



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



Form **990-PF**
 Department of the Treasury
 Internal Revenue Service

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

▶ **Do not enter social security numbers on this form as it may be made public.**
 ▶ **Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.**

OMB No 1545-0052
2016
Open to Public Inspection

For calendar year 2016, or tax year beginning 01-01-2016, and ending 12-31-2016

Name of foundation THE CORTOPASSI FAMILY FOUNDATION		A Employer identification number 68-0232655	
Number and street (or P O box number if mail is not delivered to street address) 11292 N ALPINE ROAD		B Telephone number (see instructions) (209) 948-0792	
City or town, state or province, country, and ZIP or foreign postal code STOCKTON, CA 95212		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ 15,460,260		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis)			

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	1,137,951			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	10,734	10,734		
	4 Dividends and interest from securities	803,131	803,131		
	5a Gross rents	37,500	37,500		
	b Net rental income or (loss) 20,935				
	6a Net gain or (loss) from sale of assets not on line 10	-1,237,103			
	b Gross sales price for all assets on line 6a 3,762,897				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain				
	9 Income modifications				
	10a 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	752,213	851,365			
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	16,200	0		16,200
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)	30,070	0		30,070
	b Accounting fees (attach schedule)	16,000	4,000		12,000
	c Other professional fees (attach schedule)	86,039	1,250		84,789
	17 Interest				
	18 Taxes (attach schedule) (see instructions)	11,742	4,426		0
	19 Depreciation (attach schedule) and depletion	64,091	0		
	20 Occupancy				
	21 Travel, conferences, and meetings				
	22 Printing and publications				
	23 Other expenses (attach schedule)	931,930	10,889		0
	24 Total operating and administrative expenses. Add lines 13 through 23	1,156,072	20,565		143,059
	25 Contributions, gifts, grants paid	996,488			996,488
26 Total expenses and disbursements. Add lines 24 and 25	2,152,560	20,565		1,139,547	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	-1,400,347				
b Net investment income (if negative, enter -0-)		830,800			
c Adjusted net income (if negative, enter -0-)					

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	1,518,814	4,160,119	4,160,119
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ 350,000 Less allowance for doubtful accounts ▶ _____ 0	0	350,000	350,000
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)	15,311,012	10,470,385	9,348,473
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment basis ▶ _____ 513,066 Less accumulated depreciation (attach schedule) ▶ _____ 64,091	0	448,975	448,975
15 Other assets (describe ▶ _____)	1,152,693	1,152,693	1,152,693	
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	17,982,519	16,582,172	15,460,260	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable	502,900	98,135	
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)	231	231	
	23 Total liabilities (add lines 17 through 22)	503,131	98,366	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted	16,369,385	15,373,803	
	25 Temporarily restricted	1,110,003	1,110,003	
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg , and equipment fund			
29 Retained earnings, accumulated income, endowment, or other funds				
30 Total net assets or fund balances (see instructions)	17,479,388	16,483,806		
31 Total liabilities and net assets/fund balances (see instructions) .	17,982,519	16,582,172		

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	17,479,388
2 Enter amount from Part I, line 27a	2	-1,400,347
3 Other increases not included in line 2 (itemize) ▶ _____	3	404,765
4 Add lines 1, 2, and 3	4	16,483,806
5 Decreases not included in line 2 (itemize) ▶ _____	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .	6	16,483,806

Part IV Capital Gains and Losses for Tax on Investment Income

(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)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1 a AUSTRALIAN GOVT 4750 REDEMPTION OF MATURE BOND	P		2016-06-15
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 3,762,897		5,000,000	-1,237,103
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			-1,237,103
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	-1,237,103
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8	3	

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?
If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part Yes No

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	2,732,017	18,530,829	0.147431
2014	1,430,843	31,330,546	0.045669
2013	1,887,516	25,107,055	0.075179
2012	1,050,960	25,275,599	0.041580
2011	1,463,324	31,554,676	0.046374

2 Total of line 1, column (d)	2	0.356233
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.071247
4 Enter the net value of noncharitable-use assets for 2016 from Part X, line 5	4	13,094,908
5 Multiply line 4 by line 3	5	932,973
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	8,308
7 Add lines 5 and 6	7	941,281
8 Enter qualifying distributions from Part XII, line 4	8	1,139,547

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

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

Table with 11 rows for excise tax calculation. Includes fields for exempt foundations, domestic foundations, tax under section 511, subtitle A tax, and total tax due. Includes sub-table for 2016 estimated tax payments (6a-6d).

