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Form. 990-PF

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.

Department of the Treasury Internal Revenue Service Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. For calendar year 2015 or tax year beginning JUL 1, 2015 , and ending JUN 30, 2016 Name of foundation A Employer identification number WINTEMUTE FAMILY FOUNDATION 45-6177617 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number P.O. BOX 1711 (858)558-9200 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here MEDFORD, OR 97501 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year J Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 306, 323. (Part I, column (d) must be on cash basis.) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements (b) Net investment (a) Revenue and (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) charitable purposes (cash basis only) expenses per books ілсоте ıncome Contributions, gifts, grants, etc., received 250. N/A 2 Check If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 201 9,031 8,953 STATEMENT 4 Dividends and interest from securities ಅ 5a Gross rents 2 b Net rental income or (loss) <6,787.b 6a Net gain or (loss) from sale of assets not on line 10 <u>326,252.</u> 0. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 8,953 2,494 12 Total. Add lines 1 through 11 0. 0 0. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Operating and Administrative Expenses 16a Legal fees 1,710. 1,900 190 **b** Accounting fees c Other professional fees 17 Interest 187 0 0. 18 Taxes 19 Depreciation Occupancy 21 Travel, conferences, and meetings iv 22 Printing and publications STMT 4 3,699 3,699 0. 23 Other expenses 24 Total operating and administrative 5,786 3,889 1,710. expenses. Add lines 13 through 23 25 Contributions, gifts, grants paid 50,000 50<u>,000</u>. 26 Total expenses and disbursements. 51.710. 55,786 3.889 Add lines 24 and 25 27 Subtract line 26 from line 12: <53,292. 2 Excess of revenue over expenses and disbursements 5,064 b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

523501 11-24-15 LHA For Paperwork Reduction Act Notice, see instructions.

Form !	990-PF (2015) WINTEMUTE FAMILY FOUNDAT		anno of year End of				
Par	t II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	·			
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
		6,966.	5,901.	5,901.			
		0,300.	3,901.	3,301.			
1	Less: allowance for doubtful accounts						
	Pledges receivable ►						
-	Less; allowance for doubtful accounts						
				·			
							
'	disqualified persons						
1 7	Other notes and loans receivable						
	Less: allowance for doubtful accounts						
<u>در</u> ا							
Assets							
Z 10	a Investments - U.S. and state government obligations						
	b Investments - corporate stock STMT 5	344,272.	292,045.	300,422.			
İ	c Investments - corporate bonds		•	•			
11	Investments - land, buildings, and equipment, basis						
	Less accumulated depreciation						
12	! Investments - mortgage loans						
13	Investments - other						
14	Land, buildings, and equipment: basis						
	Less accumulated depreciation						
15	o Other assets (describe ►)	-					
16	Total assets (to be completed by all filers - see the						
	instructions. Also, see page 1, item I)	351,238.	297,946.	306,323.			
17	Accounts payable and accrued expenses						
18	Grants payable						
ဖ္တ 19	Deferred revenue						
≝ 20	Loans from officers, directors, trustees, and other disqualified persons						
20 19 21 21 21 21 21 21 21	Mortgages and other notes payable						
⊐ ₂₂	Other liabilities (describe >)						
23	Total liabilities (add lines 17 through 22)	0.	0.				
	Foundations that follow SFAS 117, check here						
" l	and complete lines 24 through 26 and lines 30 and 31.						
ဗ္ဗိ 24	Unrestricted						
E 25	5 Temporarily restricted						
26							
Ĕ	Foundations that do not follow SFAS 117, check here						
<u>-</u>	and complete lines 27 through 31.	274 222	225 245				
ပ္က 27		351,238.	297,946.				
စ္တ 28		0.	0.				
Net Assets or Fund Balances		0.	0.				
2 30	Total net assets or fund balances	351,238.	297,946.				
		251 220	207 046				
31		351,238.	297,946.				
Par	Analysis of Changes in Net Assets or Fund Ba	lances					
To	tal net assets or fund balances at beginning of year - Part II, column (a), line 3	0		· .			
•	ust agree with end-of-year figure reported on prior year's return)		1	351,238.			
En	ter amount from Part I, line 27a		2	<53,292.			
3 Oth	ner increases not included in line 2 (itemize)		3	0.			
4 Ad	d lines 1, 2, and 3		4	297,946.			
5 De	creases not included in line 2 (itemize)		5	0.			
3 To	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, colu	ımn (b), line 30	6	297,946.			
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If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

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616,689.

