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As Filed Data -

DLN: 93491100002097

2016

OMB No 1545-0052

Return of Private Foundation

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

Department of the Treasury Internal Revenue Service

Do not enter social security numbers on this form as it may be made public. Open to Public ▶ Information about Form 990-PF and its instructions is at www.irs.gov/form990pf. For calendar year 2016, or tax year beginning 01-01-2016 , and ending 12-31-2016 A Employer identification number Leprino Foods Company Foundation 47-3608278 Number and street (or P O box number if mail is not delivered to street address) 1830 West 38th Avenue B Telephone number (see instructions) (303) 480-2600 City or town, state or province, country, and ZIP or foreign postal code Denver, CO $\,$ 80211 ${f C}$ If exemption application is pending, check here ☐ Initial return G Check all that apply ☐ Initial return of a former public charity D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation Amended return ☐ Final return Address change ☐ Name change E If private foundation status was terminated under section 507(b)(1)(A), check here ☑ Section 501(c)(3) exempt private foundation H Check type of organization \square Section 4947(a)(1) nonexempt charitable trust \square Other taxable private foundation I Fair market value of all assets at end J Accounting method ✓ Cash ☐ Accrual If the foundation is in a 60-month termination of year (from Part II, col (c), under section 507(b)(1)(B), check here ☐ Other (specify) line 16) \$\ 10,706,145 (Part I, column (d) must be on cash basis) Analysis of Revenue and Expenses (The total (d) Disbursements Revenue and (b) Net investment (c) Adjusted net for charitable of amounts in columns (b), (c), and (d) may not necessarily expenses per books purposes (cash basis only) equal the amounts in column (a) (see instructions)) Contributions, gifts, grants, etc , received (attach 5,035,288 schedule) Check ► ☐ If the foundation is **not** required to attach 2 3 185 185 Interest on savings and temporary cash investments Dividends and interest from securities 217,926 217,926 Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 73,329 7 Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications . 10a Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) c Other income (attach schedule) 11 Total. Add lines 1 through 11 5,326,728 291,440 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 (attach schedule) . . . Accounting fees (attach schedule) Other professional fees (attach schedule) رچە 20,000 20,000 [چە 2,763 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 21 Travel, conferences, and meetings 22 Printing and publications . . 1,735 23 Other expenses (attach schedule) 1.735 24 Total operating and administrative expenses. Add lines 13 through 23 24,498 21,735 353,737 353,737 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. Add lines 24 and 25 378,235 21,735 353,737 27 Subtract line 26 from line 12 Excess of revenue over expenses and 4,948,493 disbursements 269 705 Net investment income (if negative, enter -0-)

Adjusted net income(If negative, enter -0-)

5,114,467

5,114,467

5,114,467

5,114,467

10,062,960

10,062,960

10,062,960

10,062,960

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5,114,467

4,948,493

10,062,960

10,062,960

Form **990-PF** (2016)

10,706,145

12

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17 18

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20 21

22

23

24

25

26

28 29

31

Part III

2 3

Liabilities

Balances

Fund

ō

Assets 27

Net 30 Less accumulated depreciation (attach schedule)

Total assets (to be completed by all filers—see the

Foundations that follow SFAS 117, check here ▶

and complete lines 24 through 26 and lines 30 and 31.

Foundations that do not follow SFAS 117, check here ▶

Paid-in or capital surplus, or land, bldg , and equipment fund

Retained earnings, accumulated income, endowment, or other funds

Total net assets or fund balances (see instructions)

Total liabilities and net assets/fund balances (see instructions) .

Analysis of Changes in Net Assets or Fund Balances

Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30

Total net assets or fund balances at beginning of year-Part II, column (a), line 30 (must agree with end-

Land, buildings, and equipment basis

instructions Also, see page 1, item I)

Other assets (describe > _

Other liabilities (describe -

Unrestricted

Temporarily restricted

Permanently restricted .

and complete lines 27 through 31.

of-year figure reported on prior year's return)

Decreases not included in line 2 (itemize) ▶

Enter amount from Part I, line 27a

Other increases not included in line 2 (itemize) -

Loans from officers, directors, trustees, and other disqualified persons

Mortgages and other notes payable (attach schedule).