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question number, 'Yes', and 'No'. Questions cover political campaign influence, political expenditures, unrelated business income, and state reporting.

Part VII-A Statements Regarding Activities (continued)

Table with 3 columns: Question, Yes, No. Rows 11-13 regarding controlled entities, donor advised funds, and public inspection requirements.

14 The books are in care of DONALD G LENZ Telephone no (209) 948-0792

Located at 11292 N ALPINE RD STOCKTON CA ZIP+4 95212

15 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.

Table with 3 columns: Question, Yes, No. Row 16 regarding foreign bank and financial accounts.

Part VII-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.

Main table for Part VII-B with 3 columns: Question, Yes, No. Rows 1a-4b regarding Form 4720 exceptions and requirements.

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? Yes No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? Yes No

(3) Provide a grant to an individual for travel, study, or other similar purposes? Yes No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). Yes 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? Yes No

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 disaster assistance (see instructions)? Yes No
 Organizations relying on a current notice regarding disaster assistance check here.

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes No
 If "Yes," attach the statement required by Regulations section 53.4945–5(d)

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No
 If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Yes No

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation (see instructions).

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

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NONE				

Total number of other employees paid over \$50,000. Yes No 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
SAN TOMO INC 11292 ALPINE ROAD STOCKTON, CA 95212	MANAGEMENT	449,884
MALCOUN AND ASSOCIATES 7953 FOPPIANO LANE STOCKTON, CA 95212	CONSULTING	78,856
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 information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1	
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 lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see 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	10,496,053
b	Average of monthly cash balances.	1b	2,798,270
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	13,294,323
e	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	13,294,323
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	199,415
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	13,094,908
6	Minimum investment return. Enter 5% of line 5.	6	654,745

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	654,745
2a	Tax on investment income for 2016 from Part VI, line 5.	2a	8,308
b	Income tax for 2016 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	8,308
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	646,437
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	646,437
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	646,437

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	1,139,547
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		
a	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 V, line 8, and Part XIII, line 4.	4	1,139,547
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 (see instructions).	5	8,308
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,131,239

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
1 Distributable amount for 2016 from Part XI, line 7				646,437
2 Undistributed income, if any, as of the end of 2016				
a Enter amount for 2015 only.			0	
b Total for prior years 20___, 20___, 20___		0		
3 Excess distributions carryover, if any, to 2016				
a From 2011.				
b From 2012.				
c From 2013.				633,201
d From 2014.				
e From 2015.				1,817,948
f Total of lines 3a through e.	2,451,149			
4 Qualifying distributions for 2016 from Part XII, line 4 ▶ \$ <u>1,139,547</u>				
a Applied to 2015, 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 2016 distributable amount.				646,437
e Remaining amount distributed out of corpus	493,110			
5 Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a))				0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,944,259			
b Prior years' undistributed income Subtract line 4b from line 2b		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions		0		
e Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017				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 2011 not applied on line 5 or line 7 (see instructions).	0			
9 Excess distributions carryover to 2017. Subtract lines 7 and 8 from line 6a	2,944,259			
10 Analysis of line 9				
a Excess from 2012.				
b Excess from 2013.				633,201
c Excess from 2014.				
d Excess from 2015.				1,817,948
e Excess from 2016.				493,110

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling. ▶

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed

	Tax year	Prior 3 years			(e) Total
	(a) 2016	(b) 2015	(c) 2014	(d) 2013	
b 85% of line 2a					
c 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					

3 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)

(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 Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:

a 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))

b 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

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here 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 (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

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

Part XV **Supplementary Information** (continued)**3 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 status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total ▶ 3a				996,488
b <i>Approved for future payment</i>				
Total ▶ 3b				0

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

Part XVII

- 1** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?
- a** Transfers from the reporting foundation to a noncharitable exempt organization of
- (1) Cash.
- (2) Other assets.
- b** Other transactions
- (1) Sales of assets to a noncharitable exempt organization.
- (2) Purchases of assets from a noncharitable exempt organization.
- (3) Rental of facilities, equipment, or other assets.
- (4) Reimbursement arrangements.
- (5) Loans or loan guarantees.
- (6) Performance of services or membership or fundraising solicitations.
- c** Sharing of facilities, equipment, mailing lists, other assets, or paid employees.
- d** If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

