Form 990-PF

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

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

OMB No 1545-0052

2018

Dep Inte	artme rnal R	nt of the ' evenue S	Treasury Service	► Go to w	ww.irs.	gov/Form990PF for inst	ructions and the la	itest		en to Public Inspection
Fo	r cal	endar y	ear 2018 or	tax year beginnir	g	, 2018,	and ending		,	
30	00 1	West	lly Found 8th Stre c, WA 986		•			B C	Employer identification not 20-3863303 Telephone number (see insection 1208) 720-48 If exemption application is	structions) 88
н	Che	Secti market v n Part II, Ana Exp	alue of all assets column (c), line 1,69(alysis of R benses (Thomas (b), (c),	nonexempt chass at end of year e 16) 1,136. evenue and e total of amount and (d) may not if the amounts in	tion 50 ritable J Acc (Part I	Initial return of a form Amended return Name change In(c)(3) exempt private fitrust X Other taxable productions method X Counting method X Counting method (a) Revenue and expenses per books	oundation O4 private foundation ash Accrual	D E F	1 Foreign organizations, che Proreign organizations met here and attach computation statu under section 507(b)(1)(A lf the foundation is in a 6 under section 507(b)(1)(E (c) Adjusted net income	eck here eting the 85% test, check on s was terminated o), check here 0-month termination
				ants, etc., received (attach sch		157,688.				
3		3 In 4 0 5 a 0 b N			attach Sch 8	14. 15,994.	15,99	14.	14. 15,994.	
	Revenue		let gain or (loss) from Gross sales price	sale of assets not on line 10		107,083.				
	ver	_ a	ssets on line 6a	scome (from Part IV, III	341.		107,08	2 2		
	æ		let short-term cap		ie 2)		107,00		Ó.	
		10 a n	ncome modification Gross sales less eturns and Illowances	ons				-		
		~ g c G	ess Cost of loods sold ross profit or (loss) (a							
		11 C	Other income (atta	ach schedule)						
			otal Add lines			280,779.	123,09	91.	16,008.	
			•	officers, directors, trust alaries and wages	ees, etc.	0.				
	ses	15 P	Pension plans, em egal fees (attach	nployee benefits						
	ens		ccounting fees (a	attach sch) See		1,853.				1,853.
	EX	c 0	then professional fees	(attach sch) See	\$t 2	153.				153.
	ive		axes (attach schedule)		Stm 3	25.				25.
	trat		elegial or (affact) chedule) and dep	A TOO I		23.				23.
	inis		chedule) and dep occupancy							
	ωp\		OG ĎEN	es, and meetings						
	Operating and Administrative Expenses	-22	Printing-and-public Other expenses (a	cations						
	rating			nd administrative les 13 through 23		2,031.				2.031
	edC		ontributions, gifts, gra		t 4	90,669.				2,031. 90,669.
_	_	Α	otal expenses ar add lines 24 and 2 subtract line 26 fro			92,700.		0.	0.	92,700.
		аε	xcess of revenue nd disbursement	e over expenses		188,079.				
				come (if negative, ente	•		123,09	91.	16,008.	
		CA	wusted net inco	me (if negative, enter	U+)	ı			. אטטימד	1