(d)	
Date sold	

Page **3**

	(a) the kind(s) of property so chouse, or common stock	(b) How acquir P—Purchas D—Donatio	se	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)		
1 a Vanguard Instl Index Fur	 nd			2016-01-21	2016-03-22		
b Various Publicly Traded S						2016-08-08	2016-08-08
c							-
d							
e							
	(f)			(g)		(I	<u>,,</u>
(e)	Depreciatio			other basis		Gain oi	
Gross sales price	(or allov	able)	plus expe	ense of sale		(e) plus (f)	minus (g)
a 83	9,993			766	5,664		73,329
b 5,03	5,288			5,035	5,288		0
c							
d							
e							
Complete only for assets	showing gain in column	h) and owned b	ov the foundation	on 12/31/69		(1	<u>, </u>
	(i)		i	(k)		Gains (Col (l	
(i) FMV as of 12/31/69	Adjusted	basis		of col (ı)		col (k), but not	
1 M V 43 01 12/31/09	as of 12/	31/69	over col	(j), if any		Losses (fro	m col (h))
a							73,329
b							0
С							
d							
e							
· -	gain or (loss) as defined in rt I, line 8, column (c) (se	If $($ look is sections 1222)	If (loss), enter -0	Part İ, line 7	}	2	73,329
	Jnder Section 4940(Investmen	t Inco	ome	
For optional use by domestic p	rıvate foundatıons subjec	to the section	4940(a) tax on ne	t investment i	ncome)	
f section 4940(d)(2) applies, le	eave this part blank						
Vas the foundation liable for th f "Yes," the foundation does no	t qualify under section 49	140(e) Do not o	complete this part			L Y€	No No
1 Enter the appropriate am	nount in each column for	each year, see i	nstructions before	making any e	ntries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distri	outions Net	(c) value of noncharitab			(d) Distribution ration (col (b) divided by co	ol (c))
2015		0		559,750			0 000000
2014							
2013							
2012							
2011							
2 Total of line 1, column (d	d)				2		0 000000
3 Average distribution ratio				, or by the	_		
number of years the foun 4 Enter the net value of not				: : : :	3 4		<u>0 000000</u> 7,269,235
5 Multiply line 4 by line 3			•		5		0
6 Enter 1% of net investme					6		2,697
7 Add lines 5 and 6	,	,		+	7		2,697
				+	8		
8 Enter qualifying distribution If line 8 is equal to or green instructions						a 1% tax rate See	353,737 e the Part VI
						Fo	rm 990-PF (2016)

	If "Yes," attach the statement requir	ed b	y Regulations section 53	4945-5(d)						
6 a	Did the foundation, during the year,	rece	eive any funds, directly or	indirectly, to pay premiu	ims on					
	a personal benefit contract?				. 🗆					
b	a personal benefit contract?									
	If "Yes" to 6b, file Form 8870					Ī				
7a	At any time during the tax year, was	the	foundation a party to a p	rohibited tax shelter tran	nsaction? Yes					
b	If yes, did the foundation receive an				∟ Yes 💌	No	7b			
	Information About O		· · · · · · · · · · · · · · · · · · ·		nagers, Highly Paid Er	nplov	vees.			
Pa	and Contractors		,,		g, g ,		, ,			
1	List all officers, directors, trustee	s. f	oundation managers an	d their compensation	(see instructions).					
	List all officers, affectors, trastee	<i>5</i> ,			(d)					
	(a) Name and address		Title, and average hours per week	(c) Compensation (If not paid, enter	Contributions to employee	Expense ac				
	(a) mame and address	(b) devoted to position	-0-)	benefit plans and deferred		(e) other allowan		nces	
	Addıtıonal Data Table		-	-	compensation	1				
see	Additional Data Table									
2	Compensation of five highest-pai	d er	nployees (other than th	ose included on line 1		ne, er	nter "I	NONE.		
	(a)		Title, and average		Contributions to					
Na	ame and address of each employee pa	ıd	hours per week	(c) Compensation	employee benefit plans and deferred			e acco allowar		
	more than \$50,000		(b) devoted to position		(d) compensation	(0)		anomai	1000	
NON	E									
			1							
			1							
			1							
Tota	I number of other employees paid over	r¢	50,000	1						
OLA	in number of other employees paid over	н фС		· · · · · · · · ·		Г	004)-PF (2016	
						For	пээ	,-PF	/U15	

