market value of all other assets (see instructions)			1c	0
d	Total (add lines 1a, b, and c)			1d	5,751,592
е	Reduction claimed for blockage or other factors reported on lines 1a and				
	1c (attach detailed explanation)	1e	0		
2	Acquisition indebtedness applicable to line 1 assets			2	0
3	Subtract line 2 from line 1d			3	5,751,592
4	Cash deemed held for charitable activities. Enter 1.5% (0.015) of line 3 (for great	ter amount, see			
	instructions)			4	86,274
5	Net value of noncharitable-use assets. Subtract line 4 from line 3			5	5,665,318
6	Minimum investment return. Enter 5% (0.05) of line 5			6	283,266
Pa	art X Distributable Amount (see instructions) (Section 4942)			ounda	tions
	and certain foreign organizations, check here and	do not complete	this part.)		
1	Minimum investment return from Part IX, line 6 Tax on investment income for 2022 from Part V, line 5			1	283,266
2a	Tax on investment income for 2022 from Part V, line 5	2a	5,720		
b	Income tax for 2022. (This does not include the tax from Part V.)	2b			
С	Add lines 2a and 2b			2c	5,720
3	Distributable amount before adjustments. Subtract line 2c from line 1			3	277,546
4	Recoveries of amounts treated as qualifying distributions			4	
5	Add lines 3 and 4			5	277,546
6	Deduction from distributable amount (see instructions)			6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and or			7	277,546
Pa	art XI Qualifying Distributions (see instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc.,	purposes:			
а	Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26			1a	391,901
b	Program-related investments — total from Part VIII-B			1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out cha	ritable, etc.,			
	purposes			2	
3	Amounts set aside for specific charitable projects that satisfy the:				
а	Suitability test (prior IRS approval required)			3a	
b	Cash distribution test (attach the required schedule)			3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part XII, li			4	391,901

Form 990-PF (2023) BALLANTINE FAMILY FUND Undistributed Income (see instructions) (a) (b) (c) (d) Corpus Years prior to 2022 2022 2023 Distributable amount for 2023 from Part X. line 7 277,546 Undistributed income, if any, as of the end of 2023: a Enter amount for 2022 only **b** Total for prior years: 20 _____ , 20 ____ , 20 ____ Excess distributions carryover, if any, to 2023: **a** From 2018 63,474 **b** From 2019 73,099 **c** From 2020 120,820 **d** From 2021 39,422 **e** From 2022 68,204 365,019 f Total of lines 3a through e Qualifying distributions for 2023 from Part XI. 391,901 line 4: \$ a Applied to 2022, but not more than line 2a **b** Applied to undistributed income of prior years (Election required — see instructions) c Treated as distributions out of corpus (Election required — see instructions) _____ **d** Applied to 2023 distributable amount 277,546 114,355 e Remaining amount distributed out of corpus Excess distributions carryover applied to 2023 (If an amount appears in column (d), the same amount must be shown in column (a).) Enter the net total of each column as indicated below: Corpus. Add lines 3f, 4c, and 4e. Subtract line 5 479,374 Prior years' undistributed income. Subtract line 4b from line 2b c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed d Subtract line 6c from line 6b. Taxable amount — see instructions e Undistributed income for 2022. Subtract line 4a from line 2a. Taxable amount - see instructions f Undistributed income for 2023. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2024 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) Excess distributions carryover from 2018 not applied on line 5 or line 7 (see instructions) 63,474 Excess distributions carryover to 2024. Subtract lines 7 and 8 from line 6a 415,900 Analysis of line 9: Excess from 2019 73,099 120,820 Excess from 2020 Excess from 2021 39,422 Excess from 2022 68,204 114,355 Excess from 2023 ...