TEEA0301L 12/12/18

Page 2

Par	ŧΠ	Balance Sheets	column should be for end-of-year amounts only	degining of year		(a) Com Market Value
		Cook non interest	(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
•	1	Cash – non-interest	-	1,918.	220,755.	220,755.
	2		ary cash investments			<u> </u>
	3	Accounts receivable				
		Less: allowance for	doubtful accounts			
	4	Pledges receivable				_
	_	Less allowance for	doubtful accounts			
	5	Grants receivable				
	6	Receivables due from office disqualified persons (atta-	cers, directors, trustees, and other ch schedule) (see instructions)			
	7	Other notes and loans rec	eivable (attach sch)	,	W 4	
		Less allowance for		-		
ŝ	8	Inventories for sale	or use			
Assets	9	Prepaid expenses a	nd deferred charges			
⋖	10	a Investments - U S	and state government			
		obligations (attach s	chedule)			
		b Investments — corporate	stock (attach schedule)	1,616,380.	1,444,400.	1,444,400.
	٠ ا	c Investments — corporate	bonds (attach schedule)			
	11	Investments – land, equipment basis	buildings, and			
		Less accumulated deprec (attach schedule)	alation -			
	12	Investments - morte	gage loans.			
	13	Investments - other	(attach schedule)	40,435.	24,981.	24,981.
	14	Land, buildings, and	equipment basis •			
		Less accumulated deprec (attach schedule)	iation •			
	15	Other assets (descri	be >)			
	16	Total assets (to be a see the instructions	completed by all filers – Also, see page 1, item I)	1,658,733.	1,690,136.	1,690,136.
	17	Accounts payable ar	nd accrued expenses			
(A)	18	Grants payable				
<u>=</u>	19	Deferred revenue				
Liabilities	20		tors, trustees, & other disqualified persons			
:3	21		s payable (attach schedule)			
	22	Other liabilities (des	cribe)			
	23	Total liabilities (add	lines 17 through 22)	0.	0.	
ses		Foundations that fo and complete lines	llow SFAS 117, check here 24 through 26, and lines 30 and 31. □ X			
anc	24	Unrestricted		1,658,733.	1,690,136.	
Bal	25	Temporarily restricted	ed			
豆	26	Permanently restrict	ed			
Net Assets or Fund Balanc		Foundations that do and complete lines	o not follow SFAS 117, check here 27 through 31.		ı	
0 0	27	Capital stock, trust p	orincipal, or current funds			
et	28	Paid-in or capital surplus,	or land, bldg , and equipment fund			
\ss	29	Retained earnings, accumi	ulated income, endowment, or other funds			
, t	30		und balances (see instructions)	1,658,733.	1,690,136.	
ž	31	Total liabilities and (see instructions)	net assets/fund balances	1,658,733.	1,690,136.	
Parl	HI	Analysis of Chan	ges in Net Assets or Fund Balance			'
			alances at beginning of year – Part II, colu		aree with	
•	end-	of-year figure reported	d on prior year's return)	(a), line 50 (must a	1	1,658,733.
2	Ente	r amount from Part I,	line 27a		2	188,079.
3	Other	increases not included in li	ne 2 (Itemize) See Statement 5		3	3,943.
4	Add	lines 1, 2, and 3			4	1,850,755.
			ntemize) ► See Statement 6		5	160,619.
6	Tota	I net assets or fund ba	alances at end of year (line 4 minus line 5)	- Part II, column (b), I	ine 30 6	1,690,136.

Part IV Capital Gains and	Losses for Tax on Investmen	nt Income			
	e the kind(s) of property sold (for examp warehouse, or common stock, 200 sh		(b) How acquired P — Purchase D — Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
		,	D — Donation		
b See State	med 7				
С					
d					
e	· · · · · · · · · · · · · · · · · · ·				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other bas plus expense of sal		(h) Gain or ((e) plus (f) m	
a b					
C			7		•
d					
e					
Complete only for assets show	ing gain in column (h) and owned by the	foundation on 12/31/69		(I) Gains (Col	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any		ain minus col (k), b an -0-) or Losses (fr	
a					
b					
С					
d					
е				1	
2 Capital gain net income or (r	net capital loss) If gain, also If (loss), ent	enter in Part I, line 7 ter -0- in Part I, line 7	2		107,083.
3 Net short-term capital gain o	or (loss) as defined in sections 1222(5) and (6)			
If gain, also enter in Part I, I in Part I, line 8	ine 8, column (c) See instructions If	(loss), enter -0-	3		-51,949.
Part V Qualification Und	er Section 4940(e) for Reduce	d Tax on Net Investm	ent Income	•	
(For optional use by domestic private	foundations subject to the section 4940	(a) tax on net investment inc	ome)		
If control 4040(d)(2) popular legy	a this part blank				
If section 4940(d)(2) applies, leave	s this part blank			_	_
	section 4942 tax on the distributable a		ase period?	Yes	X No
	alify under section 4940(e) Do not co				
1 Enter the appropriate amount i	n each column for each year, see the ins		entries		
(a) Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	(c) Net value of noncharitable-use ass	ets	(d) Distribution (col (b) divided	
2017	63,809.	1,327	7,214.		0.048077
2016	47,851.	941	,269.		0.050837
2015	36,777.	897	7,906.		0.040959
2014	40,616.		0,063.		0.051409
2013	10,752.	641	.,437.		0.016762
2 Total of line 1, column (d)			2		0.208044
3 Average distribution ratio for th number of years the foundation	ne 5-year base period — divide the total c ion has been in existence if less than	on line 2 by 5 0, or by the 5 years	3		0.041609
4 Enter the net value of nonch	aritable-use assets for 2018 from Par	t X, line 5	4]	1,742,386.
5 Multiply line 4 by line 3			5		72,499.
6 Enter 1% of net investment i	income (1% of Part I, line 27b)		6		1,231.
7 Add lines 5 and 6			7		73,730.
8 Enter qualifying distributions	from Part XII, line 4		8_		92,700.
If line 8 is equal to or greater the Part VI instructions	han line 7, check the box in Part VI, line	1b, and complete that part u	sing a 1% tax ra	ate See the	