Form 990-PF (2016)	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	Managers, Highly Paid Employees,
3 Five highest-paid independent contractors for professional services (see instru	ctions). 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 IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year Include relevant statistical in organizations and other beneficiaries served, conferences convened, research papers produced, etc	formation such as the number of Expenses
1 Not Applicable	0
2	
3	
4	
Part IX-B Summary of Program-Related Investments (see instructions)	
Describe the two largest program-related investments made by the foundation during the tax year on line	s 1 and 2 Amount
1 Not Applicable	0
2	
All other program-related investments See instructions	0
Total. Add lines 1 through 3	
	Form 990-PF (2016)

1a

1b

2

3a 3b

4

5

353,737

353.737

2.697

351.040

Form 990-PF (2016)

Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes

Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Adjusted qualifying distributions. Subtract line 5 from line 4.

Amounts set aside for specific charitable projects that satisfy the

the section 4940(e) reduction of tax in those years

Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.

Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for

1

2

3

4

5

Page 9

360.765

332,728

28,037

Form **990-PF** (2016)

Part XIII Undistributed Income (see instructions) Distributable amount for 2016 from Part XI, line 7

XII, line 4 > \$

2

а b

3

b

	Undistributed income, if any, as of the end of 2016								
	Enter amount for 2015 only								
,	Total for prior years 20								
	Excess distributions carryover, if any, to 2016								
	From 2011								
•	From 2012								
	From 2013								
	From 2014								
!	From 2015								
	Total of lines 3a through e								

4 Qualifying distributions for 2016 from Part

a Applied to 2015, 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

5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the

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 2015 Subtract line 4a from line 2a Taxable amount—see instructions f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must

be distributed in 2017 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) 8 Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . .

9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a

10 Analysis of line 9

a Excess from 2012. . . **b** Excess from 2013. . c Excess from 2014. . . . d Excess from 2015. . . e Excess from 2016. . .

6 Enter the net total of each column as

d Applied to 2016 distributable amount. e Remaining amount distributed out of corpus

same amount must be shown in column (a))

(a)

Corpus

0

(b)

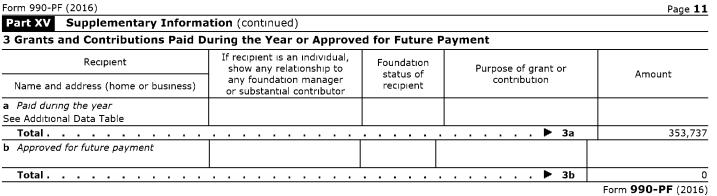
Years prior to 2015

(c)

2015

21,009

21,009



Form 990-PF (2016)						Page 12
Part XVI-A Analysis	s of Income-Producing	Activities				
Enter gross amounts unless	otherwise indicated	Unrelated bu	isiness income	Excluded by section	512, 513, or 514	(e) Related or exempt
1 Program service revenue		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See instructions)
a b						
c						
d						
e f						
g Fees and contracts fro						
2 Membership dues and as						
3 Interest on savings and investments	temporary cash			14	185	
4 Dividends and interest fi				14	217,926	
5 Net rental income or (los a Debt-financed property	·					
b Not debt-financed prop	perty					
•	oss) from personal property					
7 Other investment incom8 Gain or (loss) from sale						
ınventory				18	73,329	
9 Net income or (loss) from10 Gross profit or (loss) from	•					
11 Other revenue a						
b						
c						
e						
12 Subtotal Add columns (0		291,440	291,440
13 Total. Add line 12, colui (See worksheet in line 13 ins				13	3	291,440
Part XVI-B Relation						
	how each activity for which hment of the foundation's ex					
						rm 990-PF (2016)