0350000 02/25/2024 12:41 PM Form 990-PF (2023) BALLANTINE FAMILY FUND 84-6026270 Page 10 Private Operating Foundations (see instructions and Part VI-A, question 9 If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2023, enter the date of the ruling Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(j)(5) Enter the lesser of the adjusted net Tax year Prior 3 years (e) Total **(b)** 2022 (d) 2020 (a) 2023 (c) 2021 income from Part I or the minimum investment return from Part IX for each year listed 85% (0.85) of line 2a Qualifying distributions from Part XI, line 4, for each year listed Amounts included in line 2c not used directly for active conduct of exempt activities Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: "Assets" alternative test — enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) "Endowment" alternative test — enter 2/3 of minimum investment return shown in Part IX, line 6, for each year listed "Support" alternative test — enter: (1) Total support other than gross investment income (interest. dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at Part XIV any time during the year - see instructions.) **Information Regarding Foundation Managers:** 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).) N/A 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. N/A Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: 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. See instructions. The name, address, and telephone number or email address of the person to whom applications should be addressed: COMMUNITY FOUNDATION SERVING SWCO 970-375-5807 PO BOX 1673 DURANGO CO 81302 The form in which applications should be submitted and information and materials they should include: SEE STATEMENT 7 Any submission deadlines: NONE

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

NONE

Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation status of Recipient show any relationship to any foundation manager or substantial contributor Purpose of grant or Amount contribution recipient Name and address (home or business) a Paid during the year SEE ATTACHED STATEMENT 8 **VARIOUS** DURANGO CO 81301 **VARIOUS** 364,725 364,725 Total 3a Approved for future payment N/A **Total** 3b

Analysis of Income-Producing Activities

nter gross amounts unless otherwise inc	dicated.	Unrelate	d business income	Excluded	by section 512, 513, or 514	(0)
Program service revenue:		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions.)
a						
b						
с						
d						
e		_				
f						
g Fees and contracts from governm	nent agencies	_				
Membership dues and assessmentsInterest on savings and temporary case	ch invoctments			14	815	
4 Dividends and interest from securities	311 11176511161115			14	87,767	
5 Net rental income or (loss) from real e					3.7,0.	
b Not debt-financed property						
6 Net rental income or (loss) from person	onal property					
8 Gain or (loss) from sales of assets oth	her than inventory			14	329,785	
9 Net income or (loss) from special eve	ents					
O Gross profit or (loss) from sales of inv						
1 Other revenue: a						
b						
C						
d		_				
d e				0	418,367	0
d e Subtotal. Add columns (b), (d), and (e	e)			*************************	418,367	0 418,367
d	e)and (e)			*************************		<u>-</u>
de 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v	e)and (e)				13	<u>-</u>
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a Gee worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Ac	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a Gee worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship of Explain below how each of the foundation's exercise.	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367
d e 2 Subtotal. Add columns (b), (d), and (e 3 Total. Add line 12, columns (b), (d), a See worksheet in line 13 instructions to v Part XV-B Relationship C Explain below how eac of the foundation's exer	e) and (e) verify calculations.) of Activities to the Activity for which income	ccomplishments in co	ent of Exempt I	Purposes A contribute	13 Ed importantly to the ac	418,367

Part 2		rmation Reg anizations	arding Tra	nsfers To an	d Transactio	ns and Relationships	With Nonchari	table Ex	empt	;
1 Did			lirectly engage	in any of the follo	owing with any of	her organization described			Yes	No
in				rganizations) or ir						
7	•	e reporting found	lation to a non	charitable exemp	t organization of					
				•	· ·			1a(1)		Х
` '										X
h (2)	her transactions							Ia(2)		- 22
		s. ts to a noncharit	able evenut e	rappization				16/1)		Х
								1b(1) 1b(2)		X
(2)) Purchases of	assets iioiii a iit		tempi organizado	// · · · · · · · · · · · · · · · · · ·			10(2)		X
(3)	Remai or laci	iilles, equipment	, or other asse	ıs				1b(3)		X
(4)) Reimburseme	ent arrangement	s					1b(4)		X
(5)) Loans or loan	guarantees			- 4:			1b(5)		X
										X
	-		-	er assets, or paid		ın (b) should always show the		1c		X_
		action or sharing) Amount involved		, show in column of noncharitable exem	` '	he goods, other assets, or ser (d) Description of transfer		ing arrangeme	nts	
							-			
			1							
							-			
							-			
							-			
de	scribed in secti	•	than section 5	ith, or related to, of 01(c)(3)) or in se		exempt organizations		Y	es X	No
<i>₩</i> 11		of organization	nodalo.	(b) Type of o	rganization	(c) De	scription of relationship			
N/.		<u> </u>		(., .) - 0. 0	<u>.</u>	(0) 33.	,			
•										
							<u> </u>			
						ules and statements, and to the best of	my knowledge and belie	ef, it is true,		
	correct, and comp	piete. Declaration of p	oreparer (other tha	n taxpayer) is based o	n all information of wi	nich preparer has any knowledge.	May the IRS	S discuss this re	turn	
Sign							•	parer shown be		٦
Here							See instruct	tions.	Yes	No
		(COPY			PRESIDE	 NT			
	Signature of office	er or trustee		-	Date	Title			_	
i	Print/Type prep	parer's name			Preparer's signatu	re	n	ate	01	$\overline{\Box}$
	ypo prop				a. o. o oignatu			-	Check self-em	if
Paid	PATRICK	J. BARRET	T		PATRICK J	. BARRETT	02	/25/24	5511 GIII	you
Prepare				ETT AND A				P00237	693	
Jse Onl	y			1. Gar. 300				11-132		