	Yes	No
1a(1)		No
1a(2)		No
1b(1)		No
1b(2)		No
1b(3)		No
1b(4)		No
1b(5)		No
1b(6)		No
1c		No

(a) Line No	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements

2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

Sign Here ▶ Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

***** | 2017-05-12 | *****

Signature of officer or trustee | Date | Title

May the IRS discuss this return with the preparer shown below (see instr)? Yes No

Paid Preparer Use Only

Print/Type preparer's name GARY R DANIEL	Preparer's Signature	Date 2017-05-12	Check if self-employed <input type="checkbox"/>	PTIN P00045989
Firm's name ▶ BOWMAN & COMPANY LLP				Firm's EIN ▶ 94-1481988
Firm's address ▶ 10100 TRINITY PARKWAY SUITE 310 STOCKTON, CA 95219				Phone no (209) 473-1040

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

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
DEAN CORTOPASSI 11292 N ALPINE ROAD STOCKTON, CA 95212	PRESIDENT 1 00	0	0	0
JOAN CORTOPASSI 11292 N ALPINE ROAD STOCKTON, CA 95212	TRUSTEE 1 00	0	0	0
DONALD LENZ 11292 N ALPINE ROAD STOCKTON, CA 95212	SEC/TREAS 1 00	0	0	0
KATHERINE WHITLOW 11292 N ALPINE ROAD STOCKTON, CA 95212	TRUSTEE 1 00	2,025	0	0
REBECCA CARLSON 11292 N ALPINE ROAD STOCKTON, CA 95212	TRUSTEE 1 00	2,700	0	0
CARLA DONALDSON 11292 N ALPINE ROAD STOCKTON, CA 95212	TRUSTEE 1 00	3,375	0	0
TOM CORTOPASSI 11292 N ALPINE ROAD STOCKTON, CA 95212	TRUSTEE 1 00	4,050	0	0
JEFF COLUMBINI 11292 N ALPINE ROAD STOCKTON, CA 95212	TRUSTEE 1 00	4,050	0	0

Form 990FP 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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)					
a <i>Paid during the year</i>					
AHA FOUNDATION INC 130 7TH AVE SUITE 236 NEW YORK, NY 10011		NONE	PC	CHARITABLE	2,000
AHA FOUNDATION INC 3208 43RD ST SACRAMENTO, CA 95817		NONE	PC	CHARITABLE	5,000
ALZHEIMER'S AID SOCIETY OF NO CALIFORNIA 2641 COTTAGE WAY 4 SACRAMENTO, CA 95825		NONE	PC	CHARITABLE	1,000
AMERICAN ASSOCIATION OF UNIVERSITY WOMEN PO BOX 690663 STOCKTON, CA 95269		NONE	PC	CHARITABLE	2,000
AMERICAN ASSOCIATION OF UNIVERSITY WOMEN PO BOX 690663 STOCKTON, CA 95269		NONE	PC	CHARITABLE	1,000
AMERICAN CANCER SOCIETY 207 E ALPINE AVE STOCKTON, CA 95204		NONE	PC	CHARITABLE	1,000
AMERICAN LEGION KARL ROSS POST 2020 PLYMOUTH ROAD STOCKTON, CA 95204		NONE	PC	CHARITABLE	5,000
AMERICAN WOMEN ARTISTS PO BOX 755 LODI, CA 95241		NONE	PC	CHARITABLE	5,000
ASSISTANCE LEAGUE OF STOCKTON PO BOX 7766 STOCKTON, CA 95267		NONE	PC	CHARITABLE	1,000
BOSTON COLLEGE WOMEN'S ROWING 201 D2 SOUTH END ZONE CHESTNUT HILL, MA 02467		NONE	PC	CHARITABLE	250
BOSTON COLLEGE WOMEN'S ROWING 201 D2 SOUTH END ZONE CHESTNUT HILL, MA 02467		NONE	PC	CHARITABLE	2,250
BOYS & GIRLS CLUB OF MANTECA AND LATHROP PO BOX 1061 MANTECA, CA 95336		NONE	PC	CHARITABLE	3,500
BOYS AND GIRLS CLUB OF LODI PO BOX 244 LODI, CA 95241		NONE	PC	CHARITABLE	10,000
CALIFORNIA DENTAL ASSOCIATION 1201 K STREET STE 1511 SACRAMENTO, CA 95814		NONE	PC	CHARITABLE	5,000
CALIFORNIA FOUNDATION FOR AGRICULTURE 2300 RIVER PLAZA DRIVE SACRAMENTO, CA 95833		NONE	PC	CHARITABLE	2,500
Total ▶					996,488
3a					