Form	990-PF (2018) Lamb Family Foundation, Inc.		20-3863303	3 [Page 4
Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 49	40(b), 4940(e), or 4948	– see instructio	ns)	
1 a	Exempt operating foundations described in section 4940(d)(2), check here	N/A' on line 1			
	Date of ruling or determination letter (attach copy of letter if necessary	- see instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,		- 1 .	1,	231.
	check here ► X and enter 1% of Part I, line 27b				
c	All other domestic foundations enter 2% of line 27b $$ Exempt foreign organizations enter 4% of Part I,	line 12, col (b)	 		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				0
9	foundations only, others, enter -0-) Add lines 1 and 2		3	1	<u>0.</u> 231.
3 4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation	ons only others enter :			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, en		5	1	231.
6	Credits/Payments	(C) 0	 		231.
,	2018 estimated tax pmts and 2017 overpayment credited to 2018	6a	55.		j
	Exempt foreign organizations — tax withheld at source	6b			
	Tax paid with application for extension of time to file (Form 8868)		750.		
	Backup withholding erroneously withheld	6d	30.		
	Total credits and payments Add lines 6a through 6d	00	 7 	1	805.
8		220 is attached	8		<u> </u>
٥	· · · · · · · · · · · · · · · · · · ·	220 is attached	▶ 9		
10	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed		► 10		0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	a I Betomded	► 11		<u>574.</u>
Day		4. Refunded			0.
	t VII-A Statements Regarding Activities		· · · · · · · · · · · · · · · · · · ·	T 17	T.N
1 a	During the tax year, did the foundation attempt to influence any national, state, or participate or intervene in any political campaign?	or local legislation or di	d it	Yes 1 a	No X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political pu See the instructions for the definition	urposes?		1 b	x
	If the answer is 'Yes' to 1a or 1b , attach a detailed description of the activities and copies or distributed by the foundation in connection with the activities	of any materials published	d		
c	Did the foundation file Form 1120-POL for this year?			1 c	X
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed	d during the year.			 ^
	(1) On the foundation \rightarrow \$ 0. (2) On foundation mar		0.	.	
е	Enter the reimbursement (if any) paid by the foundation during the year for political exp	penditure tax imposed on		1	
	foundation managers ►\$ 0.				
2	Has the foundation engaged in any activities that have not previously been report	rted to the IRS?		2	X
	If 'Yes,' attach a detailed description of the activities				
3	Has the foundation made any changes, not previously reported to the IRS, in its govern of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a confoi	ning instrument, articles	es	3	. X
4 a	Did the foundation have unrelated business gross income of \$1,000 or more duri	· •		4a	X
	If 'Yes,' has it filed a tax return on Form 990-T for this year?				I/A
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5	X
•	If 'Yes,' attach the statement required by General Instruction T		•		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) s	satisfied either			
	By language in the governing instrument, or				
	By state legislation that effectively amends the governing instrument so that no mand	datory directions that conf	flict		
-	with the state law remain in the governing instrument?	.1.4.5 1.5 1.504		6	X
	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II,			7 X	
oa	Enter the states to which the foundation reports or with which it is registered. See instr. N/A	uctions		-	
h	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gen	oral			
	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation			8 b X	
9	Is the foundation claiming status as a private operating foundation within the me for calendar year 2018 or the tax year beginning in 2018? See the instructions for	aning of section 4942(j) or Part XIV If 'Yes,' con	(3) or 4942(J)(5) aplete Part XIV	9	$\frac{1}{x}$ 2
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a and addresses	schedule listing their nam	nes	10	х
BAA			F	orm 990-PF (2	