51,710.

Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

7

8

	1 990-PF (2015) WINTEMUTE FAMILY FOUNDATION					<u>45-</u>	6177	517		Page 4
	Int VI Excise Tax Based on Investment Income (Section 494				or 4	948	- see ir	stru	ıctio	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here 🕨 🔛 and e						Ì			
	Date of ruling or determination letter: (attach copy of letter if nec									
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	▶∟	_l a⊓	nd enter 1%		1			1	01.
	of Part I, line 27b									
	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%									
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers e	ente	er -0-)		_2				0.
-	Add lines 1 and 2					3			1	01.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. O)thers (ente	er -0-)		4				0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-					5			<u>1</u>	01.
	Credits/Payments:	1	ı				ļ			
	2015 estimated tax payments and 2014 overpayment credited to 2015	6a	\neg							
	Exempt foreign organizations - tax withheld at source	6b	_				1			
	Tax paid with application for extension of time to file (Form 8868)	6c	\neg							
	Backup withholding erroneously withheld	<u>6d</u>				_				^
	Total credits and payments. Add lines 6a through 6d									<u>0.</u>
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is atta	cnea				8				01
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed					9	-		<u></u>	01.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			المرابع		10	 			
	Enter the amount of line 10 to be: Credited to 2016 estimated tax Int VII-A Statements Regarding Activities			Refunde	20	_11		-		
	During the tax year, did the foundation attempt to influence any national, state, or local legis	lation	or c	did it participate or int	oniono		I		Ves	No
ıa	any political campaign?	oialiuli	UI L	uiu ii participate or iiit	ei veile	111	ŀ	1a		
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purpor	000/00	۱۱ ۵۵	netructions for the de	finition	12	<u> </u>	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities an					•	ŀ	יוו		-21
	distributed by the foundation in connection with the activities.	u cop	<i>J</i> IC3	or arry materials pt	JUIISH	,u 0,	ĺ			
•	Did the foundation file Form 1120-POL for this year?							1c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the	vear•					ŀ	10		
ŭ	(1) On the foundation. > \$ (2) On foundation managers				0.		ļ			
A	Enter the reimbursement (if any) paid by the foundation during the year for political expendi			mnosed on foundation			l			
Ŭ	managers. ►\$ 0.				•					
2	Has the foundation engaged in any activities that have not previously been reported to the If	RS?					ļ	2		Х
	If "Yes," attach a detailed description of the activities.						Ī			
	Has the foundation made any changes, not previously reported to the IRS, in its governing i	ınstrun	men	it, articles of incorpora	ation, d	r				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change							3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year	ır?						4a		X
b	If "Yes," has it filed a tax return on Form 990-T 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 en	ither:								
	 ■ By language in the governing instrument, or 									
	By state legislation that effectively amends the governing instrument so that no mandatory	y direc	ctior	ns that conflict with th	ne state	law	ł			
	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," con	nplete	e Pa	art II, col. (c), and P	art XV	•	-	7	X	
							ļ			
8a	Enter the states to which the foundation reports or with which it is registered (see instruction	ins) 🕨	- _							
	OR									
þ	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttorne	y G	eneral (or designate)			[
	of each state as required by General Instruction G? If "No," attach explanation						}	8b_	Х	
	Is the foundation claiming status as a private operating foundation within the meaning of se				or cale	ndar	ļ	_		77
	year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," c						}	9	<u> </u>	X
10	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedu	ıle listin	ng th	e <u>ir names and addresses</u>	1		<u> </u>	10)_DE	(2015)