Form 990FP 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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CALIF SECTION AMERICAN CHEMICAL SOCIETY 2950 MERCED STREET 225 SAN LEANDRO, CA 94577	NONE	PC	CHARITABLE	5,000
CALIFORNIA PACIFIC MEDICAL CENTER FNDTN 2100 WEBSTER STREET 401 SAN FRANCISCO, CA 94115	NONE	PC	CHARITABLE	1,000
CALIFORNIA WINE EDUCATION FOUNDATION 2545 WEST TURNER ROAD LODI, CA 95240	NONE	PC	CHARITABLE	1,000
CANCER KIDS OF SAN JOAQUIN COUNTY PO BOX 1592 WOODBIDGE, CA 95258	NONE	PC	CHARITABLE	1,000
CATHEDRAL OF THE ANNUNCIATION 1110 N LINCOLN ST STOCKTON, CA 95203	NONE	PC	CHARITABLE	2,500
CHILD ABUSE PREVENTION COUNCIL PO BOX 1257 STOCKTON, CA 95201	NONE	PC	CHARITABLE	2,500
CHILDREN'S HOME AUXILIARY PO BOX 7512 STOCKTON, CA 95267	NONE	PC	CHARITABLE	5,000
CHILDREN'S MUSEUM OF STOCKTON 402 W WEBER AVENUE STOCKTON, CA 95203	NONE	PC	CHARITABLE	2,500
COMMUNITY HOSPICE FOUNDATION 130 WEST FLORA STREET STOCKTON, CA 95202	NONE	PC	CHARITABLE	1,000
COMMUNITY PARTNERSHIP FOR FAMILIES PO BOX 1569 STOCKTON, CA 95201	NONE	PC	CHARITABLE	150,000
COMMUNITY THEATRE OF LINDEN PO BOX 1282 LINDEN, CA 95236	NONE	PC	CHARITABLE	1,000
CREEKSIDE ELEMENTARY SCHOOL 2515 ESTATE DRIVE STOCKTON, CA 95209	NONE	PC	CHARITABLE	1,000
DELTA WATERFOWL FOUNDATION PO BOX 3128 BISMARCK, ND 58502	NONE	PC	CHARITABLE	2,500
DISTRICT 10 WILD DUCK EGG SALVAGE 9512 MATHEWS LANE MARYSVILLE, CA 95901	NONE	PC	CHARITABLE	2,500
DOBERMAN PINSCHER RESCUE 2946 YOUNG ROAD FILLMORE, CA 93015	NONE	PC	CHARITABLE	1,000
Total ▶				996,488
3a				

Form 990FP 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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)					
a <i>Paid during the year</i>					
ELKHORN SCHOOL 10505 N DAVIS STOCKTON, CA 95209		NONE	PC	CHARITABLE	2,500
EMERGENCY FOOD BANK PO BOX 2241 STOCKTON, CA 95201		NONE	PC	CHARITABLE	5,000
GIVE EVERY CHILD A CHANCE 322 SUN WEST PLACE MANTECA, CA 95337		NONE	PC	CHARITABLE	2,500
GREAT VALLEY BOOKFEST PO BOX 2188 MANTECA, CA 95337		NONE	PC	CHARITABLE	1,000
HAGGIN MUSEUM 1201 N PERSHING AVENUE STOCKTON, CA 95203		NONE	PC	CHARITABLE	25,000
HAGGIN MUSEUM 1201 N PERSHING AVENUE STOCKTON, CA 95203		NONE	PC	CHARITABLE	1,000
HEALTH CAREERS ACADEMY 931 E MAGNOLIA STREET STOCKTON, CA 95202		NONE	PC	CHARITABLE	3,000
HOPE HARBOR WOMEN'S SHELTER PO BOX 1388 LODI, CA 95241		NONE	PC	CHARITABLE	1,000
HORATIO ALGER ASSOCIATION 99 CANAL CENTER PLAZA ALEXANDRIA, VA 22314		NONE	PC	EDUCATIONAL	100,000
HOSPICE OF SAN JOAQUIN 3888 PACIFIC AVE STOCKTON, CA 95204		NONE	PC	CHARITABLE	20,000
JOHN BURTON FOUNDATION 235 MONTGOMERY ST STE 1142 SAN FRANCISCO, CA 94104		NONE	PC	CHARITABLE	10,000
JUNIOR LEAGUE OF SAN JOAQUIN COUNTY PO BOX 7363 STOCKTON, CA 95267		NONE	PC	CHARITABLE	2,500
JUNIOR WOMEN'S GROUP 1201 N PERSHING STOCKTON, CA 95203		NONE	PC	CHARITABLE	1,000
KVIE 2030 W EL CAMINO AVE SACRAMENTO, CA 95833		NONE	PC	CHARITABLE	1,000
LADYBUGS OF STOCKTON 1067 BRISTOL AVE STOCKTON, CA 95204		NONE	PC	CHARITABLE	500
Total ▶					996,488
3a					