Pai	rt VII-A	Statements Regarding Activities (continued)						
11	At ảny ti within th	time during the year, did the foundation, directly or indirectly, own a controlled entine meaning of section 512(b)(13)? If 'Yes,' attach schedule See instructions	tity			11	Yes	No X
12	Did the fo	foundation make a distribution to a donor advised fund over which the foundation or a dis y privileges? If 'Yes,' attach statement See instructions	squalified perso	n had		12		Х
13		foundation comply with the public inspection requirements for its annual returns a address $ \begin{tabular}{l} $ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $		applica	tion?	13	Χ	
14	The bool	oks are in care of ► Joan R. Lamb	Telephone ZIP + 4 ►		(208)	720	- <u>488</u>	8
15	Section 4	at > 300 West 8th Street Vancouver WA 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —	-	986		_N/A		
	and ente	er the amount of tax-exempt interest received or accrued during the year		•	15			N/A
16	At any tir bank, se	me during calendar year 2018, did the foundation have an interest in or a signature or o ecurities, or other financial account in a foreign country?	ther authority o	ver a		16	Yes	No X
		instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' e name of the foreign country						
Par	t VII-B	Statements Regarding Activities for Which Form 4720 May Be I	Required					
	File Form	m 4720 if any item is checked in the 'Yes' column, unless an exception applies.					Yes	No
1 a	During th	ne year, did the foundation (either directly or indirectly)	-	_				j
	(1) Enga	age in the sale or exchange, or leasing of property with a disqualified person?		Yes	X No			
	(2) Borre	row money from, lend money to, or otherwise extend credit to (or accept it from) a qualified person?	a [Yes	XNo			
	(3) Furn	nish goods, services, or facilities to (or accept them from) a disqualified person?		Yes	XNo			
	(4) Pay	compensation to, or pay or reimburse the expenses of, a disqualified person?	[Yes	X No			
	(5) Tran for the	nsfer any income or assets to a disqualified person (or make any of either availab the benefit or use of a disqualified person)?	le [Yes	XNo			
	(6) Agre found of go	ee to pay money or property to a government official? (Exception. Check 'No' if the idation agreed to make a grant to or to employ the official for a period after termination overnment service, if terminating within 90 days.)	ne [Yes	ΧΝο			
Ł	If any an	nswer is 'Yes' to 1a(1)-(6), did any of the acts fail to qualify under the exceptions	described in					
	Regulation	nswer is 'Yes' to 1a(1)–(6), did any of the acts fail to qualify under the exceptions ions section 53 4941(d)-3 or in a current notice regarding disaster assistance? Sei	e instructions			1 b	N	/A
	Organiza	ations relying on a current notice regarding disaster assistance, check here		•				1
c	Did the f	foundation engage in a prior year in any of the acts described in 1a, other than exert corrected before the first day of the tax year beginning in 2018?	cepted acts,			1 c		<u>_</u>
2	Taxes or private o	n failure to distribute income (section 4942) (does not apply for years the foundation perating foundation defined in section 4942(j)(3) or 4942(j)(5))	ion was a					
a	At the er and 6e, I	and of tax year 2018, did the foundation have any undistributed income (lines 6d Part XIII) for tax year(s) beginning before 2018?	ſ	Yes	XNo			
	If 'Yes,'	list the years ► 20 , 20 , 20 , 20	•	_				ĺ
t	(relating	re any years listed in 2a for which the foundation is not applying the provisions of a to incorrect valuation of assets) to the year's undistributed income? (If applying s	section 4942(section 4942(a	a)(2) i)(2) to		2 b		
_	-	s listed, answer 'No' and attach statement – see instructions).	at the vege b			20	N	'A 1
		ovisions of section 4942(a)(2) are being applied to any of the years listed in 2a, Ii , 20 , 20	st the years h	ere				Ì
3 a		foundation hold more than a 2% direct or indirect interest in any business se at any time during the year?	(Yes	X No			
t	or disqua by the Co	did it have excess business holdings in 2018 as a result of (1) any purchase by the alified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer personner under section 4943(c)(7)) to dispose of holdings acquired by gift or lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Forme if the foundation had excess business holdings in 2018)	riod approved bequest, or				N	
4 a	Did the f	foundation invest during the year any amount in a manner that would jeopardize in le purposes?	ts				IA	
	CHAIRADI	ις μαιμόσεσ				4 a		<u>X</u>
t	jeopardizi	foundation make any investment in a prior year (but after December 31, 1969) that the classifier that had not been removed from jeopardy before the first day of the company of 20182.						
	ше шх у	year beginning in 2018?				4 b	1	<u>X</u>