Part	XVII	Exempt Organi		iaiisi	1615 10 6	and mansacti	10113	aliu Kelatioi	iisiiips witii itoii	Cilalitable		
		ganization directly or in Code (other than section								n 501	Yes	No
a Tra	nsfers	from the reporting four	idation to a n	oncha	arıtable ex	empt organizatio	on of					
(1)	Cash									. 1a(1)		No
(2)	Othe	rassets								. 1a(2)		No
b Oth	ner trar	nsactions										
(1)	Sales	s of assets to a nonchar	itable exemp	t orga	inization.					. 1b(1)		No
(2)) Purcl	hases of assets from a r	noncharitable	exem	npt organiz	zation				1b(2)		No
		al of facilities, equipme								1b(3)		No
(4)) Reim	bursement arrangemer	nts							. 1b(4)		No
		s or loan guarantees.								. 1b(5)		No
(6)	Perfor	rmance of services or m	embership o	r fund	raising so	licitations				. 1b(6)		No
	-	f facilities, equipment, r			•					. 1c		No
		wer to any of the above ods, other assets, or ser										
		nsaction or sharing arra										
	٠.	,			•			•	,			
(a) Line	e No	(b) Amount involved	(c) Name of	noncha	arıtable exe	mpt organization	-	(d) Description of	transfers, transactions,	and sharing arra	ngemen	ts
	-											
	-											
	+											
2a Is t	he fou	ndation directly or indir	ectly affiliate	d with	or relate	d to one or mor	re tav	v-evemnt organi	zations			
		in section 501(c) of the	•		•	•		, ,		. 🗆 Yes	☑ N	0
		complete the following s	•	Clair	Section 30)1(c)(J)) 01 III 3e	ECCIO	132/1		. 🗀 163	L 14	O
וו ט	Tes, C	omplete the following s. (a) Name of organization			1 (b) Type of organiza	ation	1	(c) Description	of relationship		
		(-,			,	-, ., _F			(-)			
			· · · · · · · · · · · · · · · · · · ·									
		er penalties of perjury, ny knowledge and belief										
Sign		ch preparer has any kno		orrect,	, and com	piete Deciaratio	11 01 1	preparer (other	than taxpayer) is ba	sed on an imor	mation	1 01
Here		*****				2017-04-10		*****	М	ay the IRS discus	s this re	eturn
пеге	│					2017 01 10		-)		ith the preparer s		
		Signature of officer or t	rustee			Date		7 Title	(s	see instr)? 🔲 Y	es 🗆 N	lo
	•	Print/Type preparer's	name	Pren	arer's Sigi	nature		Pate		TIN		
		Trinity Type preparer	, manne	' ' ' '	urer 5 5igi	nature	٦	ale	Check if self-			
		David Familia							employed ▶ 🗌	P00570	1490	
Paid		David Fowler										
Prep		Firm's name ► Lepr	ino Foods Co	mpan	v							
Use [.]		Timin o manne r Lepi		pan	,				F	irm's EIN ▶84	-05002	92
			330 West 38t	h Avei	nue							
			enver, CO 80	1211					Р	Phone no (303) 480-2	2600
			LIIVEI, CO OL	· ∠ 1 1								

(a) Name and address Title, and average (c) Compensation (If (d) Expense account, Contributions to hours per week not paid, enter (e) other allowances (b) devoted to position -0-) employee benefit plans and deferred compensation Gina Vecchiarelli Director 0 0.00

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

730 17th Street Suite 715 Denver, CO 80202	0 00			
Terry Leprino	Director	0	0	0
1830 West 38th Avenue Denver, CO 80211	0 00			