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3b

4a

N/A

b if "Yes," did it have excess business holdings in 2015 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 Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2015.)

had not been removed from jeopardy before the first day of the tax year beginning in 2015?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be I	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es X No		
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indir	ectly,	1	-	
any voter registration drive?		Y	es X No	ĺ	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y	es X No	ŀ	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section				
4945(d)(4)(A)? (see instructions)		Y	es X No		}
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or	for		}	
the prevention of cruelty to children or animals?		Y	es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described	ın Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	nere		▶□□		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi	rom the tax because it mainta	ined			
expenditure responsibility for the grant?			es 🔲 No		
If "Yes," attach the statement required by Regulations section 53.494		•			
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				
a personal benefit contract?	•	Y	es X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	x
If "Yes" to 6b, file Form 8870.					+-
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	es X No		
b if "Yes," did the foundation receive any proceeds or have any net income attribu				7b	_
Part VIII Information About Officers, Directors, Trust	ees, Foundation Ma	nagers, Highly		 	
Paid Employees, and Contractors					
1 List all officers, directors, trustees, foundation managers and their	compensation.				
A Nilson and add and	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) E	xpense int, other
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	allov	wances
SEE STATEMENT 6		0.	0.		0.
				Ì	
				,	
Compensation of five highest-paid employees (other than those inc	luded on line 1). If none,	enter "NONE."			
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average	(-) Componention	(d) Contributions to employee benefit plans and deferred	(e) E:	xpense nt, other
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	allov	vances
NONE					
			_		
	*				
				•	
			·		
, , , , , , , , , , , , , , , , , , , ,					
				ļ	
otal number of other employees paid over \$50,000	-		•		0
			Form	990-PI	
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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	r "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	1	
	_	
		-
	7	
	-	
		<u> </u>
Total number of others receiving over \$50,000 for professional services		• (
Part IX-A Summary of Direct Charitable Activities		·
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis	tical information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers proc	luced, etc.	Expenses
1 N/A		
2		7
3		
4		
——————————————————————————————————————		
Part IX-B Summary of Program-Related Investments		· · · · · · · · · · · · · · · · · · ·
Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2.	Amount
1N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3		0.

<u> </u>	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	301,716
b	Average of monthly cash balances	1b	10,096
C	Fair market value of all other assets	1c	, <u> </u>
d	Total (add lines 1a, b, and c)	1d	311,812
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	311,812
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	4,677
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	307,135
6	Minimum investment return Enter 5% of line 5	6	15,357
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations an foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	15,357
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	101.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	15,256
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	15,256
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	15,256
_	Qualifying Distributions (see instructions)		
ı	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		-4 -40
	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	51,710.
b	Program-related investments - total from Part IX-B	1b_	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:	İ	
a	The state of the s	3a	
þ	Cash distribution test (attach the required schedule)	3b	
ļ	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	51,710.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	_5	0.
3	Adjusted qualifying distributions. Subtract line 5 from line 4	6	51,710.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation q 4940(e) reduction of tax in those years.	ualifies for th	e section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7	Саграс	1000 91101 10 20 14	2014	
2 Undistributed income, if any, as of the end of 2015		· · · · · · · · · · · · · · · · · · ·		15,256.
a Enter amount for 2014 only			0.	
b Total for prior years:			0.	
3 Excess distributions carryover, if any, to 2015:		0.		
a From 2010				
b From 2011 53,651.	!			
c From 2012 42,143.				
d From 2013 31,722.				
e From 2014 33,367.				
f Total of lines 3a through e	160,883.			
4 Qualifying distributions for 2015 from				
Part XII, line 4: ► \$51,710.				
a Applied to 2014, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2015 distributable amount				15,256.
e Remaining amount distributed out of corpus	36,454.			
5 Excess distributions carryover applied to 2015 (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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	197,337.		•	
b Prior years' undistributed income. Subtract	137,337.			
line 4b from line 2b		0.		
c Enter the amount of prior years'		<u> </u>		· · · · · · · · · · · · · · · · · · ·
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2014. Subtract line			······	·
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2015. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2016			ļ	0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2010				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2016.				
Subtract lines 7 and 8 from line 6a	197,337.			
O Analysis of line 9:				
a Excess from 2011 53,651.	1			
b Excess from 2012 42,143.	Ì		İ	
c Excess from 2013 31,722.				
d Excess from 2014 33,367.			Ì	
e Excess from 2015 36,454.				