Form 990-PF (2018) Lamb Family Found	ation, Inc.			<u>386330</u>	3	Page 6
Part VII-B Statements Regarding Activit		1 4720 May Be Req	uired (continued	d)	 .	
5 a During the year, did the foundation pay or incur a (1) Carry on propaganda, or otherwise attempt	-	n (acation 4045(a))2	☐Yes	X No		Yes No
	•		res	V 40		
(2) Influence the outcome of any specific pub on, directly or indirectly, any voter registra(3) Provide a grant to an individual for travel,	ation drive?	•	Yes Yes	X No X No		
(4) Provide a grant to an individual for traver,	• .		res	V MO		
in section 4945(d)(4)(A)? See instructions			Yes	X No		
(5) Provide for any purpose other than religio educational purposes, or for the prevention			Yes	X No		
b If any answer is 'Yes' to 5a(1)—(5), did any of described in Regulations section 53 4945 or in a See instructions	f the transactions fail to current notice regarding c	qualify under the exceptions and under the exception of t	otions		5 b	N/A
Organizations relying on a current notice rega	irding disaster assistant	ce, check here	•			
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure respon	sibility for the grant?		N/A Yes	No		
If 'Yes,' attach the statement required by Reg		• •				
6 a Did the foundation, during the year, receive a on a personal benefit contract?			∐Yes	XNo	6 b	
b Did the foundation, during the year, pay prem If 'Yes' to 6b, file Form 8870	iums, directly or indirec	my, on a personal bene	iii contract,		80	X
7 a At any time during the tax year, was the found	dation a party to a proh	ibited tax shelter transa	iction? Yes	XNo		
b If 'Yes,' did the foundation receive any procee	· ·			N/A	7 b	
8 Is the foundation subject to the section 4960 tax or excess parachute payment(s) during the year	· •	an \$1,000,000 in remune	Yes	XNo		
Part VIII Information About Officers, D		Foundation Manage	ners. Highly Pai	d Empl	ovees	
and Contractors				р.		
1 List all officers, directors, trustees, and found	T		(d) Contributions	10		
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	employee bene plans and deferr compensation	fit (e) E		e account, lowances
Joan R. Lamb 300 West 8th Street 218E Vancouver, WA 98660	President 1.00	0.		0.		0.
		`				
				-		
2 Compensation of five highest-paid employees (or		on line 1 – see instruction	ns). If none, enter 'NC	DNE,		
Compensation of five highest-paid employees (or (a) Name and address of each employee paid more than \$50,000	ther than those included (b) Title, and average hours per week devoted to position	on line 1 – see instruction (c) Compensation	(d)Contributions to employee benef plans and deferr	o fit (e) E		e account, lowances
(a) Name and address of each employee	(b) Title, and average hours per week		(d)Contributions t employee bene	o fit (e) E		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d)Contributions to employee benef plans and deferr	o fit (e) E		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d)Contributions to employee benef plans and deferr	o fit (e) E		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d)Contributions to employee benef plans and deferr	o fit (e) E		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d)Contributions to employee benef plans and deferr	o fit (e) E		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d)Contributions to employee benef plans and deferr	o fit (e) E		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d)Contributions to employee benef plans and deferr	o fit (e) E		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d)Contributions to employee benef plans and deferr	o fit (e) E		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d)Contributions to employee benef plans and deferr	o fit (e) E		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week		(d)Contributions to employee benef plans and deferr	o fit (e) E		

Form **990-PF** (2018)

Form 990-PF (2018) Lamb Family Foundation, Inc.	20-386	
Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	ion Managers, Highly Paid E	mployees,
3 Five highest-paid independent contractors for professional services. See instru	uctions. If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None		
Total number of others receiving over \$50,000 for professional services	• · · · · · · · · · · · · · · · · · · ·	0
Part IX-A Summary of Direct Charitable Activities		
Tartix-A Summary of Direct Chantable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical info	ormation such as the number of	Expenses
organizations and other beneficiaries served, conferences convened, research papers produced, etc		
1 <u>N/A</u>		
2		
3		
4		
"		
Part IX-B Summary of Program-Related Investments (see instruction	ns)	
Describe the two largest program-related investments made by the foundation during the tax	year on lines 1 and 2	Amount
1 <u>N/A</u>		
2		
2		
All other program-related investments See instructions		
3	. _	
Tabel Add by a 14bours 2		
Total. Add lines 1 through 3	•	0.

TEEA0307L 12/12/18

see instructions.)	oreign	roundations,
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.	1 a	1,710,948.
b Average of monthly cash balances	1 b	32,991.
c Fair market value of all other assets (see instructions)	1 c	24,981.
d Total (add lines 1a, b, and c)	1 d	1,768,920.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation) 1 e 0		
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	1,768,920.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	26,534.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,742,386.
6 Minimum investment return. Enter 5% of line 5	6	87,119.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private opera and certain foreign organizations, check here ☐ and do not complete this part.)	ating fo	undations
1 Minimum investment return from Part X, line 6	1	87,119.
2a Tax on investment income for 2018 from Part VI, line 5 2a 1,231.		
b Income tax for 2018 (This does not include the tax from Part VI)		
c Add lines 2a and 2b	2 c	1,231.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	85,888.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	85,888.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	85,888.
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	1 a	92,700.
b Program-related investments — total from Part IX-B	1 b	
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)	3 a	
b Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	92,700.
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	1,231.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	91,469.
		