150 E 9TH ST STE 300

DURANGO, CO 81301

84-1324604

Firm's EIN

Phone no.

Firm's address

(15)

Capital Gains and Losses for Tax on Investment Income Form **990-PF** 2023 For calendar year 2023, or tax year beginning and ending Name **Employer Identification Number** BALLANTINE FAMILY FUND C/O THE COMMUNITY FOUND. SRVNG SWCO 84-6026270 (b) How acquired P-Purchase D-Donation (a) List and describe the kind(s) of property sold, e.g., real estate 2-story brick warehouse; or common stock, 200 shs. MLC Co. (C) Date acquired (mo., day, yr.) (d) Date sold (mo., day, yr.) 10/05/99 05/19/23 AUTOMATIC DATA PROC P (1)12/10/99 09/01/23 P AUTOMATIC DATA PROC (2)AUTOMATIC DATA PROC P 12/10/99 11/21/23 (3)P 05/03/90 09/08/23 BERKSHIRE HATHAWAY (4)INTEL CORP P 08/17/10 02/27/23 (5)11/25/97 02/27/23 P INTEL CORP (6)05/28/98 09/01/23 JOHNSON AND JOHNSON COM P (7)12/08/70 02/27/23 3m company P (8)3M COMPANY P 12/08/70 05/19/23 (9)RTX CORP P 12/07/07 11/21/23 (10)(11)(12)(13)(14)(15)(e) Gross sales price Depreciation allowed (g) Cost or other basis plus expense of sale (h) Gain or (loss) (e) plus (f) minus (g) (or allowable) 53,638 8,934 44,704 (1) 25,164 4,031 21,133 (2)8,061 45,599 37,538 (3)134,892 1,769 133,123 (4)42,760 8,694 34,066 (5) $7, \overline{546}$ 5,803 1,743 (6)15,872 3,541 12,331 (7)21,569 21,525 44 (8) 39,394 89 39,305 (9)23,240 13,551 9,689 (10)(11)(12)(13)(14)(15)Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Gains (Col. (h) gain minus col. (k), but not less than -0-) **Of** Losses (from col. (h)) (j) Adjusted basis as of 12/31/69 (k) Excess of col. (i) over col. (j), if any (i) F.M.V. as of 12/31/69 44,704 (1)21,133 (2)37,538 (3)133,123 (4) 8,694 (5)1,743 (6)12,331 (7)21,525 (8)39,305 (9)9,689 (10)(11)(12)(13) (14)

2/25/2024 12:41 PM

Federal Statements

FYE: 12/31/2023

84-6026270

	Statement 1	<u>- Form 990-PF</u>	<u>, Part I, Line 16b </u>	- Accounting Fees
--	-------------	----------------------	-----------------------------	-------------------

Description	 Total		Net Investment		Adjusted Net		Charitable Purpose		
ACCOUNTING FEES	\$ 3,000	\$	1,500	\$		\$	1,500		
TOTAL	\$ 3,000	\$	1,500	\$	0	\$	1,500		