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Part XIV Private Operating F			I-A, question 9)	<u> N/A</u>	
1 a If the foundation has received a ruling					
foundation, and the ruling is effective fo	·		▶ L		
b Check box to indicate whether the foun		ng foundation described		4942(j)(3) or49	42(<u>J)(</u> 5)
2 a Enter the lesser of the adjusted net	Tax year	(1) 0044	Prior 3 years	1,0040	4.5
income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
 Qualifying distributions from Part XII, 					
line 4 for each year listed					
d Amounts included in line 2c not]		
used directly for active conduct of					
exempt activities					
e 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: a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "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)	i i				
(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					
Part XV Supplementary info	ormation (Comple	te this part only	if the foundation	had \$5,000 or mo	re in assets
at any time during	the year-see inst	ructions.)			
Information Regarding Foundation List any managers of the foundation where year (but only if they have contributed in SEE STATEMENT 7	no have contributed more more than \$5,000). (See s	section 507(d)(2).)			
b List any managers of the foundation who other entity) of which the foundation has			(or an equally large portion	on of the ownership of a pa	rtnership or
NONE					
2 Information Regarding Contribut Check here ► X if the foundation of the foundation makes gifts, grants, etc.	only makes contributions	to preselected charitable	organizations and does n	ot accept unsolicited requi	ests for funds. If d.
a The name, address, and telephone num	nber or e-mail address of	the person to whom appl	cations should be addres	ssed:	
b The form in which applications should	be submitted and informa	tion and materials they sl	nould include:		
c Any submission deadlines:					
d Any restrictions or limited and an extended	la quah oo bu gers-s-t	ol orang she-table fall	landa of partition	that factors	· · · · · · · · · · · · · · · · · · ·
d Any restrictions or limitations on award	is, such as by geographic	ai ai eas, charltable tields,	KINDS OF INSTITUTIONS, OF C	other factors:	

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Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Purpose of grant or status of contribution Amount Name and address (home or business) recipient a Paid during the year COMMONSENSE CHILDBIRTH NONE PUBLIC GENERAL 213 S. DILLARD ST, STE #340 WINTER GARDEN, FL 34787 5,000. IMPROVING BIRTH ORG INC NONE PUBLIC GENERAL 270-F N. EL CAMINO REAL #434 ENCINITAS, CA 92024 5,000. KEEPING FIT AMERICA NONE PUBLIC GENERAL 16662 HALE AVE IRVINE, CA 92602 10,000. READING LEGACIES NONE PUBLIC GENERAL 12707 HIGH BLUFF DRIVE, SUITE 200 SAN DIEGO, CA 92130 5,000. SAN DIEGO SCIENCE ALLIANCE NONE PUBLIC GENERAL 1875 EL PRADO SAN_DIEGO CA 92101 5,000. CONTINUATION SHEET(S) Total ▶ 3a 50,000. b Approved for future payment NONE Total **▶** 3b Form **990-PF** (2015)