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

BAA

Form **990-PF** (2018)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
Distributable amount for 2018 from Part XI, line 7				05.000
2 Undistributed income, if any, as of the end of 2018				85,888.
a Enter amount for 2017 only		-	3,719.	
b Total for prior years 20 , 20 , 20		0.	37,13.	· · · · · ·
3 Excess distributions carryover, if any, to 2018				
a From 2013				
b From 2014				
c From 2015				
d From 2016				
e From 2017				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2018 from Part				
XII, line 4 \$ 92,700.		-		
a Applied to 2017, but not more than line 2a			3,719.	
b Applied to undistributed income of prior years (Election required – see instructions)		0.		
		0.		
c Treated as distributions out of corpus (Election required – see instructions)	0.			
d Applied to 2018 distributable amount	<u> </u>			85,888.
e Remaining amount distributed out of corpus	3,093.		7-7-11	05,000.
5 Excess distributions carryover applied to 2018	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
same amount must be shown in column (a)				
6 Enter the net total of each column as				
indicated below:				
a Corpus. Add lines 3f, 4c, and 4e Subtract line 5	3,093.			
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed		0.		
income for which a notice of deficiency has				
been issued, or on which the section 4942(a) tax has been previously assessed		0.		i
·		U.		
d Subtract line 6c from line 6b Taxable amount — see instructions		0.		
e Undistributed income for 2017 Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2018 Subtract lines				
4d and 5 from line 1. This amount must be				
distributed in 2019				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			
<u> </u>	0.			
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2019.				
Subtract lines 7 and 8 from line 6a	3,093.			
10 Analysis of line 9 a Excess from 2014				
b Excess from 2015				
c Excess from 2016				
d Excess from 2017				
e Excess from 2018 3, 093.				
<u> </u>				

Form 990-PF (2018) Lamb Family Foun		estions and Part	VII A guestion	20-3863303	
Part:XIV Private Operating Founda 1 a If the foundation has received a ruling or dete					N/A/
is effective for 2018, enter the date of the	ruling				
b Check box to indicate whether the founda		erating foundation d		4942(j)(3) 9	4942(J)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year	(h) 2017	Prior 3 years (c) 2016	(d) 2015	(e) Total
investment return from Part X for each year listed	(a) 2018	(b) 2017	(6) 2016	(0)/2015	
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					
<u>PartXV#</u> Supplementary Information assets at any time during the	(Complete this e year — see in:	part only if the structions.)	foundation had	\$5,000 or more	in
Information Regarding Foundation Managers of the foundation who have close of any tax year (but only if they have Joan R. Lamb	e contributed more th	an 2% of the total co than \$5,000) (See	intributions received t section 507(d)(2))	by the foundation befo	ore the
b List any managers of the foundation who owr a partnership or other entity) of which the None	10% or more of the foundation has a 10	stock of a corporation 0% or greater intere	n (or an equally large est ,	portion of the owner	ship of
					
2 Information Regarding Contribution, Grant, the Check here X if the foundation only make requests for funds. If the foundation make 2a, b, c, and d. See instructions	ikes contributions to j	oreselected charitable			
a The name, address, and telephone number o	r email address of the	e person to whom app	plications should be a	addressed	
b The form in which applications should be	submitted and infor	mation and materia	ls they should inclu	de	
c Any submission deadlines					
d Any restrictions or limitations on awards,	such as by geograph	hical areas, charitat	ole fields, kinds of ii	nstitutions, or other	factors

Page 11

Part XV Supplementary Information (co	ntinued)	Dayman		
3 Grants and Contributions Paid During the Ye	If recipiont is an industrial	ure Paymen		<u> </u>
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)	or substantial contributor	recipient		
a Paid during the year				
				}
		ĺ		
Total			´ ► 3a	
b Approved for future payment				
Total			► 3b	
				ı