Form 990FP 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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LEADERSHIP STOCKTON 6767 E MAIN ST STOCKTON, CA 95215	NONE	PC	CHARITABLE	1,000
LIGURI NEL MONDO PO BOX 693132 STOCKTON, CA 95269	NONE	PC	EDUCATIONAL	2,500
LINDEN-PETERS CHAMBER OF COMMERCE PO BOX 557 LINDEN, CA 95236	NONE	PC	CHARITABLE	1,000
LINDEN YOUTH FOOTBALL & CHEER 110 W PINE STREET LODI, CA 95240	NONE	PC	CHARITABLE	2,000
LODI MEMORIAL FOUNDATION 845 S FAIRMONT AVE STE 3 LODI, CA 95240	NONE	PC	CHARITABLE	5,000
LODI POLICE FOUNDATION 215 W ELM STREET LODI, CA 95240	NONE	PC	CHARITABLE	2,000
LODI SANDHILL CRANE ASSOCIATION PO BOX 1616 LODI, CA 95241	NONE	PC	CHARITABLE	2,500
MARY GRAHAM CHILDREN'S FOUNDATION PO BOX 96 FRENCH CAMP, CA 95231	NONE	PC	EDUCATIONAL	20,000
MAYO CLINIC IN SCOTTSDALE ARIZONA 13400 EAST SHEA BLVD SCOTTSDALE, AZ 95259	NONE	PC	CHARITABLE	10,000
MCNAIR HIGH SCHOOL 1670 E 6TH STREET STOCKTON, CA 95206	NONE	PC	CHARITABLE	1,000
MEXICAN HERITAGE CENTER PO BOX 77985 STOCKTON, CA 95267	NONE	PC	CHARITABLE	1,000
NAMASTE FOUNDATION 229 BRANNAN ST UNITE 3A SAN FRANCISCO, CA 94107	NONE	PC	CHARITABLE	5,000
PACE UNIVERSAL 1 N CALLE CEASER CHAVEZ 102 STOCKTON SANTA BARBARA, CA 93103	NONE	PC	CHARITABLE	5,000
PACIFIC ITALIAN ALLIANCE PO BOX 4142 STOCKTON, CA 95204	NONE	PC	CHARITABLE	5,000
PALO ALTO MEDICAL FOUNDATION 795 EL CAMINO REAL PALO ALTO, CA 94301	NONE	PC	CHARITABLE	10,000
Total				996,488
3a				