Statement 2 - Form 990-PF, Part I, Line 16c - Other Professional Fees

Description	 Total	In	Net vestment_	usted Vet	Charitable Purpose
ADMINISTRATION	\$ 27,028	\$	1,351	\$ ·	\$ 25 , 676
TOTAL	\$ 27,028	\$	1 , 351	\$ 0	\$ 25 , 676

Statement 3 - Form 990-PF, Part I, Line 18 - Taxes

Description	 Total		Net Investment		iusted Net	Charitable Purpose	
INCOME TAXES	\$ 3,354	\$	3,354	\$		\$	
TOTAL	\$ 3,354	\$	3,354	\$	0	\$	0

Statement 4 - Form 990-PF, Part I, Line 23 - Other Expenses

Description	 Total	Inve	Net estment	Adjuste Net	d 	ritable pose
PADENGEO	\$	\$		\$		\$
EXPENSES ANNUAL FEES	278		278			
ADVERTISING	 195		195			
TOTAL	\$ 473	\$	473	\$	0	\$ 0

Federal Statements

2/25/2024 12:41 PM

FYE: 12/31/2023

Statement 5 - Form 990-PF, Part II, Line 13 - Other Investments

Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
\$ 1,077,309	\$ 1,137,523	MARKET	\$ 5,827,448
\$ 1,077,309	\$ 1,137,523		\$ 5,827,448
	\$ 1,077,309	of Year Year \$ 1,077,309 \$ 1,137,523	of Year Year Valuation \$ 1,077,309 \$ 1,137,523 MARKET

Federal Statements

FYE: 12/31/2023

Statement 6 - Form 990-PF, Part VII, Line 1 - List of Officers, Directors, Trustees, Etc.

Name and Address	Title	Average Hours	Compensation	Benefits	Expenses
RICHARD G. BALLANTINE PO BOX 1673 DURANGO CO 81302	PRESIDENT	0.00	0	0	0
ELIZABETH BALLANTINE PO BOX 1673 DURANGO CO 81302	VICE PRESIDE	0.00	0	0	0
HELEN B. HEALY PO BOX 1673 DURANGO CO 81302	TREASURER	0.00	0	0	0
CHRISTOPHER BALLANTINE PO BOX 1673 DURANGO CO 81302	TRUSTEE	0.00	0	0	0
DAVID BALLANTINE PO BOX 1673 DURANGO CO 81302	SECRETARY	0.00	0	0	0
KAREN SHEEK PO BOX 1673 DURANGO CO 81302	TRUSTEE	0.00	0	0	0
BRIGGEN WRINKLE PO BOX 1673 DURANGO CO 81302	ASST SECRETA	0.00	0	0	0

0350000 BALLANTINE FAMILY FUND 84-6026270 **Federal Statements** 2/25/2024 12:41 PM

FYE: 12/31/2023

Statement 7 - Form 990-PF, Part XIV, Line 2b - Application Format and Required Contents

Description

WRITTEN REQUEST CONTAINING SUFFICIENT INFORMATION TO DETERMINE ACCEPTABLITY.

Form 990-PF, Part XIV, Line 2c - Submission Deadlines

Description

NONE

Form 990-PF, Part XIV, Line 2d - Award Restrictions or Limitations

Description

NONE

0350000 02/25/2024 12:41 PM

BALLANTINE FAMILY FUND

C/O THE COMMUNITY FOUND. SRVNG SWCO 84-6026270 FORM 990-PF ESTIMATES

(Worksheet)

Estimated Tax on Unrelated Business Taxable Income for Tax-Exempt Organizations (and on Investment Income for Private Foundations)

► Go to www.irs.gov/Form990W for instructions and the latest information.