FartAV	I-A Alialysis of illcome-Producing	Activities				
Enter gros	ss amounts unless otherwise indicated	Unrelate	d business income	Excluded	by section 512, 513, or 514	(e)
1 Prog	gram service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (See instructions)
а						
b						
c					·	
d						
e —						
f		 				
n Fees	and contracts from government agencies		.			
-	bership dues and assessments					
	est on savings and temporary cash investments				14.	
	dends and interest from securities				15,994.	
	rental income or (loss) from real estate				13,334.	
	:-financed property					
	debt-financed property				" " "	
	ental income or (loss) from personal property		· -			
	er investment income					<u> </u>
						107.074
	or (loss) from sales of assets other than inventory		9.			107,074.
	income or (loss) from special events	<u> </u>				
	s profit or (loss) from sales of inventory				1	
	er revenue				'	ļ
a						· · · · · · · · · · · · · · · · · · ·
b						
c		1				
d						
е						
	otal Add columns (b), (d), and (e)		9.		16,008.	107,074.
13 Tota	I. Add line 12, columns (b), (d), and (e)		9.	- 1	16,008. 13	107,074. 123,091.
13 Tota (See work	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations.			· -	13	
13 Tota (See work	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. Relationship of Activities to the	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.
13 Tota (See work Part XV Line No.	I. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations. I-B Relationship of Activities to the Explain below how each activity for which in accomplishment of the foundation's exempt	Accompli	shment of Exemp	_ .	ses	123,091.

Form 990-PF (2018) Lamb Family Foundation, Inc. 20-3863303 PartiXVIII Information Regarding Transfers to and Transactions and Relationships With Noncharitable Exempt Organizations

•	Exempt Organiz	auons									
describe	organization directly ed in section 501(c) (to political organizat	other than sec	ngage in any of the ction 501(c)(3) orga	e following wi inizations) or	th any oth	her organizatio n 527,	n		Y	es N	No
a Transfer	s from the reporting	foundation to	a noncharitable ex	empt organiz	ation of						
(1) Casl	h		•						1 a (1)		X
(2) Othe	er assets								1 a (2)		X
b Other tra	ansactions							I			
(1) Sale	es of assets to a none	charitable exe	mpt organization						1 b (1)		X
(2) Purd	chases of assets fron	n a noncharita	ible exempt organiz	zation					1 b (2)	:	<u>X_</u>
(3) Ren	tal of facilities, equip	oment, or othe	r assets						1 b (3)		<u>X</u>
(4) Rein	nbursement arranger	ments						L	1 b (4)		<u>X</u>
• •	ns or loan guarantee:							L	1 b (5)		<u>X_</u>
• • •	ormance of services		•					L	1 b (6)	-	<u>X</u> _
c Sharing	of facilities, equipme	ent, mailing lis	sts, other assets, or	paid employ	ees			L	1 c		<u>X_</u>
d If the an the good any tran	iswer to any of the al s, other assets, or sen saction or sharing ar	bove is 'Yes,' vices given by rrangement, s	complete the follow the reporting foundat how in column (d) t	ving schedule tion If the four the value of the	Column dation red e goods,	(b) should alw ceived less than , other assets,	ays show to fair market or services	he fair ma value in received	arket value	of	
(a) Line no	(b) Amount involved	(c) Name o	of noncharitable exempt of	organization	(d)	Description of tran	sfers, transact	ions, and sh	arıng arrange	ments	
N/A											
				a							
											—
	_										
											—
+											—
2a Is the fou describe		lirectly affiliated other than sed	d with, or related to, or instruction 501(c)(3)) or in	one or more ta n section 527	x-exempt	organizations			☐Yes	χNο	—)
b If 'Yes,'	complete the following	ng schedule								ت	
(a)	Name of organization	on	(b) Type of	organization		(c)	Descriptio	n of relati	onship		
N/A						•					
				<u>.</u>							
Sign Here	enalties of perjury, I declare and complete Declaration	e that I have exam	ined this return, including than taxpayer) is based o	accompanying son all information of	of which pres	parer has any know	the best of my edge	knowledge a	May the IRS this return w preparer sho	discuss	
<u></u>	ture/of office) or trustee	4 0 100 1	Dat		Title	<u>resident</u> e			See instruct	ons	
	Frint/Type preparer's nam	ne	Preparer's signa			Date	Check	I _{If} P	TIN	»	No
Daid		sen, CPA	Bush)(PA	10/24/1	self-emplo	⊔"	004979	66	
Paid Preparer		arol E. J	, active	PLLC	-) - ' ' 	1	Firm's EIN	91-191		00	
Jse Only			Avenue NE,	31			3 E.IIY	J1-13	19020		—
USE OIIIY			A 98105	, JT			Phone no	206-51	23-6470		
BAA	1 50	caccie, W	70103						Form 990-F		181
								Г	OHH 330-1	1 (20	10)