Part XVI-A **Analysis of Income-Producing Activities**

Enter gross amounts unless otherwise indicated.	Unrelate	d business income		ded by section 512, 513, or 514	(e)
	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue:	code	Amount	code	Amount	function income
a	_		ļ		
b					
c			┼		
0	-		┼		
e			-		
g Fees and contracts from government agencies		-	1		
Membership dues and assessments				-	
3 Interest on savings and temporary cash			-	· · · · · · · · · · · · · · · · · · ·	
investments					
4 Dividends and interest from securities			14	9,031.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal			ŀ		l
property	ļļ				
7 Other investment income			ļ		
8 Gain or (loss) from sales of assets other					!
than inventory			18	<6,787.	>
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			┼		
11 Other revenue:					
a			+		·
b			-		
d					
e		 -			
12 Subtotal. Add columns (b), (d), and (e)		0.		2,244.	0.
				13	0. 2,244.
13 Total. Add line 12, columns (b), (d), and (e)					
13 Total. Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to	the Acco	emplishment of Ex	cemp	t Purposes	
(See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to		<u> </u>			
See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported i	n column (e) of Part XVI-A			plishment of
(See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to	ne is reported i	n column (e) of Part XVI-A			plishment of
See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported i	n column (e) of Part XVI-A			iplishment of
See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported i	n column (e) of Part XVI-A			iplishment of
See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported i	n column (e) of Part XVI-A			iplishment of
See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported i	n column (e) of Part XVI-A			iplishment of
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See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported i	n column (e) of Part XVI-A			iplishment of
See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported i	n column (e) of Part XVI-A			iplishment of
See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported i	n column (e) of Part XVI-A			iplishment of
See worksheet in line 13 instructions to verify calculations.) Part XVI-B Relationship of Activities to Line No. Explain below how each activity for which incor	ne is reported i	n column (e) of Part XVI-A			iplishment of

Part XVII	Information Re Exempt Organ		sfers To a	and Transactions a	and Relationsh	nips With Nonc	haritable	•
1 Did the or			of the followin	g with any other organization	on described in section	on 501(c) of		Yes No
				7, relating to political organ		511 00 1(0) 01		
	from the reporting found				nEquotio			
(1) Cash		anon to a monorial no	io o onompt or	9424			1a(1)	_x
(2) Other	255545						1a(1)	X
b Other tran							14(2)	
_	of assets to a noncharita	hle exempt organiza	tion				1b(1)	x
	ases of assets from a no						1b(2)	X
	il of facilities, equipment,	•	or garnzadori				1b(2)	X
	bursement arrangements						1b(3)	X
	s or loan guarantees	•					1b(4)	X
	rmance of services or me	mharchin or fundrai	ieina enlicitatio	ine				X
	f facilities, equipment, ma	•	-				1b(6) 1c	X
				dule. Column (b) should al	wave show the fair m	arket value of the good	·	
				ed less than fair market vali				icio,
	i) the value of the goods,			ou loos triair lair market van	so in any transaction	or onaring arrangemen	11, 511011 111	
	(b) Amount involved	T		exempt organization	(d) Description	of transfers, transactions,	and sharing arr	rangements
·	<u> </u>	· · · · · · · · · · · · · · · · · · ·	N/A					
						-	<u>_</u>	
-						. , .	****	
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				-	 -			
	 .	_			 -			·
					 -			
					 			
			_		 			
					 			
		-					,	
					 			
				_	 			
					 			
								
22 Is the four	ndation directly or indirec	tly affiliated with or i	related to one	or more tax-exempt organi	zations described	-		
	501(c) of the Code (other	-		· -	Zations accomba		Yes	X No
	emplete the following sch	•	/(0// 01 111 3001	1011 021				110
<u>u</u> 11 100, 00	(a) Name of org			(b) Type of organization	(c) Description of relation	onship	
	N/A			(b) type or organization				
	II/A							
					-			
Under	penalties of perjury, I declare	that I have examined thi	is return, includin	g accompanying schedules and	statements, and to the b	est of my knowledge		
Sign and be	lief, t is true, correct, and cor	nplete Declaration of pr	eparer (other than	n taxpayer) is based on all inform	nation of which preparer I	has any knowledge	May the IRS of return with the	e preparer
Here	PATALCIA)	Minten	nuto	10-6-16	Tounder	14 mintee	shown below X Yes	
Sign	lature of officer or trustee	1,000110011	MU	Date	Title	y Duster	in les	
	Print/Type preparer's na		Preparer's si			Check If PT	IN .	 -
		· ·]	V 1 - 1 -		self- employed		
Paid	MICHELLE A	. MYHRA	Mille	roe ée muhr	9/26/16	· · ·	01086	790
Preparer	Firm's name ► LIN		OWNELL	, LLP	1 <u></u> • •	Firm's EIN ► 33-		
Use Only	, and o name > 11 ± 14	-par & Dr		,			55555	
	Firm's address > 42	25 EXECUT	TVE SO	UARE, SUITE	1150		 -	
		JOLLA, C				Phone no. 858	55892	nn
	пу	OUTHY, C	<u>.r. 7403</u>	<u> </u>		FIIOHE IIO. 030)-PF (2015)
							LOUIN 23C	(2015)

