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Form **990-PF** Department of the Treasury Internal Revenue Service EXTENDED TO NOVEMBER 15, 2018
Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation

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

Form **990-PF** (2017)

FOF	calen	dar year 2017 or tax year beginning		, and ending		
Na	ne of	foundation			A Employer identificati	on number
_ <u>K</u>	AM	PE FAMILY FOUNDATION			20-051272	4
		nd street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
_P	.0	BOX 873	<del>-</del>		(970) 623	<u>-4290                                    </u>
		own, state or province, country, and ZIP or foreign p	ostal code		C If exemption application is	pending, check here
		NIA, CO 81428-0873				
G (	heck	aff that apply Initial return	Initial return of a for	mer public charity	D 1. Foreign organizatio	ns, check here
		Final return	Amended return		2 Formon organizations	meeting the 85% test
		Address change	Name change		2 Foreign organizations i check here and attach	computation
H	_	type of organization X Section 501(c)(3) ex		( M &	E If private foundation s	
			Other taxable private foundat		under section 507(b)(	1)(A), check here
		rket value of all assets at end of year   J Account	•	Accrual	F If the foundation is in	
			ther (specify)		under section 507(b)(	1)(B), check here
	- \$	2,934,945. (Part I, colur Analysis of Revenue and Expenses				(4)
P	irt l	(The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net Income	(d) Disbursements for chantable purposes
	1	necessarily equal the amounts in column (a) )	8,000.		N/A	(cash basis only)
-	1 2	Contributions, gifts, grants, etc., received  Check  if the foundation is not required to attach Sch. B	0,000.		IN/ FA	
2018	2	Interest on savings and temporary	73.	73.		STATEMENT 1
	3	cash investments  Dividends and interest from securities	48,731.	48,731.		STATEMENT 2
<b>C</b> *3	52	Gross rents	40,731.	40,731.		DIMINIMI Z
~~	١.	Net rental income or (loss)				
=		Net gain or (loss) from sale of assets not on line 10	96,906.	<del></del>		
§	h	Gross sales price for all 257 772		······		
چ کے	7	assets on line 6a  Capital gain net income (from Part IV, line 2)		96,906.		
7	8	Net short-term capital gain / ~ *				
SCANNED IIII	g	Income modifications /:3/	7/,			
$\circ$	10a	Gross sales less returns and allowances /-/ MAV		······		
S	l -	Less Cost of goods sold	,			
	1	Gross profit or (loss)	,3 /, /	***************************************		
	11	Other income	11.1			
	12	Total. Add lines 1 through 11	153,710.	145,710.		
	13	Compensation of officers, directors, trustees, etc	1,0,000.	1,000.		9,000.
	14	Other employee salaries and wages				
(0	15	Pension plans, employee benefits				
ses	16a	Legal fees				
per	ļ	Accounting fees STMT 3	5,115.	511.		4,604.
ŭ	C	Other professional fees STMT 4	29,305.	29,305.		0.
ŧį	17	Interest	11 272			
itra	18	Taxes STMT 5	11,379.	1,694.		0.
iri	19	Depreciation and depletion	136.	136.		_
퉏	20	Occupancy	2 420	242		2 106
ΨĐ	21	Travel, conferences, and meetings	2,429.	243.		2,186.
a	22	Printing and publications	10.760	1 210		10 550
ti.	23	Other expenses STMT 6	19,768.	1,218.		18,550.
Operating and Administrative Expens	24	Total operating and administrative	78,132.	24 107	1	24 240
ŏ	25	expenses. Add lines 13 through 23	111,900.	34,107.		34,340.
-	25	Contributions, grits, grants paid	111,900.			111,900.
	26	Total expenses and disbursements.	_ 190,032.	34,107.		146 240
	27	Add lines 24 and 25 Subtract line 26 from line 12	130,032.	34,10/.		146,240.
	l .		<36,322.	<b>&gt;</b>		
	1	Excess of revenue over expenses and disbursements  Net investment income (if negative, enter -0-)	130,322.	111,603.		<del></del>
	1	Adjusted net income (if negative, enter -0-)			N/A	

723501 01-03-18 LHA For Paperwork Reduction Act Notice, see instructions.

## 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 2,000,812.
2 Enter amount from Part I, line 27a	2 <36,322.
3 Other increases not included in line 2 (itemize)	3 0.
4 Add lines 1, 2, and 3	4 1,964,490.
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 11, column (	), line 30 6 1,964,490.

Pag**ê 3** 

Part IV   Capital Gains an	d Losses for Tax on In	<u>vestment</u>	Income				
(a) List and describe the	kind(s) of property sold (for examouse, or common stock, 200 sha		е,	(b) How acquir P - Purchase D - Donation	•   <b>'</b> 7	Date acquired mo , day, yr )	(d) Date sold (mo , day, yr )
1a							
b SEE ATTACHED S	STATEMENT						
<u>c</u>							
d							
е		_					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	100	t or other basis epense of sale		((	(h) Gain or (los e) plus (f) minus	
a							<u> </u>
b							
С							
d	<u>.</u> .	1					
e 357,773.	** ** *		260,86	7.			96,906.
Complete only for assets showing (	gain in column (h) and owned by	the foundation	on 12/31/69			ains (Col (h) ga	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col (I) col (J), If any			), but not less th osses (from col	
a							
b							-
С							
d							
e							96,906.
	( If goin, also anto	r in Dort Line."	7	7			•
2 Capital gain net income or (net capit	tal loss) { If gain, also ente If (loss), enter -0	r in Part I, line i	7	) 2			96,906
3 Net short-term capital gain or (loss)	as defined in sections 1222(5) ar	nd (6)					
If gain, also enter in Part I, line 8, co	lumn (c)			<b>     </b>		27./	_
If (loss), enter -0- in Part I, line 8  Part V Qualification Une		- <u>-</u>		<u> </u>		N/.	A
If section 4940(d)(2) applies, leave this Was the foundation liable for the section If "Yes," the foundation doesn't qualify (	n 4942 tax on the distributable an		•	riod?			Yes X No
1 Enter the appropriate amount in each	···			ntries			
(a)	(b)			(c)			(d)
Base periód years Calendar year (or tax year beginning	Advisabad available	stributions	Net value of no		assets		ribútión ratio divided by col. (c))
2016	111)	9,515.		2,441,		(coi (b) (	• 04894
2015		8,463.		2,522,			.050925
2014		30,158.	···	2,478,			.05251
2013		7,377.	<del></del>	2,307,			.05087
2012		8,982.		2,028			.043856
2012	<u>-</u>	70 / 702 • [		270201	, , ,		• • • • • • • • • • • • • • • • • • • •
7 Total of line 1 column (d)							.247117
2 Total of line 1, column (d)		l 0 b. 5 (	\			2	•24/11
3 Average distribution ratio for the 5-y		on line 2 by 5 t	), or by the numb	er of years			.049423
the foundation has been in existence	e ir iess than 5 years				i	3	•04942.
4 Enter the net value of noncharitable	-use assets for 2017 from Part X,	line 5				4	2,713,766
5 Multiply line 4 by line 3						5	134,122
	/40/ -4 Da.A.) has 07! \						1 114
6 Enter 1% of net investment income	(1% 01 Part I, IINE 2/D)				•	6	_1,116
7 Add lines 5 and 6		-	٠			7	135,238
8 Enter qualifying distributions from F	Part XII, line 4					8	146,240
If line 8 is equal to or greater than li See the Part VI instructions	ne 7, check the box in Part VI, line	e 1b, and comp	lete that part usir	ig a 1% tax rate	١		