Terry Leprino	Director	0	0	0
1830 West 38th Avenue Denver, CO 80211	0 00			
Barbara Kallay	Director	0	0	0
Barbara Kallay	Director 5 00	0	0	

Terry Leprino	Director	0	0	0
1830 West 38th Avenue Denver, CO 80211	1 0 00			
Barbara Kallay	Director	0	0	0
1830 West 38th Avenue	5 00			

1830 West 38th Avenue Denver, CO 80211	0 00			
Barbara Kallay	Director	0	0	0
1830 West 38th Avenue Denver, CO 80211	5 00			

Barbara Kallay	Director 5 00	0	0	0
1830 West 38th Avenue Denver, CO 80211				
Michael Reidy	Director	0	0	0
1830 West 38th Avenue	5 00			

Director 0.00

Denver, CO 80211

1830 West 38th Avenue Denver, CO 80211

Larry Jensen

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year Angels of Action PO Box 1020 N/A Public Charity For Unrestricted Use 2,500 Big Rapids, MI 49307 Barryton Area Mobile Food Pantry N/A Public Charity For Unrestricted Use 2,000 PO Box 293 Remus, MI 49340 Case for Kids N/A Public Charity For Unrestricted Use 2,500 1852 West 11th Street 134 Tracy, CA 95376 Catholic Charities Weld County Region N/A Public Charity For Unrestricted Use 11,000 1442 N 11th Ave Greeley, CO 80631 Children's Storybook Garden & Museum N/A Public Charity For Unrestricted Use 8,000 1606 N Redington Street Hanford, CA 93230 Chippewa Hills School District N/A Public Charity For Unrestricted Use 5,607 3226 Arthur Road Remus, MI 49340 Chippewa Hills Intermediate School N/A Public Charity For Unrestricted Use 5,000 3102 Arthur Road Remus, MI 49340 Converge Day Treatment Center N/A Public Charity For Unrestricted Use 4,500 400 State Street Fort Morgan, CO 80701 Denver Kids Inc. N/A Public Charity For Unrestricted Use 2,500 1860 Lincoln Street 9th Floor Denver, CO 80203 East Side Little League Youth Baseball N/A Public Charity For Unrestricted Use 10,000 PO Box 3507 Roswell, NM 88202 Escuela Valdez Parent Teacher N/A Public Charity For Unrestricted Use 3,500 Organization 2525 West 29th Avenue Denver, CO 80219 2,500 Food Bank of the Southern Tier Catholic N/A Public Charity For Unrestricted Use Charities of the Diocese of Roche 388 Upper Oakwood Ave Elmira, NY 14903 Forgotten Eagles Inc Chapter 3 N/A Public Charity For Unrestricted Use 3,000 PO Box 1291 Mt Pleasant, MI 48804 GenYouth Foundation Youth Improved N/A Public Charity For Unrestricted Use 52,046 10255 West Higgins Road Suite 900 Rosemont, IL 60018 Give Every Child A Chance N/A Public Charity For Unrestricted Use 8,000 322 Sun West Place Manteca, CA 95337