Form 990FP 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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PIXIE WOODS CHILDREN'S PARK PO BOX 4622 STOCKTON, CA 95204	NONE	PC	CHARITABLE	1,000
PLUMAS COUNTY SEARCH & RESCUE PO BOX 47 QUINCY, CA 95971	NONE	PC	CHARITABLE	1,000
POLICE SUPPORT FOUNDATION 11292 N ALPINE DR STOCKTON, CA 95212	NONE	PC	CHARITABLE	5,000
PREGNANCY RESOURCE CENTER OF LODI 942 EAST PINE STREET LODI, CA 95240	NONE	PC	CHARITABLE	2,500
PUENTES 4555 PERSHING AVE 33-373 STOCKTON, CA 95207	NONE	PC	CHARITABLE	1,000
RED RHINO ORPHANAGE PROJECT 5131 MORADA LANE STOCKTON, CA 95212	NONE	PC	CHARITABLE	1,000
RIVER CITY ROWING PO BOX 980401 W SACRAMENTO, CA 95798	NONE	PC	CHARITABLE	5,000
STARS 7000 MICHAEL N CANLIS BLVD FRENCH CAMP, CA 95231	NONE	PC	CHARITABLE	2,500
SAINT MARY'S HIGH SCHOOL PO BOX 7247 STOCKTON, CA 95267	NONE	PC	CHARITABLE	5,000
SAINT MARY'S HIGH SCHOOL PO BOX 7247 STOCKTON, CA 95267	NONE	PC	CHARITABLE	23,268
SAINT MARY'S HIGH SCHOOL PO BOX 7247 STOCKTON, CA 95267	NONE	PC	EDUCATIONAL	10,189
SAINT MARY'S HIGH SCHOOL PO BOX 7247 STOCKTON, CA 95267	NONE	PC	EDUCATIONAL	1,000
SAINT MARY'S HIGH SCHOOL PO BOX 7247 STOCKTON, CA 95267	NONE	PC	EDUCATIONAL	22,644
SAINT MARY'S HIGH SCHOOL PO BOX 7247 STOCKTON, CA 95267	NONE	PC	EDUCATIONAL	9,877
SAINT MARY'S HIGH SCHOOL PO BOX 7247 STOCKTON, CA 95267	NONE	PC	EDUCATIONAL	2,500
Total ▶				996,488
3a				

Form 990FP 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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SAINT MARY'S HIGH SCHOOL PO BOX 7247 STOCKTON, CA 95267	NONE	PC	CHARITABLE	22,644
SAINT MARY'S HIGH SCHOOL PO BOX 7247 STOCKTON, CA 95267	NONE	PC	CHARITABLE	9,877
SAINT MARY'S HIGH SCHOOL PO BOX 7247 STOCKTON, CA 95267	NONE	PC	EDUCATIONAL	4,625
SAINT MARY'S HIGH SCHOOL PO BOX 7247 STOCKTON, CA 95267	NONE	PC	EDUCATIONAL	10,696
SAINT MARY'S HIGH SCHOOL PO BOX 7247 STOCKTON, CA 95267	NONE	PC	EDUCATIONAL	1,000
SALVATION ARMY - LODI CORPS PO BOX 1388 LODI, CA 95240	NONE	PC	CHARITABLE	10,000
SALVATION ARMY - LODI CORPS PO BOX 1388 LODI, CA 95240	NONE	PC	CHARITABLE	10,000
SALVATION ARMY - LODI CORPS PO BOX 1388 LODI, CA 95240	NONE	PC	CHARITABLE	6,250
SALVATION ARMY - LODI CORPS PO BOX 1388 LODI, CA 95240	NONE	PC	CHARITABLE	5,000
SAN JOAQUIN AG-FEST PO BOX 213030 STOCKTON, CA 95213	NONE	PC	CHARITABLE	2,500
SAN JOAQUIN COUNTY HISTORICAL SOCIETY PO BOX 30 LODI, CA 95241	NONE	PC	CHARITABLE	206,985
SAN JOAQUIN COUNTY HISTORICAL SOCIETY PO BOX 30 LODI, CA 95241	NONE	PC	CHARITABLE	2,500
SEEDS TO THE WORLD 301 S AURORA STOCKTON, CA 95203	NONE	PC	CHARITABLE	1,000
SENECA HOSPITAL AUXILIARY PO BOX 160 CHESTER, CA 96020	NONE	PC	CHARITABLE	2,000
SJ COUNTY OFFICE OF EDUCATION FOUNDATION PO BOX 213030 STOCKTON, CA 95213	NONE	PC	CHARITABLE	4,920
Total ▶				996,488
3a				