8a Enter the states to which the foundation reports or with which it is registered. See instructions

year 2017 or the tax year beginning in 2017? See the instructions for Part XIV If "Yes," complete Part XIV

of each state as required by General Instruction G? If "No," attach explanation

b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses

9 is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

Form **990-PF** (2017)

X

p,	art VII-A Statements Regarding Activities (continued)			, ago c
	The state of the s	T	Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of	<u> </u>	res	NO
•••	section 512(b)(13)? If "Yes," attach schedule. See instructions	,,		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges?	11		Α.
'-	If "Yes," attach statement. See instructions	40		x
12	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	12	X	
13	Website address  WWW.KAMPEFOUNDATION.ORG	13	Λ	<u> </u>
14		623	12	۵0
17	The books are in care of $\blacktriangleright$ ANASTACIA GALL Telephone no $\blacktriangleright$ (970) Located at $\blacktriangleright$ P.O. BOX 873, PAONIA, CO			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here	1420	<u>-00</u>	/ <u>3</u>
		NT.	/A	· 🗀
16	and enter the amount of tax-exempt interest received or accrued during the year  At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,			NI.
	securities, or other financial account in a foreign country?		Yes	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	16		<u> </u>
	foreign country			
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			ł
* *	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	7	V	N.
12	During the year, did the foundation (either directly or indirectly)		Yes	NO
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  (4) Payanasanasanasanasanasanasanasanasanasan			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  [X] Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	if the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days )			
þ	If any answer is "Yes" to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		X
	Organizations relying on a current notice regarding disaster assistance, check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2017?	10		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2017?			
	If "Yes," list the years $\blacktriangleright$ ,,,,,,			
þ	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions ) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here			
	<b>&gt;</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	If "Yes," did it have excess business holdings in 2017 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,			
	Form 4720, to determine if the foundation had excess business holdings in 2017 ) N/A	3ь	1	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2017?	4b		Х

Form 990-PF (2017) KAMPE FAMILY FOUNDATION			<u>20-05127</u>	24	P	age <b>6</b>
Part VII B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (continu	ued)	•		·····
5a During the year, did the foundation pay or incur any amount to				Y	'es	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			s 🗓 No 🤚			
(2) Influence the outcome of any specific public election (see section 4955), o	or to carry on, directly or indire					
any voter registration drive?			s X No			
(3) Provide a grant to an individual for travel, study, or other similar purposes		Ye	s X No			
(4) Provide a grant to an organization other than a charitable, etc., organizatio			- 1			
4945(d)(4)(A)? See instructions		Ye	s X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f					
the prevention of cruelty to children or animals?		Ye	s X No		- 1	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i	n Regulations				
section 53 4945 or in a current notice regarding disaster assistance? See instr	uctions		N/A	5b		
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 f		. —				
expenditure responsibility for the grant?	. N	/A L Ye	s L 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?		Ye	s X No		1	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?	•	-	6b		X
If "Yes" to 6b, file Form 8870			- F			
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Ye	s X No		1	
b if "Yes," did the foundation receive any proceeds or have any net income attrib		***	N/A	7b		
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Highly	<i>'</i>			
1 List all officers, directors, trustees, and foundation managers and t	heir compensation.					
	(b) Title, and average	(c) Compensation	(d) Contributions to	(e)	) Expe	ense other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	acc	ount, Iowan	other ices
ANASTACIA KAMPE	PRESIDENT		)	T		
P.O. BOX 873	1					
PAONIA, CO 81428-0873	10.00	10,000.	0.			0.
DIANE KAMPE	SECRETARY					
P.O. BOX 3453	= !' 					
HALF MOON BAY, CA 94019-3453	5.00	0.	0.			0.
AMANDA LUJAN	TREASURER					
P.O. BOX 3453						
HALF MOON BAY, CA 94019-3453	5.00	0.	0.			0.
GEORGE KAMPE	TRUSTEE					
P.O. BOX 98	]					
VERDI, NV 89439-0098	5.00	0.	0.			0.
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1). If none,	enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred	acc		other
	devoted to position	ļ · · · · · · · · · · · · · · · · · · ·	compensation	al	llowan	ices_
NONE	4					
		<del></del>	ļ	<del>↓</del> —		
	4					
		<del> </del>		├		
	4					
	<del> </del>	<del> </del>		-		
	4					
	<del> </del>	<u> </u>	<del></del>	+-		
	+					
Total number of other employees paid over \$50,000		<u> </u>		<u> </u>		0

Form **990-PF** (2017)

P	Minimum Investment Return (All domestic foundations	must complete this	part. Foreign four	ndations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charita	ble, etc , purposes.			
а	Average monthly fair market value of securities			1a	2,487,662. 267,241.
b	Average of monthly cash balances			1b	267,241.
C	Fair market value of all other assets			1c	189.
đ	Total (add lines 1a, b, and c)			1d	2,755,092.
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	2,755,092.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amou	nt, see instructions)		4	41,326.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and	on Part V, line 4		5	2,713,766.
6	Minimum investment return. Enter 5% of line 5			6	135,688.
P	art XI Distributable Amount (see instructions) (Section 4942(I)(3) foreign organizations, check here ► and do not complete this pa		ating foundations ar	nd certain	
1	Minimum investment return from Part X, line 6			1	135,688.
2a	Tax on investment income for 2017 from Part VI, line 5	2a	1,116.		<del>-</del>
b	Income tax for 2017 (This does not include the tax from Part VI)	2b			
C	Add lines 2a and 2b			2c	1,116. 134,572.
3	Distributable amount before adjustments Subtract line 2c from line 1			3	134,572.
4	Recoveries of amounts treated as qualifying distributions			4	0.
5	Add lines 3 and 4			5	134,572.
6	Deduction from distributable amount (see instructions)			6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Pa	art XIII, line 1		7	134,572.
P	art XII Qualifying Distributions (see Instructions)				
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., p	urposes			146 240
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26		•	1a	146,240.
b	Program-related investments - total from Part IX-B			1b	<u></u>
2	Amounts paid to acquire assets used (or held for use) directly in carrying out char	table, etc., purposes		2	
3	Amounts set aside for specific charitable projects that satisfy the				
а	Suitability test (prior IRS approval required)	-		3a	
b	Cash distribution test (attach the required schedule)			3b	146,240.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8			4	140,240.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net in	ivestment			1 116
_	income Enter 1% of Part I, line 27b			5	1,116. 145,124.
6	Adjusted qualifying distributions. Subtract line 5 from line 4			6	
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent year	s when calculating whe	tner the toundation	quaimes for	the section
	4940(e) reduction of tax in those years				