Total . 3a 353,737

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment					
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount	
Name and address (home or business)	any foundation manager or substantial contributor	recipient			
a Paid during the year					
Harvest Ministries of Roswell 601 N Main Street Roswell, NM 88201	N/A	Public Charity	For Unrestricted Use	10,000	
Helping Others Provide Encouragement HOPE Ministries 520 S Union Road Manteca, CA 95337	N/A	Public Charity	For Unrestricted Use	8,000	
Jackson Elementary School 2002 25th Street Greeley, CO 80631	N/A	Public Charity	For Unrestricted Use	24,500	
Kıds Food Basket of Holland 389 James Street Holland, MI 49424	N/A	Public Charity	For Unrestricted Use	3,500	
Lean on Me Outreach Center Resurrection Life Church 11555 Edegerton Ave NE Rockford, MI 49341	N/A	Public Charity	For Unrestricted Use	3,500	
Lemoore High School FFA 101 East Bush Street Lemoore, CA 93245	N/A	Public Charity	For Unrestricted Use	20,700	
Lemoore Senior Citizens Inc 789 South 18th Avenue Lemoore, CA 93245	N/A	Public Charity	For Unrestricted Use	10,000	
LocalWorks (WheatRidge2020) 7391 West 38th Avenue Suite 130 Wheat Ridge, CO 80033	N/A	Public Charity	For Unrestricted Use	1,500	
Love Inc of Allendale 6633 Lake Michigan Drive Allendale, MI 49401	N/A	Public Charity	For Unrestricted Use	2,000	
Madison Elementary School 500 24th Avenue Greeley, CO 80634	N/A	Public Charity	For Unrestricted Use	24,500	
Manna Meals Lighthouse Community Church 6261 Lake Michigan Drive Suite A Allendale, MI 49401	N/A	Public Charity	For Unrestricted Use	3,500	
Mecha Maniacs Morgan County 4H 914 East Railroad Fort Morgan, CO 80701	N/A	Public Charity	For Unrestricted Use	1,500	
Mecosta Elementary Chippewa Hills Schools 555 West Main Street Mecosta, MI 49332	N/A	Public Charity	For Unrestricted Use	1,984	
Morgan County Family Center 411 Main Street Suite 100 Fort Morgan, CO 80701	N/A	Public Charity	For Unrestricted Use	4,500	
Mount Saint Vincent Sisters of Charity of Leavenworth Inc 4159 Lowell Blvd Denver, CO 80211	N/A	Public Charity	For Unrestricted Use	10,000	

Total .

353,737

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment Recipient If recipient is an individual, Foundation Purpose of grant or Amount show any relationship to status of contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year Our Brothers Keeper Shelter N/A Public Charity For Unrestricted Use 5,000 405 S Third St PO Box 1142 Big Rapids, MI 49307 Reading Partners Colorado N/A Public Charity For Unrestricted Use 11,500 1600 Downing Street Suite 700 Denver, CO 80218 Remus Area Historical Society N/A Public Charity For Unrestricted Use 2,000 PO Box 71 324 South Sheridan Remus, MI 49340 Riverdale High School FFA PO Box 726 N/A Public Charity For Unrestricted Use 4,400 Riverdale, CA 93656 SARA Inc (Sexual Assault Response N/A Public Charity For Unrestricted Use 4,500 Advocates) PO Box 633 418 Ensign Street Fort Morgan, CO 80701 Public Charity Saint Luke University Parish N/A For Unrestricted Use 3,500 6163 Lake Michigan Drive Allendale, MI 49401 Salıda del Sol Academy Foundation N/A Public Charity For Unrestricted Use 10,000 111 East 26th Street Greeley, CO 80631 Salvation Army 314 South Elmer Ave N/A Public Charity For Unrestricted Use 2,500 Savre, PA 18840 Tennyson Center for Children N/A Public Charity For Unrestricted Use 13,500 2950 Tennyson Street Denver, CO 80212 The Boys and Girls Club of Roswell N/A Public Charity For Unrestricted Use 12,000 201 South Garden Avenue Roswell, NM 88203 The Bridge of the Penn York Valley N/A Public Charity For Unrestricted Use 5,000 Churches PO Box 202 Sayre, PA 18840 7,500 The Child Abuse Prevention Council N/A **Public Charity** For Unrestricted Use 540 N California Street Stockton, CA 95202 The Little Sisters of the Poor N/A Public Charity For Unrestricted Use 7,000 3629 West 29th Avenue Denver, CO 80211 Weld Food Bank 1108 H Street N/A Public Charity For Unrestricted Use 11,000 Greeley, CO 80631 WISE (Women's Information Service) N/A Public Charity For Unrestricted Use 2,000 PO Box 1249

Big Rapids, MI 49307

Total.