OMB No. 1545-0047

	nal Revenue Service	► Kee	p for your records. Do not	send to the Internal Rever	ue Service.	
1	Unrelated business taxable income ex	pected	in the tax year		1	
•						
2	Tax on the amount on line 1. See instruct	tions for	tax computation		2	
3	Alternative minimum tax for trusts. See	e instrud	ctions		3	
4	Total. Add lines 2 and 3				4	
5	Estimated tax credits. See instructions	;			5	
6	Subtract line 5 from line 4				6	
7	Other taxes. See instructions				7	
8	Total. Add lines 6 and 7				8	
9	Credit for federal tax paid on fuels. See					
10a b	Subtract line 9 from line 8. Note: If les required to make estimated tax payme instructions Enter the tax shown on the 2021 return	ents. Pri n. See i	vate foundations, see nstructions. Caution: If zero o	or	5,720	
	the tax year was for less than 12 mont from line 10a on line 10c			401-	5,720	
С	2022 Estimated Tax. Enter the smalle		e 10a or line 10b. If the organi	· · · · · · · · · · · · · · · · · · ·	5,120	
	line 10b, enter the amount from line 10	a on lir	ne 10c	· · · · · · · · · · · · · · · · · · ·	10c	5,720
			(a)	(b)	(c)	(d)
11	Installment due dates. See instructions	11	05/15/24	06/17/24	09/16/24	12/16/24
12	Required installments. Enter 25% of line 10c in columns (a) through (d). But see instructions if the organization uses the annualized income installment method, the adjusted seasonal installment method, or is a "large organization." 2021 Overpayment. See instructions	12	5,750			
14	Payment due (Subtract line 13 from line 12)	14	5,750			

For Paperwork Reduction Act Notice, see instructions.

Form **990-W** (2022)

0350000 BALLANTINE FAMILY FUND 2/25/2024 12:41 PM **Federal Statements** 84-6026270 FYE: 12/31/2023 **Taxable Interest on Investments** Unrelated Exclusion Postal US Obs (\$ or %) Description Amount Business Code Code INTEREST FROM SAVINGS 815 14 815 TOTAL **Taxable Dividends from Securities** Unrelated Exclusion Postal US Description Obs (\$ or %) Amount Business Code Code 14 MERRILL LYNCH 87,767 \$ 87,767 TOTAL



Account Number: 660-04C19

YOUR EMA BANK DEPOSIT INTEREST SUMMARY

December 01, 2023 - December 29, 2023

Money Account Description	Opening Balance	Average Deposit Balance	Current Yield%	Interest on Deposits	Closing Balance
Bank of America, N.A.	60,010	37,673	.30	8.96	32,310
Bank of America CA, N.A.	353	353	.30	0.09	353
TOTAL ML Bank Deposit Program	60,363			9.05	32,663

YOUR EMA ASSETS

CASH/MONEY ACCOUNTS			Total	Estim	ated	Estimated	Estimated	Est. Annual
Description		Quantity	Cost Basis	Market	Price	Market Value	Annual Income	Yield%
CASH		0.66	0.66			.66		
+ML BANK DEPOSIT PROGRAM +FDIC INSURED NOT SIPC COVERE	D.	32,663.00	32,663.00	1 .0	0000	32,663.00	98	.30
TOTAL			32,663.66			32,663.66	98	.30
EQUITIES Description	Symbol		Quantity	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain/(Loss)	Estimated Annual Income
AMGEN INC COM CURRENT YIELD 3.124%	AMGN		800.0000	51,784.49	288.0200	230,416.00	178,631.51	7,202
AUTOMATIC DATA PROC CURRENT YIELD 2.403%	ADP		450.0000	16,994.86	232.9700	104,836.50	87,841.64	2,520
BERKSHIRE HATHAWAY INC DELAWARE CL A\$5.00	BRKA		4.0000	33,775.00	542,625	2,170,500.12	2,136,725.12	
BERKSHIRE HATHAWAYINC DEL CL B NEW	BRKB		1,125.0000	5,306.25	356,6600	401,242.50	395,936.25	
CANADIAN NATURAL RES LTD CURRENT YIELD 4.397%	CNQ		1,000.0000	65,635.32	65.5200	65,520.00	(115.32)	2,881