Form **990-PF** (2017)

# Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI,				
line 7				134,572.
2 Undistributed income, if any, as of the end of 2017	··············		***************************************	1
a Enter amount for 2016 only			0.	
<b>b</b> Total for prior years	***************************************		10 10 10 10 10 10 10 10 10 10 10 10 10 1	**************************************
		0.		
3 Excess distributions carryover, if any, to 2017			··· , <del>                                 </del>	
a From 2012	1			
b From 2013				
c From 2014 8, 365.				
d From 2015 4,522.				
e From 2016 3, 347.				
f Total of lines 3a through e	16,234.			
4 Qualifying distributions for 2017 from	20,201.	·····		
Part XII, line 4 ▶\$ 146, 240.				
a Applied to 2016, but not more than line 2a			0.	
b Applied to undistributed income of prior	-11			
		0.		
years (Election required - see instructions)	** '			
c Treated as distributions out of corpus	0.			
(Election required - see instructions)	· · ·	- •		124 572
d Applied to 2017 distributable amount	11 660			134,572.
e Remaining amount distributed out of corpus	11,668.			
5 Excess distributions carryover applied to 2017 (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:		and the second		
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	27,902.			
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 2016 Subtract line				·····
4a from line 2a Taxable amount - see instr	1		0.	
f Undistributed income for 2017 Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2018				0.
7 Amounts treated as distributions out of		1		
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	ł			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	0.			
I I	- 0.			
9 Excess distributions carryover to 2018 Subtract lines 7 and 9 from line 69	27 002			
Subtract lines 7 and 8 from line 6a	27,902.			
O Analysis of line 9				
a Excess from 2013				
b Excess from 2014 8, 365.	1			
t Excess from 2015 4,522.				
d Excess from 2016 3, 347.				
e Excess from 2017 11,668.				

Form 990-PF (2017) KAMPE F	AMILY FOUND	ATION		20-05	12724 Pägé 10
Part XIV Private Operating F	oundations (see ins	structions and Part VII-	A, question 9)	N/A	<del></del>
1 a If the foundation has received a ruling o	r determination letter that	it is a private operating			
foundation, and the ruling is effective fo	r 2017, enter the date of t	the ruling	<b>&gt;</b>		<u> </u>
b Check box to indicate whether the found	lation is a private operatir	ng foundation described in	n section	4942(j)(3) or 49	42(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(e) Total
investment return from Part X for					
each year listed	_				
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				1	
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			<i>'</i>		
a "Assets" alternative test - enter			,		
(1) Value of all assets			<i>'</i>		
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" afternative test - enter		1			
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter		j/			
(1) Total support other than gross		\	Į		
investment income (interest,					
dividends, rents, payments on securities loans (section		/			
512(a)(5)), or royalties)	/	1			
(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			if the foundation	n had \$5,000 or mo	ore in assets
at any time during t		ructions.)	<del></del>		
1 Information Regarding Foundation	_				
a List any managers of the foundation wh year (but only if they have contributed it			ributions received by th	e foundation before the clos	se of any tax
	note than \$5,000) (See s	Section 507 (0)(2) )			
DIANE KAMPE					<del></del>
b List any managers of the foundation whether entity) of which the foundation has			or an equally large por	tion of the ownership of a p	artnership or
NONE	-				
2 Information Regarding Contribut	ion, Grant, Gift, Loan	. Scholarship, etc., Pr	ograms:		<del></del>
. —		• • • •	_	not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc					
a The name, address, and telephone num	nber or email address of t	he person to whom applic	ations should be addre	ssed SEE STA	TEMENT 13
SEE STATEMENT 12					
<b>b</b> The form in which applications should	be submitted and informa	ition and materials they sh	rould include:	···	<del></del> -
c Any submission deadlines		<del>-</del>	·		
d Any restrictions or limitations on award	e such as hu decarachio	al areas charitable fields	kinds of institutions of	r other factors	<u> </u>
a rany restrictions of fillitations of award	o, such as by geographic	ai areas, enantable licius,	minus or maniturions, th	1 00101 1001013	

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Purpose of grant or Amount status of contribution any foundation manager Name and address (home or business) recipient or substantial contributor a Paid during the year PUBLIC CHARITY OPERATING SUPPORT ABUNDANT GRACE COASTSIDE WORKER N/A 160 KELLY AVENUE HALF MOON BAY, CA 94019 4,000. ALLIANCE DEFENDING FREEDOM N/A PUBLIC CHARITY OPERATING SUPPORT 15100 N. 90TH STREET SCOTTSDALE, AZ 85260 500. PUBLIC CHARITY OPERATING SUPPORT AMERICAN BIBLE SOCIETY N/A 1865 BROADWAY NEW YORK, NY 10023 500. AMERICAN CENTER FOR LAW & JUSTICE N/A PUBLIC CHARITY OPERATING SUPPORT 1333 REGENT UNIV DRIVE, SUITE 101 VIRGINIA BEACH, VA 23464 500. AMERICAN LATVIAN ASSOCIATION N/A PUBLIC CHARITY OPERATING SUPPORT 400 HURLEY AVENUE ROCKVILLE, MD 20850 500. SEE CONTINUATION SHEET(S) ➤ 3a 111,900. b Approved for future payment NONE Total **▶** 3b 0.