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SJ COUNTY OFFICE OF EDUCATION FOUNDATION PO BOX 213030 STOCKTON, CA 95213	NONE	PC	CHARITABLE	4,832
SJ COUNTY OFFICE OF EDUCATION FOUNDATION PO BOX 213030 STOCKTON, CA 95213	NONE	PC	CHARITABLE	4,697
SJ COUNTY OFFICE OF EDUCATION FOUNDATION PO BOX 213030 STOCKTON, CA 95213	NONE	PC	CHARITABLE	4,865
SJ COUNTY OFFICE OF EDUCATION FOUNDATION PO BOX 213030 STOCKTON, CA 95213	NONE	PC	CHARITABLE	4,854
SJ COUNTY OFFICE OF EDUCATION FOUNDATION PO BOX 213030 STOCKTON, CA 95213	NONE	PC	CHARITABLE	4,716
SJ COUNTY OFFICE OF EDUCATION FOUNDATION PO BOX 213030 STOCKTON, CA 95213	NONE	PC	CHARITABLE	3,989
ST JOSEPH'S FOUNDATION 1800 N CALIFORNIA STREET STOCKTON, CA 95204	NONE	PC	CHARITABLE	5,000
STOCKTON ART LEAGUE 1902 PACIFIC AVENUE STOCKTON, CA 95204	NONE	PC	CHARITABLE	1,000
STOCKTON BEAUTIFUL 1615 W LINCOLN ROAD STOCKTON, CA 95207	NONE	PC	CHARITABLE	1,000
STOCKTON CIVIC THEATER 2312 ROSEMARIE LANE STOCKTON, CA 95207	NONE	PC	CHARITABLE	7,500
STOCKTON CIVIC THEATER 2312 ROSEMARIE LANE STOCKTON, CA 95207	NONE	PC	CHARITABLE	7,500
STOCKTON CONCERTS IN VICTORY PARK 4609 QUAIL LAKES DR STE 4 STOCKTON, CA 95207	NONE	PC	CHARITABLE	2,500
STOCKTON CRIME STOPPERS 22 E MARKET STREET STOCKTON, CA 95202	NONE	PC	CHARITABLE	5,000
STOCKTON OPERA GUILD PO BOX 4314 STOCKTON, CA 95204	NONE	PC	CHARITABLE	1,000
STOCKTON ROTARY ENDOWMENT PO BOX 7457 STOCKTON, CA 95267	NONE	PC	CHARITABLE	2,000
Total ▶				996,488
3a				

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 any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
STOCKTON SHELTER FOR THE HOMELESS PO BOX 4803 STOCKTON, CA 95204	NONE	PC	CHARITABLE	5,000
STOCKTON SHELTER FOR THE HOMELESS PO BOX 4803 STOCKTON, CA 95204	NONE	PC	CHARITABLE	10,000
SUNFLOWER PRESENTS 6037 N PERSHING AVENUE STOCKTON, CA 95207	NONE	PC	CHARITABLE	1,500
TEEN SUCCESS INC 508 VALLEY WAY MILPITAS, CA 95035	NONE	PC	CHARITABLE	10,000
TEMPLE ISRAEL 5105 N EL DORADO STOCKTON, CA 95207	NONE	PC	CHARITABLE	500
THE DESERT COMMUNITY FOUNDATION 75-105 MERLE ST SUITE 300 PALM DESERT, CA 92211	NONE	PC	CHARITABLE	1,000
THE DOE FUND INC 232 EAST 84TH STREET NEW YORK, NY 10028	NONE	PC	CHARITABLE	5,000
THE LOEL FOUNDATION PO BOX 477 NEW YORK, NY 10163	NONE	PC	CHARITABLE	15,560
THE STOCKTON CHORALE PO BOX 7711 STOCKTON, CA 95267	NONE	PC	CHARITABLE	2,000
TULEBURG PRESS 1007 W VERNAL WAY STOCKTON, CA 95203	NONE	PC	CHARITABLE	1,000
UC DAVIS FOUNDATION ONE SHIELDS AVE DAVIS, CA 95616	NONE	PC	CHARITABLE	5,000
UNIVERSITY OF THE PACIFIC 3601 PACIFIC AVENUE STOCKTON, CA 95211	NONE	PC	CHARITABLE	5,000
USA RUGBY TRUST 74-925 HUMMINGBIRD LANE INDIAN WELLS, CA 97210	NONE	PC	CHARITABLE	1,000
WELCOME HOME HEROES FOUNDATION PO BOX 4331 STOCKTON, CA 95267	NONE	PC	CHARITABLE	5,000
Total ▶				996,488
3a				

TY 2016 Accounting Fees Schedule**Name:** THE CORTOPASSI FAMILY FOUNDATION**EIN:** 68-0232655

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
PROFESSIONAL FEES	16,000	4,000		12,000

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2016 Depreciation Schedule

Name: THE CORTOPASSI FAMILY FOUNDATION

EIN: 68-0232655

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
LAND	2016-05-06	100,101		L		0	0		
LAND IMPROVEMENTS	2016-05-06	412,965		SL	7 000000000000	64,091	0		