За

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491100002	097
TY 2016 All Other Program Related Investments Schedule					
Name:	Leprino Foods	Company Foundation			
EIN:	47-3608278				
	Category			Amount	
Not Applicable					0

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491100002097	
TY 2016 Investments Corporate Bonds Schedule			

Name: Leprino Foods Company Foundation

End of Year Fair

Market Value

975,075

978,637

EIN: 47-3608278	
Name of Bond	End of Year Bool Value

Fixed Income Funds

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93491100002097				
TY 2016 Investments Corporate Stock Schedule						

Name: Leprino Foods Company Foundation

Name of Stock	End of Ye
EIN: 47-3608278	
,,,,,,,,,,,,,,,,,,	

Equity Funds

End of Year Book

6,144,722

Value

End of Year Fair **Market Value**

6,791,469

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -		DLN	: 93491100002097		
TY 2016 Other Expenses Schedule						
Name:	Leprino Foods	Company Foundat	tion			
EIN: 47-3608278						
Other Expenses Schedule						
Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes		

1,735

Other Expenses Schedule	
Description	Re

Insurance

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491100002097 TY 2016 Other Professional Fees Schedule					
Name: Leprino Foods Company Foundation EIN: 47-3608278					
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	

20,000

Investment Consulting Fees

efile GRAPHIC print - DO NOT PROCESS	As Filed Data	-	DL	N: 93491100002097	
TY 2016 Taxes Schedule					
Name	: Leprino Food	ds Company Found	lation		
	: 47-3608278	• •			
LIN	. +/ 30002/0	, 		1	
Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
Federal Excise Tax	1,001	0		0	

Foreign Taxes Paid

efile GRAPHIC print - DO NOT PROCESS As Filed Data - DLN: 93491100002097					
Schedule B (Form 990, 990-EZ,	Schedule of Contributors		OMB No 1545-0047		
or 990-PF) Department of the Treasury Internal Revenue Service	PO-PF) Attach to Form 990, 990-EZ, or 990-PF The Treasury Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at				
Name of the organizat Leprino Foods Company		Employer i	dentification number		
		47-3608278	3		
Organization type (ch	eck one)				
Filers of:	Section:				
Form 990 or 990-EZ 501(c)() (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation			
	☐ 527 political organization				
Form 990-PF	501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundat	tion			
	501(c)(3) taxable private foundation				
V	ation filing Form 990, 990-EZ, or 990-PF that received, during the year, contri r property) from any one contributor Complete Parts I and II See instructions	_	•		
Special Rules					
under sections received from a	tion described in section $501(c)(3)$ filing Form 990 or 990-EZ that met the 33^1 $509(a)(1)$ and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 990 or 990-EZ ny one contributor, during the year, total contributions of the greater of (1) \$5, the 1h, or (II) Form 990-EZ, line 1 Complete Parts I and II	Z), Part II, line 13	, 16a, or 16b, and that		
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III					
during the year, If this box is che purpose Do no	tion described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that contributions exclusively for religious, charitable, etc., purposes, but no such ecked, enter here the total contributions that were received during the year for complete any of the parts unless the General Rule applies to this organizate able, etc., contributions totaling \$5,000 or more during the year	contributions total an exclusively recondecause it rec	aled more than \$1,000 eligious, charitable, etc , ceived <i>nonexclusively</i>		
Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)					
For Paperwork Reduction for Form 990, 990-EZ, or 9		hedule B (Form 990	0, 990-EZ, or 990-PF) (2016)		