Page 11

Part XVI-A Analysis of Income-Prod			T Evening as			
nter gross amounts unless otherwise indicated	Unrelated business income  (a) (b) Business		(C) Exclu- sion	(d)	(e) Related or exemp	
Program service revenue	code	Amount	code	Amount	function income	
a	_		<u> </u>			
b	-	<del></del>	+ +			
<u> </u>	-					
d e	l i					
e	-					
g Fees and contracts from government agencies			<del>                                     </del>			
Membership dues and assessments						
Interest on savings and temporary cash						
investments			14	73.		
Dividends and interest from securities			14	48,731.		
Net rental income or (loss) from real estate						
a Debt-financed property .			_  _			
b Not debt-financed property			+-+			
Net rental income or (loss) from personal						
property Other investment in a series						
Other investment income Gain or (loss) from sales of assets other		<del></del>	<del></del>	<del>-</del>	<del></del>	
than inventory			18	96,906.		
Net income or (loss) from special events			<del>-   -   -</del>	30/3001		
Gross profit or (loss) from sales of inventory		<del></del>			<del></del>	
Other revenue						
a	_				_	
b						
C	_	<del></del>				
d						
e			<del></del>	145 710		
Subtotal Add columns (b), (d), and (e)	<u> </u>		).	145,710.	4 4 5 5 4	
Total. Add line 12, columns (b), (d), and (e) se worksheet in line 13 instructions to verify calculations				13	143,71	
		<del> </del>		<del></del> _	<del></del>	
art XVI-B Relationship of Activities	s to the Acco	mplishment of	Exempt P	urposes		
ne No. Explain below how each activity for which in				d importantly to the accomp	olishment of	
the foundation's exempt purposes (other the	an by providing fun	ds for such purposes)				
	*	·				
				<del></del>		
			······			
			<del></del>			
					·	
					<del></del>	

Part XVII	Information Re Exempt Organi		sfers to a	nd Transactions a	and Relations	hips With Non	charitable	-	
1 Did the org			of the following	g with any other organizati	ion described in sect	tion 501(c)		Yes	No
				to political organizations?					
a Transfers from the reporting foundation to a noncharitable exempt organization of									
(1) Cash	•		•				1a(1)		X
(2) Other	(2) Other assets								
b Other trans									.,
	of assets to a noncharitat	-		•			1b(1)		X
• •	ases of assets from a nor	•	rganization				1b(2)		X
	of facilities, equipment, o	or other assets			•	•	1b(3) 1b(4)		X
(4) Reimbursement arrangements (5) Loans or loan guarantees									X
	mance of services or mei	mharshin or fundras	nitetinilas nais	ne	•		1b(5) 1b(6)		X
	facilities, equipment, mai	-	-		•		10		X
-				dule Column (b) should a	lways show the fair i	market value of the o		ets	L
or services		oundation If the four	ndation receive	ed less than fair market val				,	
	(b) Amount involved			exempt organization	(d) Descriptio	n of transfers, transactio	ns, and shanno ar	rangeme	ents
14) 2	(b) randone involved	(0) 1121113 01	N/A	Oxonipe organization	(u) Descriptio	n or tarislers, tarisactio	ns, and sharing a	ranger re	
						<del></del>			
				·			<del></del>		_
							<del>.</del>		
			_						
		L							
				···		<del> </del>			
				·					
		L							
	idation directly or indirect 501(c) (other than section	-		or more tax-exempt organ	nizations described		Yes	¥	] No
	mplete the following sch		CHOH 3217		•		162	<u> </u>	טווו נ.
<u>u</u> 11 163, 66	(a) Name of org			(b) Type of organization	T	(c) Description of re	lationship		
	N/A			(b) Type or organization	<del> </del>	(e) Becompaction of to			
			<del></del>		<del> </del>				
					<del>                                     </del>	· · · · · · · · · · · · · · · · · · ·			
					<b>†</b>	·			
						<del></del>			
				g accompanying schedules an			May the IRS	discuse	this
Sign   L	ellef, it is true, oprrect, and con	nplete Declaration of pr	reparer (other thai	n taxpayer) is based on all info	rmation of which prepare	er has any knowledge	return with the	e prepai	rer
Here	$\sim$	Va		5/15/18	PRESI	DENT	X Yes		No
Sign	ature of officer or trustee			Date	Trtle		<u> </u>		
	Print/Type preparer's na	ıme	Preparer's s	gnature	Date	Check ff	PTIN		
						self- employed			
Paid				HILMAS CPA	05/14/18		P00075		
Preparer	Firm's name ► HIL	MAS & ASS	OCIATE	S, LLC		Firm's EIN ► 8	4-15659	22	
Use Only									
				SUITE D110			-		
	LO	UISVILLE,	CO 80	027-2329		Phone no (3	03) 604	-21	91
							Form 99	0-PF	(2017

### Schedule B (Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

### **Schedule of Contributors**

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

OMB No 1545-0047

2017

Name of the organization **Employer identification number** KAMPE FAMILY FOUNDATION 20-0512724 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 527 political organization Form 990-PF 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** X 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 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 33 1/3% 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. Don't 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 isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF),

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2017)

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 990-PF, Part I, line 2, to

certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Employer identification number

### KAMPE FAMILY FOUNDATION

20-0512724

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	DIANE KAMPE  P.O. BOX 3453  HALF MOON BAY, CA 94019-3453	\$\$	Person  Payroll  Noncash  (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		<b>\$</b>	Person Payroll Ocomplete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for

Employer identification number

# KAMPE FAMILY FOUNDATION

20-0512724

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.						
(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			
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received			
		  \$				

Employer identification number

	FAMILY FOUNDATION			20-0512724
rt III	Exclusively religious, charitable, etc., contr the year from any one contributor. Complete of completing Part III, enter the total of exclusively religious	olumns (a) through (e) and the follow	wing line entry For organization	ns _
	Use duplicate copies of Part III if additiona			
No. rom art I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
-				
	Transferee's name, address, an	(e) Transfer of gif		Insferor to transferee
	Transferot 5 Name, address, un		Weldtonsing of tra	insieror to transferee
a) No.			<u> </u>	
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
-	,	(e) Transfer of gif	t	
-	Transferee's name, address, an	d ZIP + 4	Relationship of tra	insferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
	<u>-</u>	(e) Transfer of gif	t	
	Transferee's name, address, an	d ZIP + 4	Relationship of tra	nsferor to transferee
a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held
-		(e) Transfer of gif	t	
	Transferee's name, address, an	d ZIP + 4	Relationship of tra	insferor to transferee
			· · · · · · · · · · · · · · · · · · ·	
}				