002

5 of 15

Account Number: 660-04C19

24-Hour Assistance: (800) MERRILL Access Code: 93-660-04219

YOUR EMA ASSETS

December 01, 2023 - December 29, 2023

EQUITIES (continued) Description	Symbol	Quantity	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain/(Loss)	Estimated Annual Income
CHEVRON CORP CURRENT YIELD 4.049%	CVX	1,000.0000	43,885.93	149.1600	149,160.00	105,274.07	6,040
CONOCOPHILLIPS	COP	1,000.0000	25,453.47	116.0700	116,070.00	90,616.53	2,321
CURRENT YIELD 1.998% DEERE CO CURRENT YIELD 1.470%	DE	1,000.0000	26,357.47	399.8700	399,870.00	373,512.53	5,881
DISNEY (WALT) CO COM STK CURRENT YIELD 0.664%	DIS	900.000	33,787.05	90.2900	81,261.00	47,473.95	540
EXXON MOBIL CORP COM CURRENT YIELD 3.800%	MOX	1,450.0000	59,863.90	99.9800	144,971.00	85,107.10	5,512
HONEYWELL INTL INC DEL CURRENT YIELD 2.060%	HON	300.000	10,645.72	209.7100	62,913.00	52,267.28	1,297
JOHNSON AND JOHNSON COM CURRENT YIELD 3.036%	רער	1,400.0000	47,622.59	156.7400	219,436.00	171,813.41	6,666
KINDER MORGAN INC. DEL CURRENT YIELD 6.405%	KMI	4,000.0000	68,037.23	17.6400	70,560.00	2,522.77	4,520
MICROSOFT CORP CURRENT YIELD 0.797%	MSFT	1,200.0000	26,044.60	376.0400	451,248.00	425,203.40	3,601
PFIZER INC CURRENT YIELD 5.835%	PFE	2,000.0000	46,094.57	28.7900	57,580.00	11,485.43	3,361
RTX CORP CORP CURRENT YIELD 2.804%	RTX	500.0000	22,403.25	84.1400	42,070.00	19,666.75	1,180
TARGET CORP COM CURRENT YIELD 3.089%	тдт	3,000.0000	90,715.65	142.4200	427,260.00	336,544.35	13,203
TOTAL YIELD 1.28%			674,407.35		5,194,914.12	4,520,506.77	66,725

Equity Cost Basis details are available on the Statements and Documents page of www.mymerrill.com.



Account Number: 660-04C19

YOUR EMA ASSETS

December 01, 2023 - December 29, 2023

RESEARCH RATINGS Security	Symbol	BofAML Research	Morningstar	CFRA	
AMGEN INC COM	AMGN	Neutral (B27)	Hold	Buy	
AUTOMATIC DATA PROC	ADP	Underperform (B37)	Hold	Hold	
CANADIAN NATURAL RES LTD	CNQ	Buy (C17)	No Coverage	Hold	
CHEVRON CORP	CVX	Buy (B17)	Hold	Buy	
CONOCOPHILLIPS	COP	Buy (B17)	Hold	Hold	
DEERE CO	DE	Neutral (B27)	Hold	Hold	
DISNEY (WALT) CO COM STK	DIS	Buy (B17)	Buy	Buy	
EXXON MOBIL CORP COM	XOM	Buy (B17)	Buy	Buy	
HONEYWELL INTL INC DEL	HON	Buy (B17)	Buy	Hold	
JOHNSON AND JOHNSON COM	ראר	Neutral (A27)	Buy	Hold	
KINDER MORGAN INC. DEL	KMI	Neutral (B27)	Buy	Buy	
MICROSOFT CORP	MSFT	Buy (B17)	Hold	Buy	
PFIZER INC	PFE	Neutral (B27)	Buy	Hold	
TARGET CORP COM	TGT	Buy (B17)	Hold	Hold	
RTX CORP	RTX	Underperform (B37)	Buy	Buy	

PLEASE REFER TO THE BACK OF YOUR STATEMENT FOR A GUIDE TO BOJAML AND THIRD PARTY RESEARCH RATINGS.