Name of organization per organization (per property contributions) Point Contributor's December Contributor's December Contribution Contribut	Schedule B (Form 990, 990-EZ, or 990-PF) (2016) Page			
(a) No. Name, address, and ZIP + 4 Lepmo Foods Company Lepmo Foods Company Denver, CO80211 (a) (b) Name, address, and ZIP + 4 Lepmo Foods Company Denver, CO80211 (c) Total contributions Type of contribution Person Payroll Noncash Complete Part II for noncash contributions (a) No. Name, address, and ZIP + 4 (c) Total contributions Type of contribution Person Payroll Noncash Complete Part II for noncash contributions (c) Type of contribution Person Payroll Noncash Complete Part II for noncash contributions (c) Type of contribution Type of contribution Person Payroll Noncash Complete Part II for noncash contributions (c) Type of contribution Person Payroll Noncash Complete Part II for noncash contributions (a) No. Name, address, and ZIP + 4 Total contributions Type of contribution Person Payroll Noncash Complete Part II for noncash contributions Type of contribution				number
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1830 West 38th Avenue				(d) Type of contribution
1830 West 38th Avenue	1	Leprino Foods Company		
(a) No. Name, address, and ZIP + 4 Complete Part II for noncash contributions Type of contribution		1830 West 38th Avenue	\$ 5,035,288	· ·
No. Name, address, and ZIP + 4 Complete Part II for noncash contributions Type of contribution Person Payroll Noncash Complete Part II for noncash contributions Person Payroll Type of contribution Person Payroll Person Payroll Person Payroll Noncash Complete Part II for noncash contributions Person Payroll Noncash Complete Part II for noncash contributions Person Payroll Noncash Person Payroll Person		Denver, CO80211		
Payroll			(c) Total contributions	
S Noncash				Person
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Payroll Noncash Complete Part II for noncash contributions				
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No. Name, address, and ZIP + 4 Total contributions Person Payroll S Noncash (Complete Part II for noncash contributions) (a) No. Name, address, and ZIP + 4 Payroll Total contributions Person Payroll Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) Person Payroll Noncash (Complete Part II for noncash contributions)				contributions)
Sample Payroll Noncash (Complete Part II for noncash contributions)			(c) Total contributions	
Some Noncash Complete Part II for noncash contributions				Person
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(a) (b) (c) (d) Total contributions Person Payroll Noncash (Complete Part II for noncash contributions)			\$	Noncash
No. Name, address, and ZIP + 4 Total contributions Person Payroll Noncash (Complete Part II for noncash contributions)				
Payroll Noncash (Complete Part II for noncash contributions)			(c) Total contributions	
\$ Noncash (Complete Part II for noncash contributions)				Person
(Complete Part II for noncash contributions)	-			Payroll
contributions)			<u>\$</u>	Noncash
A-1 AAA AAA BEL AAAA BEL AAAAA				contributions)

Schedule B (Forr	n 990, 990-EZ, or 990-PF) (2016)		Page 3
Name of organiz Leprino Foods Con		Employer identification number	
Lepi illo Podas Coll	ipany roundation	47-3608278	
Part II	Noncash Property		
(a) No.from Part I	(see instructions) Use duplicate copies of Part II if additional space is needed (b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	Publicly Traded Securities	\$ 5,035 288	2016-08-02
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No.from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		Schedule B (Form 9	990, 990-EZ, or 990-PF) (2016)

Schedule B (Form	990, 990-EZ, or 990-PF) (2016)		Page 4	
Name of organization Leprino Foods Company Foundation			Employer identification number 47-3608278	
than \$1, organiz the year	,000 for the year from any one contributor	r. Complete columns (a) thro of exclusively religious, chari ctions.) ▶ \$	d in section 501(c)(7), (8), or (10) that total more ugh (e) and the following line entry. For table, etc., contributions of \$1,000 or less for	
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, and	(e) Transfer of gift ZIP 4 F	t Relationship of transferor to transferee	
(a)	/h) Dumaga of sift	(c) Hop of suff	(d) Decoription of how wift is hold	
No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, and	(e) Transfer of gift	t Relationship of transferor to transferee	
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, and	(e) Transfer of gift	t Relationship of transferor to transferee	
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held	
	Transferee's name, address, and	(e) Transfer of gift	t Relationship of transferor to transferee	
			Schedule B (Form 990, 990-EZ, or 990-PF) (2016)	