Part IV | Capital Gains and Losses for Tax on Investment Income (b) How acquired (c) Date acquired (a) List and describe the kind(s) of property sold, e.g., real estate, (d) Date sold P - Purchase D - Donation 2-story brick warehouse, or common stock, 200 shs MLC Co (mo, day, yr) (mo, day, yr) 70 SHS ACCENTURE PLC 02/23/12|03/22/17 05/09/1605/17/17 BIOVERATIV INC P 50 SHS <sub>c</sub> 870 FMC TECHNOLOGIES P 11/03/1501/17/17 SHS INC d 100 SHS GENERAL MILLS INC P 02/23/1203/22/17 e 290 NXP SEMICONDUCTORS P 06/16/15|03/22/ SHS f 160 NXP SEMICONDUCTORS NV P 11/11/1503/22/17 SHS 09/06/1305/17/17 g 280 P SHS PRAXAIR INC h 250 THERMO FISHER SCIENTIFIC Ρ 02/09/1605/17/17 SHS 05/27/1405/17/17 , 550 SHS TIME WARNER INC P 1880 03/03/1503/22/17 SHS US BANCORP P 07/12/0703/22/17 k 225 SHS ACCENTURE PLC P 160 SHS ACCENTURE PLC P 06/05/08/03/22/17 01/22/1003/22/17 m 570 SHS P GENERAL MILLS INC n CAPITAL GAINS DIVIDENDS 0 (f) Depreciation allowed (g) Cost or other basis (h) Gain or (loss) (e) Gross sales price plus expense of sale (or allowable) (e) plus (f) minus (g) 8,836. 4,143. 4,693. a 2,664. 2,110. 554. b 30,911. 30,775 136. С 3,875. 2,022. 5,897. đ 29,793. 29,673. 120. е 16,438. 13,034. 3,404. f 33,238. 3,246. 36,484. g  $12, \overline{172}$ . 43,064 30,892. h 53,455. 37,456. 15,999. 1 46,384. 39,288. 7,096. 9,488. 18,915. 28,403. k 6,547. 20,197. 13,650. 33,612. 20,348. 13,264. m 1,635. 1,635. n 0 Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (I) Losses (from col (h)) Gains (excess of col (h) gain over col (k), (j) Adjusted basis (k) Excess of col (i) (i) FMV as of 12/31/69 but not less than "-0-") as of 12/31/69 over col (j), if any 4,693. 554. b 136. C 2,022. d 120. е 3,404.f 3,246. g 12,172. h 15,999. 7,096. 18,915. 13,650. 13,264. <u>m</u> 1,635. n 0 If gain, also enter in Part I, line 7 96,906. 2 Capital gain net income or (net capital loss) If (loss), enter "-0-" in Part I, line 7 2 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) If (loss), enter "-0-" in Part I, line 8 N/A

**Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual. Recipient **Foundation** Purpose of grant or show any relationship to Amount any foundation manager or substantial contributor status of contribution Name and address (home or business) recipient AVON 39 WALK TO END BREAST CANCER N/A PUBLIC CHARITY OPERATING SUPPORT 601 MIDLAND AVENUE RYE NY 10580 1,000. BILLY GRAHAM EVANGELISTIC ASSOCIATION PUBLIC CHARITY OPERATING SUPPORT 1 BILLY GRAHAM PARKWAY CHARLOTTE NC 28201 1,000. BLUE SAGE CENTER FOR THE ARTS N/A PUBLIC CHARITY PROGRAM SUPPORT -223 GRAND AVENUE "PAINT PAONIA" ART PAONIA, CO 81428 CONTEST 600. BOYS AND GIRLS CLUB OF THE COASTSIDE N/A PUBLIC CHARITY OPERATING SUPPORT P.O. BOX 545 HALF MOON BAY, CA 94019 2,000. CALIFORNIA ASSOCIATION OF PRIVATE N/A PUBLIC CHARITY OPERATING SUPPORT SCHOOL ORGANIZATIONS 638 CAMINO DE LOS MARES, STE 103-121 SAN CLEMENTE, CA 92673 200. N/A CENTER FOR MUSIC FOR PROPILE WITH PUBLIC CHARITY OPERATING SUPPORT DISABILITIES 415 W. CENTRAL AVENUE 3,000. MISSOULA, MT 59801 CHAS-ARMSTRONG SCHOOL FOR DYSLEXIA N/A PUBLIC CHARITY OPERATING SUPPORT 1405 SALONO DRIVE BELMONT, CA 94002 5,000. PUBLIC CHARITY OPERATING SUPPORT COASTAL REPERTORY THEATRE N/A 1167 MAIN STREET HALF MOON BAY, CA 94019 3,000. COASTSIDE ADULT DAY HEALTH CENTER N/A PUBLIC CHARITY OPERATING SUPPORT 645 CORREAS STREET 700. HALF MOON BAY, CA 94019 COASTSIDE CHILDRENS PROGRAMS N/A PUBLIC CHARITY OPERATING SUPPORT 1590 SOUTH CABRILLO HIGHWAY 200. HALF MOON BAY, CA 94019 Total from continuation sheets 105,900.

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
any foundation manager or substantial contributor	status of recipient		Amount
	Ì		
N/A	PUBLIC CHARITY		
		OPERATING SUPPORT	
			3,000
N/A	PUBLIC CHARITY	OPERATING SUPPORT	
			500
N/A	INDIVIDUAL	EMERGENCY HARDSHIP GRANT	
			250
N/A	PUBLIC CHARITY		
		FOR KIDS PROGRAM; TEACHER CLASSROOM	
		EXPENSES	15,000
N/A	PURLIC CHARTTY	OPERATING SUPPORT	
			500
N/A	PUBLIC CHARITY	OPERATING SUPPORT	
			E00
			500
N/A	PUBLIC CHARITY	OPERATING SUPPORT	
			1,500
N/A	PUBLIC CHARITY	· .	
		SCHOLARSHIP FUND	1,000
N/A	PUBLIC CHARITY	OPERATING SUPPORT	
	-		3,000
N/A	PUBLIC CHARITY	OPERATING SUPPORT	
			5,000
	N/A N/A N/A N/A	N/A PUBLIC CHARITY  N/A PUBLIC CHARITY	N/A  PUBLIC CHARITY OPERATING SUPPORT  INDIVIDUAL  EMERGENCY HARDSHIP GRANT  N/A  PUBLIC CHARITY PROGRAM SUPPORT - SKIS FOR KIDS PROGRAM; TEACHER CLASSROOM EXPENSES  N/A  PUBLIC CHARITY OPERATING SUPPORT  N/A  PUBLIC CHARITY OPERATING SUPPORT

Part XV Supplementary Informati	on			
3 Grants and Contributions Paid During th	e Year (Continuation)			
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
KVNF PUBLIC RADIO	N/A	PUBLIC CHARITY	PROGRAM SUPPORT -	
P.O. BOX 1350			YOUTH RADIO PROGRAM	
PAONIA, CO 81428			DEVELOPMENT	4,500.
LUTHERAN CHURCH MISSOURI SYNOD	N/A	PUBLIC CHARITY	OPERATING SUPPORT	
P.O. BOX 66861				
ST. LOUIS, MO 63166				3,000.
MARBLE CHARTER SCHOOL	N/A	PUBLIC CHARITY	PROGRAM SUPPORT - FARM	
420 W. MAIN STREET			FIELD TRIP PROGRAM	
CARBONDALE, CO 81623			DEVELOPMENT	1,500.
MERCY HOME FOR BOYS AND GIRLS	N/A	PUBLIC CHARITY	OPERATING SUPPORT	
1140 W. JACKSON BLVD CHICAGO, IL 60607				E00
entendo, il ovoo,				500.
MOUNTAIN HARVEST FESTIVAL	N/A	PUBLIC CHARITY	PROGRAM SUPPORT - KIDS	
P.O. BOX 1771			AREA ACTIVITIES AND	
PAONIA, CO 81428		.,	SUPPLIES	750.
NATIONAL PARKS CONSERVATION	N/A	PUBLIC CHARITY	OPERATING SUPPORT	
ASSOCIATION				
777 6TH STREET NW, SUITE 700				
WASHINGTON, DC 20001		-		500.
NORTH FORK COMMUNITY MONTESSORI	N/A	PUBLIC CHARITY	OPERATING SUPPORT	
SCHOOL				
397 BULLDOG WAY HOTCHKISS, CO 81428				1 000
notematos, co vitas				1,000.
PAONIA ELEMENTARY SCHOOL	N/A	DUDI TO CUADIMY	PROGRAM SUPPORT -	
430 BOX ELDER STREET	N/A	PUBLIC CHARITI	NORTH FORK SCHOOL OF	
PAONIA, CO 81428			INTEGRATED STUDIES	3,500.
PENINSULA HUMANE SOCIETY	N/A	PUBLIC CHARITY	OPERATING SUPPORT	
1450 ROLLINS ROAD				
BURLINGAME, CA 94010				500.
POLARIS PROJECT	N/A	PUBLIC CHARITY	OPERATING SUPPORT	
P.O. BOX 65323 WASHINGTON, DC 20035				500.
Total from continuation sheets	<del></del>	<u></u>	<b>'</b>	