MUTUAL FUNDS/CLOSED END FUNDS/UITs/ETP. Description	s Quantity	Total Cost Basis	Estimated Market Price	Estimated Market Value	Unrealized Gain/(Loss)	Total Client Investment	Cumulative Investment Return (\$)	Estimated Annual Income
AMERICAN CAPITAL WORLD	6,909.4530	283,596.18	60.1200	415,396.33	131,800.15	170,038	245,358	6,081
GROWTH AND INCOME FD A CURRENT YIELD	1.463% SYMBOL: C	WGIX Initial Purci	hase: 10/05/12	Equity 100%				
AMERICAN INC FD OF AMER	9,263.5550	179,518.83	23.4400	217,137.73	37,618.90	102,926	114,211	6,300
CL A CURRENT YIELD 2.901% SYMBOL: AME	CX Initial Purchase:	07/10/12 Fixed	Income 26% Eq	uity 74%				
Subtotal (Fixed Income)				56,455.81	**************************************			
Subtotal (Equities)				576,078.25				
TOTAL YIELD 1.96%		463,115.01		632,534.06	169,419.05		359,569	12,381

24-Hour Assistance: (800) MERRILL

Access Code: 93-660-04219

YOUR EMA ASSETS

December 01, 2023 - December 29, 2023

LONG PORTFOLIO	Adjusted/Total Cost Basis	Estimated Market Value	Unrealized Gain/(Loss)	Estimated Accrued Interest	Estimated Annual Income	
TOTAL YIELD 1.35%	1,170,186.02	5,860,111.84	4,689,925.82		79,203	

Total Client Investment: Cost of shares directly purchased and still held. Does not include shares purchased through reinvestment.

Cumulative Investment Return: Estimated Market Value minus Total Client Investment. Cumulative Investment Return is the dollar value of the capital appreciation (depreciation) of all shares purchased and still held, including shares acquired through reinvestment of dividends and distributions, which may be greater or less than the actual income distributed.

Unrealized Gain or (Loss): Estimated Market Value minus Total Cost Basis (total cost of shares directly purchased and still held, as well as cost of shares acquired through reinvestment). Provided for Tax Planning purposes only and is not applicable to retirement accounts.

Initial Purchase: Date of your initial investment in this fund.

Market Timing: Merrill's policies prohibit mutual fund market timing, which involves the purchase and sale of mutual fund shares within short periods of time with the intention of capturing short-term profits resulting from market volatility. Market timing may result in lower returns for long-term fund shareholders because market timers capture short-term gains that would otherwise pass to all shareholders and due to increased transaction costs and fewer assets for investment due to the need to retain cash to satisfy redemptions.

Sales Charge Discounts or Waivers: Many funds offer various sales charge discounts or waivers depending on the terms of the prospectus and/or statement of additional information. You should consult a fund's prospectus and/or statement of additional information to determine whether you may qualify for a discount or waiver. Notify your Financial Advisor, Financial Solutions Advisor or Investment Center representative if you believe you qualify for any of these or any other discounts or waivers. Please contact your Financial Advisor, Financial Solutions Advisor or Investment Center representative for further information on available sales charge discounts and waivers.

Bank of America Merrill Lynch Global Research publishes research reports and ratings ("Research Ratings") regarding a select universe of ETFs and ETNs (collectively, "ETPs"). Research Ratings on ETPs are intended to assess the potential for outperformance of ETP peers in the same coverage category. Bank of America Merrill Lynch Global Research and other business areas, including CIO, apply different methodologies in their review of ETPs, and may arrive at different or inconsistent conclusions with respect to one or more ETPs. Neither the CIO review process nor the internal business review performed by product teams will rely on or otherwise use the Research Ratings on ETPs as an input or factor; and the CIO review process and product team's internal business review will determine an ETP's inclusion, status, and availability for solicitation through the Global Wealth & Investment Management area of MLPF&S and its affiliates.

YOUR EMA TRANSACTIONS

Date	NDS/INTEREST INCOME TRANSAC Description	Transaction Type	Quantity Reinvestment	Income	Year To Date
Taxabl	e Interest				
12/29	BANK DEPOSIT INTEREST	д Bank Interest		8.05	
	ML BANK DEPOSIT PROGRAM	Income Total		1.00	
	Subtotal (Taxable Interest)			9.05	167.46
Taxabl	e Dividends				BOOKET DESCRIPTION OF THE SECURITY STOCKES AND ARTHUR PROPERTY OF THE SECURITY
12/01	CONOCOPHILLIPS	* Dividend		580.00	