Part XV Supplementary Informati 3 Grants and Contributions Paid During th			· · · · · · · · · · · · · · · · · · ·	T
Recipient	If recipient is an individual,	Foundation	Durnage of great	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
That and address (notice of basiness)	or substantial contributor	recipient		
THE NATURE CONSERVANCY	NONE	PUBLIC	GENERAL	
4245 NORTH FAIRFAX DR., STE 100 ARLINGTON, VA 22203				10,00
MILINGION, VA 22203				10,000
MCA	NONE	PUBLIC	GENERAL	
.01 N WACKER DRIVE				
CHICAGO, IL 60606				10,00
			<u> </u>	
Total from continuation sheets				20,00

FORM 990-PF DIVIDENT	OS AND INTER	EST FROM SECUR	ITIES ST	PATEMENT 1
GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME
MERRILL LYNCH 11,064	2,03	9,031.	8,953.	
TO PART I, LINE 4 11,064	2,03	9,031.	8,953.	
FORM 990-PF	ACCOUNTI	NG FEES	Si	FATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING FEES	1,900.	190.		1,710.
TO FORM 990-PF, PG 1, LN 16B	1,900.	190.		1,710.
FORM 990-PF	TAX	ES	នា	CATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL EXCISE TAX STATE TAXES	142. 45.	0.		0.
TO FORM 990-PF, PG 1, LN 18 =	187.	0.		0.
FORM 990-PF	OTHER E	XPENSES	ទា	CATEMENT 4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
INVESTMENT FEES	3,699.	3,699.		0.
TO FORM 990-PF, PG 1, LN 23	3,699.	3,699.		0.

FORM 990-PF	CORPORATE STOCK		STAT	EMENT 5
DESCRIPTION		BOOK VALUI		MARKET ALUE
MERRILL LYNCH #50128 - MUTUAL MERRILL LYNCH #50131 - MUTUAL		247,41 44,61		256,204. 44,218.
TOTAL TO FORM 990-PF, PART II,	LINE 10B	292,04	45.	300,422.
	LIST OF OFFICERS, D AND FOUNDATION MANA		STATI	EMENT 6
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT
GLENN A. WINTEMUTE P.O. BOX 1711 MEDFORD, OR 97501	FOUNDING TRUST	EE 0.	0.	0.
PATRICIA L. WINTEMUTE P.O. BOX 1711 MEDFORD, OR 97501	FOUNDING TRUST	EE 0.	0.	0.
GAREN J. WINTEMUTE P.O. BOX 1711 MEDFORD, OR 97501	TRUSTEE 1.00	0.	0.	0.
ERIC G. WINTEMUTE P.O. BOX 1711 MEDFORD, OR 97501	TRUSTEE 1.00	0.	0.	0.
MITCHELL R. WINTEMUTE P.O. BOX 1711 MEDFORD, OR 97501	TRUSTEE 1.00	0.	0.	0.
ANNE K. WINTEMUTE TOFEL P.O. BOX 1711 MEDFORD, OR 97501	TRUSTEE 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAG	SE 6, PART VIII	0.	0.	0.

FORM 990-PF

PART XV - LINE 1A LIST OF FOUNDATION MANAGERS STATEMENT

7

NAME OF MANAGER

GLENN A. WINTEMUTE PATRICIA L. WINTEMUTE