### KAMPE FAMILY FOUNDATION

Supplementary Information **Grants and Contributions Paid During the Year (Continuation)** If recipient is an individual. Recipient show any relationship to any foundation manager Foundation Purpose of grant or Amount status of contribution Name and address (home or business) or substantial contributor recipient QUILLISASCUT FARM SCHOOL N/A PUBLIC CHARITY PROGRAM SUPPORT -2409 PLEASENT VALLEY ROAD DELTA COUNTY TEACHER RICE, WA 99167 SCHOLARSHIPS IN FARM 700. BASED EDUCATION SAMARITAN'S PURSE N/A PUBLIC CHARITY OPERATING SUPPORT P.O. BOX 3000 BOONE, NC 28607 1,000. SAN FRANCISCO AID FOR ANIMALS N/A PUBLIC CHARITY OPERATING SUPPORT P.O. BOX 320365 500. SAN FRANCISCO, CA 94132 SEA CREST SCHOOL N/A PUBLIC CHARITY OPERATING SUPPORT 901 ARNOLD WAY 4,500. HALF MOON BAY, CA 94019 SENIOR COASTSIDERS N/A PUBLIC CHARITY OPERATING SUPPORT 925 MAIN STREET 200. HALF MOON BAY, CA 94019 SHRINERS HOSPITALS FOR CHILDREN N/A PUBLIC CHARITY OPERATING SUPPORT P.O. BOX 31356 TAMPA, FL 33631 800. PUBLIC CHARITY OPERATING SUPPORT SMILE TRAIN N/A 41 MADISON AVENUE, 28TH FLOOR NEW YORK, NY 10010 500. THE LEARNING COUNCIL N/A PUBLIC CHARITY OPERATING SUPPORT; 1207 2490 LAVNE PROGRAM SUPPORT - FOOD HOTCHRISS, CO 81419 AND AGRICULTURAL ALLIANCE; SENIOR LUNCH PROGRAM DEVELOPMENT 8,000. THE SALVATION ARMY PUBLIC CHARITY OPERATING SUPPORT N/A P.O. BOX 1428 4,000. ALEXANDRIA, VA 22313 PUBLIC CHARITY OPERATING SUPPORT THE SPRINGS LUTHERAN CHURCH N/A 470 ROCKWELL BOULEVARD SPARKS, NV 89441 1,500. Total from continuation sheets

Part XV Supplementary Information 3 Grants and Contributions Paid During the Y				• • • • • • • • • • • • • • • • • • • •
3 Grants and Contributions Paid During the Y	If recipient is an individual,			<u> </u>
Name and address (home or business)	show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
****				
DEPARTMENT WS, P.O. BOX 96860	N/A	PUBLIC CHARITY	OPERATING SUPPORT	
WASHINGTON, DC 20090-6860				3,500.
VALLEY ORGANIC GROWERS ASSOCIATION	N/A	PUBLIC CHARITY	OPERATING SUPPORT	
P.O. BOX 210				
HOTCHRISS, CO 81428				1,500.
VICKIE AND MANUEL MELLO	N/A	INDIVIDUAL	EMERGENCY HARDSHIP	
353 MYRTLE STREET, #363 HALF MOON BAY, CA 94019			GRANT	3,000.
VIDA VERDE NATURE EDUCATION	N/A	DIDITIC CUADITY	PROGRAM SUPPORT -	
3540 LA HONDA ROAD	N/A	robbie chariii	ENVIRONMENTAL	
SAN GREGORIO, CA 94074			EDUCATION	2,500.
VIVA LA VIDA FOUNDATION	N/A	PUBLIC CHARITY	PROGRAM SUPPORT - FARM	
P.O. BOX 403			AND GARDEN RESEARCH	
PAONIA, CO 81428			FIELD TRIALS	2,500.
WESTERN SLOPE CONSERVATION CENTER P.O. BOX 1612	N/A	PUBLIC CHARITY	PROGRAM SUPPORT - EDUCATIONAL FIELD DAY	
PAONIA, CO 81428			ON THE GUNNISON RIVER	1,500.
WISCONSIN EVANGELICAL LUTHERAN SYNOD	N/A	PUBLIC CHARITY	OPERATING SUPPORT	
2323 N. MAYFAIR ROAD, SUITE 400		•		
WAUWATOSA, WI 53226		<u> </u>		3,000.
WISCONSIN LUTHERAN SEMINARY 11831 SEMINARY DRIVE	N/A	PUBLIC CHARITY	OPERATING SUPPORT	
MEQUON, WI 53092				3,000.
YOUNG AMERICAN FOUNDATION	N/A	PUBLIC CHARTTY	OPERATING SUPPORT	
1638 GEORGETOWN DRIVE				
CAROL STREAM, IL 60188				500.
Total from continuation sheets			L	

KAMPE FAMILY FOUNDATION	20-0512724
Part XV Supplementary Information	<u> </u>
Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution	
AME OF RECIPIENT - THE LEARNING COUNCIL	
2.0 of Madfillon Ind Balantino occupie	
PERATING SUPPORT; PROGRAM SUPPORT - FOOD AND AGRICULTURA	I ALLIANCE.
	L ALLIANCE;
ENIOR LUNCH PROGRAM DEVELOPMENT	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·

723655 04-01-17

FORM 990-PF INTERES	ST ON SAVI	NGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT 1
SOURCE		(A) REVEI PER BO	NUE NET	(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
MORGAN STANLEY MORGAN STANLEY			62. 11.	62. 11.	
TOTAL TO PART I, LIN	NE 3		73.	73.	
FORM 990-PF	DIVIDEND	S AND INTER	EST FROM SE	CURITIES	STATEMENT 2
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDENDS	REVENU		
MORGAN STANLEY	50,366	. 1,63	5. 48,7	31. 48,73	31.
TO PART I, LINE 4	50,366	1,63	48,7	31. 48,73	31.
FORM 990-PF		ACCOUNTI	NG FEES		STATEMENT 3
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
ACCOUNTING FEES		5,115.	51	1.	4,604.
TO FORM 990-PF, PG	1, LN 16B =	5,115.	51	1.	4,604.
FORM 990-PF	0	THER PROFES	SIONAL FEES	<del></del>	STATEMENT 4
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST MENT INCOM		
INVESTMENT MANAGEMEN	NT FEES	29,305.	29,30	05.	0.
TO FORM 990-PF, PG	1, LN 16C	29,305.	29,30	05.	0.