TY 2016 Investments Corporate Stock Schedule**Name:** THE CORTOPASSI FAMILY FOUNDATION**EIN:** 68-0232655

Name of Stock	End of Year Book Value	End of Year Fair Market Value
MARKETABLE SECURITIES-MORGAN STANLEY	10,459,012	9,337,100
BIOLOGICS MD	11,373	11,373

**TY 2016 Land, Etc.
Schedule****Name:** THE CORTOPASSI FAMILY FOUNDATION**EIN:** 68-0232655

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
LAND	100,101	0	100,101	100,101
LAND IMPROVEMENTS	412,965	64,091	348,874	348,874

TY 2016 Legal Fees Schedule**Name:** THE CORTOPASSI FAMILY FOUNDATION**EIN:** 68-0232655

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	30,070	0		30,070

TY 2016 Other Assets Schedule**Name:** THE CORTOPASSI FAMILY FOUNDATION**EIN:** 68-0232655**Other Assets Schedule**

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
REMAINDER INTEREST IN RESIDENTIAL REAL ESTATE	1,018,283	1,018,283	1,018,283
REVERSIONARY INTEREST IN RESIDENTIAL REAL ESTATE	91,720	91,720	91,720
GARDEN SCULPTURE	42,690	42,690	42,690

TY 2016 Other Expenses Schedule**Name:** THE CORTOPASSI FAMILY FOUNDATION**EIN:** 68-0232655**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CAPECCHIO OVEST PROGRAM EXPENSES	461,894	0		0
MISCELLANEOUS	9,263	0		0
CAPITAL SERVICE FEE	449,884	0		0
OTHER EXPENSES	10,889	10,889		0

TY 2016 Other Increases Schedule**Name:** THE CORTOPASSI FAMILY FOUNDATION**EIN:** 68-0232655

Description	Amount
DECREASE IN BOARD DESIGNATED FUNDS	404,765

TY 2016 Other Liabilities Schedule**Name:** THE CORTOPASSI FAMILY FOUNDATION**EIN:** 68-0232655

Description	Beginning of Year - Book Value	End of Year - Book Value
INCOME TAXES PAYABLE	231	231

TY 2016 Other Professional Fees Schedule**Name:** THE CORTOPASSI FAMILY FOUNDATION**EIN:** 68-0232655

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
CONSULTANT	84,789	0		84,789
PROFESSIONAL FEES	1,250	1,250		0

TY 2016 Taxes Schedule**Name:** THE CORTOPASSI FAMILY FOUNDATION**EIN:** 68-0232655

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FEDERAL EXCISE TAXES	7,316	0		0
TAXES	4,426	4,426		0

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors
▶ Attach to Form 990, 990-EZ, or 990-PF
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at
www.irs.gov/form990.

OMB No 1545-0047
2016

Name of the organization
THE CORTOPASSI FAMILY FOUNDATION

Employer identification number
68-0232655

Organization type (check 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 foundation

Form 990-PF

- 527 political organization
- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹ 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
- 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
- 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, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling \$5,000 or more during the year ▶ \$ _____

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)

Name of organization
THE CORTOPASSI FAMILY FOUNDATION

Employer identification number
68-0232655

Part I **Contributors** (see instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DEAN AND JOAN CORTOPASSI 11292 N ALPINE ROAD STOCKTON, CA95212	\$ 263,512	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
2	SAN TOMO INC 11292 N ALPINE ROAD STOCKTON, CA95212	\$ 350,000	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
3	BLACKHOLE HABITAT INC 11292 N ALPINE ROAD STOCKTON, CA95212	\$ 513,066	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
4	DEAN AND JOAN CORTOPASSI 11292 N ALPINE ROAD STOCKTON, CA95212	\$ 11,373	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
-		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)

Name of organization THE CORTOPASSI FAMILY FOUNDATION	Employer identification number 68-0232655
---	---

Part II Noncash Property

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(see instructions) Use duplicate copies of Part II if additional space is needed			
2	PROMISSORY NOTE SECURED BY A DEED OF TRUST	\$ 350 000	2016-12-31
3	LAND AND LAND IMPROVEMENTS	\$ 513 066	2016-05-06
4	SECURITIES	\$ 11 373	2016-03-31
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____
	_____	\$ _____	_____

Name of organization THE CORTOPASSI FAMILY FOUNDATION	Employer identification number 68-0232655
---	---

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____