FORM 990-PF	TAX	ES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAXES PAID	1,694.	1,694.		0.
2016 FORM 990-PF BALANCE DUE	3,725.	0.		0.
2017 FORM 990-PF TAX DEPOSITS	5,960.	0.		0.
TO FORM 990-PF, PG 1, LN 18	11,379.	1,694.		0.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
ADVERTISING	7,500.	750.	<u> </u>	6,750.
DUES AND MEMBERSHIPS INSURANCE - D&O LIABILITY	750. 2,128.			675. 1,915.
INTERNET AND WEBSITE	553.			498.
OFFICE EXPENSE	812.			731.
POSTAGE AND SHIPPING PROGRAM EXPENSES	18. 7,587.			16. 7,587.
LICENSES AND FEES	420.			378.
TO FORM 990-PF, PG 1, LN 23	19,768.	1,218.		18,550.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 7
DESCRIPTION		во	OK VALUE	FAIR MARKET VALUE
715 SHS APPLE INC 235 SHS COSTCO WHOLESALE C 600 SHS DANAHER CORPORATIO 6,283 SHS ISHARES MSCI EAFE 150 SHS ISHARES RUSSELL MI 1,220 SHS ISHARES S&P MIDCAP 885 SHS JPMORGAN CHASE & C 1,210 SHS MICROSOFT CORP 465 SHS PNC FINANCIAL SERV 430 SHS PRUDENTIAL FINANCI	N ETF DCAP ETF 400 INDEX F O ICES GROUP	PUND	53,220. 16,341. 15,664. 379,704. 11,505. 81,193. 36,257. 32,813. 19,560. 23,557.	120,999. 43,738. 55,692. 441,758. 31,220. 231,532. 94,642. 103,503. 67,095. 49,441.

			20-0512724
400 SHS STRYKER CORP		22,607.	61,936.
510 SHS WALT DISNEY CO HLDG CO		17,665.	54,830.
4,872 SHS DOMINI IMPACT INTL EQUITY	z rimo	46,614.	43,507
9,193 SHS MATTHEWS PACIFIC TIGER FU		219,845.	291,052
	UND		
540 SHS COLGATE PALMOLIVE CO		25,160.	40,743.
585 SHS MEDTRONIC PLC		44,698.	47,239
110 SHS BLACKROCK INC		28,737.	56,508.
410 SHS EOG RESOURCES INC		28,746.	44,243.
6,462 SHS VANGUARD FTSE EMERGING MI	KTS FUND	260,742.	296,670.
340 SHS GILEAD SCIENCES INC		34,214.	24,358.
580 SHS VISA INC		37,410.	66,132.
90 SHS ALPHABET INC		44,885.	94,806.
1,080 SHS CITIZENS FINANCIAL GROUP	INC	28,359.	45,338.
790 SHS NEWELL BRANDS INC		32,224.	24,411.
780 SHS VERIZON COMMUNICATIONS IN	NC	38,061.	41,285
104 SHS AMAZON.COM INC		76,449.	121,625
100 SHS BIOGEN INC			
	anc.	25,080.	31,857
890 SHS DISCOVER FINANCIAL SERVICE	LES	50,023.	68,459
300 SHS FORTIVE CORP	_	4,873.	21,705
1,976 SHS JOHNSON CONTROLS INTL PLO	3	81,400.	75,305
870 SHS TECHNIPFMC LTD		30,911.	27,240
TOTAL TO FORM 990-PF, PART II, LIN	E 10B	1,848,517.	2,818,869
FORM 990-PF DEPRECIATION OF ASSE	IS NOT HELD FOR	INVESTMENT	STATEMENT 8
FORM 990-PF DEPRECIATION OF ASSESTED	IS NOT HELD FOR  COST OR  OTHER BASIS	ACCUMULATED DEPRECIATION	STATEMENT 8 BOOK VALUE
DESCRIPTION	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION	BOOK VALUE
DESCRIPTION  COMPUTER EQUIPMENT	COST OR OTHER BASIS	ACCUMULATED DEPRECIATION 2,364.	BOOK VALUE
DESCRIPTION  COMPUTER EQUIPMENT COMPUTER EQUIPMENT	COST OR OTHER BASIS  2,364. 355.	ACCUMULATED DEPRECIATION  2,364. 355.	BOOK VALUE
DESCRIPTION  COMPUTER EQUIPMENT COMPUTER EQUIPMENT OFFICE FURNITURE	COST OR OTHER BASIS  2,364. 355. 912.	ACCUMULATED DEPRECIATION  2,364. 355. 852.	BOOK VALUE  0 0 60
DESCRIPTION  COMPUTER EQUIPMENT COMPUTER EQUIPMENT OFFICE FURNITURE SHADE STRUCTURE	COST OR OTHER BASIS 2,364. 355. 912. 1,502.	ACCUMULATED DEPRECIATION  2,364. 355. 852. 1,401.	BOOK VALUE  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
DESCRIPTION  COMPUTER EQUIPMENT COMPUTER EQUIPMENT OFFICE FURNITURE	COST OR OTHER BASIS  2,364. 355. 912.	ACCUMULATED DEPRECIATION  2,364. 355. 852.	BOOK VALUE  0 0 60
DESCRIPTION  COMPUTER EQUIPMENT COMPUTER EQUIPMENT OFFICE FURNITURE SHADE STRUCTURE	COST OR OTHER BASIS 2,364. 355. 912. 1,502. 409.	ACCUMULATED DEPRECIATION  2,364. 355. 852. 1,401.	BOOK VALUE  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
DESCRIPTION  COMPUTER EQUIPMENT COMPUTER EQUIPMENT OFFICE FURNITURE SHADE STRUCTURE APPLIANCES  TOTAL TO FM 990-PF, PART II, LN 14	COST OR OTHER BASIS  2,364. 355. 912. 1,502. 409.	ACCUMULATED DEPRECIATION  2,364. 355. 852. 1,401. 381.	BOOK VALUE  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
DESCRIPTION  COMPUTER EQUIPMENT COMPUTER EQUIPMENT OFFICE FURNITURE SHADE STRUCTURE APPLIANCES  TOTAL TO FM 990-PF, PART II, LN 14	COST OR OTHER BASIS 2,364. 355. 912. 1,502. 409.	ACCUMULATED DEPRECIATION  2,364. 355. 852. 1,401. 381.	BOOK VALUE  0 0 60 101 28
DESCRIPTION  COMPUTER EQUIPMENT COMPUTER EQUIPMENT OFFICE FURNITURE SHADE STRUCTURE APPLIANCES  TOTAL TO FM 990-PF, PART II, LN 14	COST OR OTHER BASIS  2,364. 355. 912. 1,502. 409.	ACCUMULATED DEPRECIATION  2,364. 355. 852. 1,401. 381.	BOOK VALUE  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
DESCRIPTION  COMPUTER EQUIPMENT COMPUTER EQUIPMENT OFFICE FURNITURE SHADE STRUCTURE APPLIANCES  TOTAL TO FM 990-PF, PART II, LN 14  FORM 990-PF OTH	COST OR OTHER BASIS  2,364. 355. 912. 1,502. 409.	ACCUMULATED DEPRECIATION  2,364. 355. 852. 1,401. 381. 5,353.	BOOK VALUE  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 10 ACTIVITY ONE THE KIDS ON FARMS PROJECT - THE MISSION OF THIS PROJECT IS TO CONNECT CHILDREN WITH LOCAL FARMS TO CREATE A BETTER UNDERSTANDING OF WHERE FOOD COMES FROM. WE PROVIDE OPPORTUNITIES FOR PLACE-BASED EDUCATION AND SERVE AS A TOOL FOR BUILDING HEALTHIER COMMUNITIES. IN 2017, THE FOUNDATION WORKED WITH APPROXIMATELY 200 STUDENTS AND 5 LOCAL FARMING OPERATIONS. **EXPENSES** TO FORM 990-PF, PART IX-A, LINE 1 2,642. FORM 990-PF SUMMARY OF DIRECT CHARITABLE ACTIVITIES STATEMENT 11 ACTIVITY TWO THE FAMILIES ON THE FARM PROJECT - THE MISSION OF THIS PROJECT IS TO WORK WITH FAMILIES TO EDUCATE THEM ON FARM VEGETABLE PRODUCTION AND NUTRITION. EACH FAMILY IS SENT HOME WITH FRESH VEGETABLES TWICE A MONTH. IN 2017, THE FOUNDATION WORKED WITH APPROXIMATELY 9 FAMILIES AND OVER 35 ENGLISH-AS-SECOND LANGUAGE SPEAKERS.

**EXPENSES** 

TO FORM 990-PF, PART IX-A, LINE 2

4,945.

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT

12

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

KAMPE FAMILY FOUNDATION P.O. BOX 873 PAONIA, CO 81428-0873

WEBSITE: WWW.KAMPEFOUNDATION.ORG

TELEPHONE NUMBER

(970) 623-4290

### FORM AND CONTENT OF APPLICATIONS

THE KAMPE FOUNDATION REQUIRES ALL ORGANIZATIONS INTERESTED IN FUNDING TO SUBMIT A LETTER OF INQUIRY OF TWO TO THREE PAGES MAXIMUM, PROVIDING THE FOLLOWING INFORMATION:

- 1.) A STATEMENT OF YOUR ORGANIZATIONAL GOALS, MISSION AND HISTORY OF YOUR ACCOMPLISHMENTS.
- 2.) THE RELATIONSHIP OF THE REQUEST TO YOUR MISSION.
- 3.) THE PURPOSE OF YOUR REQUEST, OR NEED FOR THE PROPOSED PROJECT AND/OR FUNDING.
- 4.) ANTICIPATED OUTCOME OF THE PROJECT IF FUNDED.
- 5.) A PLAN FOR PROJECT EVALUATION.

YOUR LETTER OF INQUIRY WILL BE REVIEWED BY THE FOUNDATION BOARD, AND

ANY SUBMISSION DEADLINES

NO SUBMISSION DEADLINES.

### RESTRICTIONS AND LIMITATIONS ON AWARDS

THE KAMPE FAMILY FOUNDATION PROVIDES PROGRAMS AND FUNDING TO NONPROFIT ORGANIZATIONS IN THE FIELDS OF COMMUNITY DEVELOPMENT, SOCIAL JUSTICE, AND ENVIRONMENTAL ISSUES. TO BE ELIGIBLE FOR CONSIDERATION, APPLICANTS MUST ILLUSTRATE FINANCIAL NEED, BE ACTIVELY INVOLVED IN A KAMPE FOUNDATION PROGRAM AREA, AND BE GEOGRAPHICALLY LOCATED IN THE WESTERN STATES OF CALIFORNIA, OREGON, WASHINGTON, IDAHO, MONTANA, UTAH, NEVADA, COLORADO OR WYOMING.

20-0512724

KAMPE FAMILY FOUNDATION

FORM 990-PF GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A - 2D (CONTINUATION)

STATEMENT 13

## FORM AND CONTENT OF APPLICATIONS

APPLICANTS WILL BE NOTIFIED REGARDING OUR INTEREST WITHIN EIGHT WEEKS OF THE LOI SUBMISSION. PLEASE SEE OUR WEBSITE AT WWW.KAMPEFOUNDATON.ORG.

2017 DEPRECIATION AND AMORTIZATION REPORT

FORM	FORM 990-PF PAGE 1					-•	990-PF							
Asset	Description	Date Acquired	Method	Life	O C >	Unadjusted Cost Or Basis	Bus Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	1 COMPUTER EQUIPMENT	08/29/07 200DB		5.00	HY1 7	2,364.			<del></del>	2,364.	2,364.		o	2,364.
	2 COMPUTER BODIFMENT	02/04/12 200DB	2001018	5,00	HWII 7	45. 45.		<del></del>	178.	177.	167.		14.	177.
	3 OFFICE FURNITURE	04/10/12 200DB	200DB	7.00	нхп 7	912.			456.	456.	355.		41.	396.
···········	4 SHADE STRUCTURE	04/10/12 200DB	20003	7.00	HX17	1,502.		**********	751.	721	583.		67.	650.
	5 APPLIANCES	04/15/12 200DB 7.00	200DB		HY17	409.			205.	204.	158.		18	176.
	* TOTAL \$50~PP PG 1 DEPR					5,542.		***********	1,590.	3,952.	3,627.		136.	3,763.
728111	728111 04-01-17			1		(D) - Asset disposed	pesoc		*	ITC, Salvage,	Bonus, Comm	nercial Revita	* ITC, Salvage, Bonus, Commercial Revitalization Deduction, GO Zone	ion, GO Zone