Schedule B (Form 990, 990-ÈZ, 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

2018

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Maine of the organization			Employer identification flumber
Lamb Family Foundation, In	С.		20-3863303
Organization type (check one)			
Filers of:	Section:		
Form 990 or 990-EZ	501(c)() (enter nu	umber) organization	
	4947(a)(1) nonexempt cl	haritable trust not treated as	a private foundation
	527 political organization	า	•
Form 990-PF	501(c)(3) exempt private	e foundation	
	4947(a)(1) nonexempt cl	haritable trust treated as a pri	ıvate foundation
	X 501(c)(3) taxable private	·	•
	sor(c)(s) taxable private	Touridation	
Check if your organization is covered by the Ge	neral 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, 99 property) from any one contributor.	0-EZ, or 990-PF that received, du mplete Parts I and II See instruct	ring the year, contributions to tions for determining a contrib	otaling \$5,000 or more (in money or outor's total contributions
Special Rules			
For an organization described in section	n 501(c)(2) filing Form 990 or 990) E7 that mot the 22 1/2% cur	poort tost of the regulations
under sections 509(a)(1) and 170(b)(1)(A	(vi), that checked Schedule A (Form	ı 990 or 990-EZ), Part II, line 13	. 16a. or 16b. and that
received from any one contributor, dur Form 990, Part VIII, line 1h, or (ii) For	ng the year, total contributions of n 990-EZ, line 1 Complete Parts	the greater of (1) \$5,000, or I and II	(2) 2% of the amount on (i)
_	·		
For an organization described in section during the year, total contributions of r	n 501(c)(7), (8), or (10) filing Form	n 990 or 990-EZ that received	from any one contributor,
purposes, or for the prevention of crue	Ity to children or animals. Complet	te Parts I (entering 'N/A' in co	olumn (b) instead of the
contributor name and address), II, and	III		
For an organization described in section			
during the year, contributions exclusive			
\$1,000 If this box is checked, enter he charitable, etc., purpose. Don't complete			
it received nonexclusively religious, ch			C C
			•
Caution: An organization that isn't covered 990-PF), but it must answer 'No' on Part I	by the General Rule and/or the S	Special Rules doesn't file Sche	edule B (Form 990, 990-EZ, or
Part I, line 2, to certify that it doesn't mee	the filing requirements of Schedu	ale B (Form 990, 990-EZ, or 9	90·PF)

BAA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF

Page ∡

Employer Identification number Name of organization Lamb Family Foundation, Inc. 20-3863303

Part | Contributors (see instructions) Use duplicate copies of Part I if additional space is needed. (d) Type of contribution (a) Number (b) Name, address, and ZIP + 4 (c) Total contributions X Person Joan R. Lamb Payroll X 300 West 8th Street, 218E 157,688. Noncash (Complete Part II for noncash contributions.) Vancouver, WA 98660 (a) Number (b) Name, address, and ZIP + 4 (c) Total contributions (d) Type of contribution Person Payroll Noncash (Complete Part II for noncash contributions) (b) Name, address, and ZIP + 4 (c) Total (a) Number (d) Type of contribution contributions Person Payroll Noncash (Complete Part II for noncash contributions) (b) Name, address, and ZIP + 4 (d)
Type of contribution (c) Total contributions (a) Number Person Payroll Noncash (Complete Part II for noncash contributions) (d) Type of contribution (a) Number (b) (c) Total Name, address, and ZIP + 4 contributions Person Payroll Noncash (Complete Part II for noncash contributions) (c) Total contributions (d) Type of contribution (a) Number (b) Name, address, and ZIP + 4 Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

Lamb Family Foundation, Inc.

20-3863303

Part II	Noncash Property (see instructions) Use duplicate copies of Part II if additional s	pace is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
1	Shares of Common Stock		
		\$100,788.	12/12/18_
(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
		\$	
		<u> </u>	
(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
	<u></u>		
		\$	
BAA	Sche	 edule B (Form 990, 990-E2	, or 990-PF) (2018

Schedule E	3 (Form 990, 990-EZ, or 990-PF) (2018)			1 1 Page 4
Name of organ	nization			Employer identification number 20-3863303
Part III	Exclusively religious, charitable, e or (10) that total more than \$1,000 for t the following line entry For organizations of contributions of \$1,000 or less for the year Use duplicate copies of Part III if additional	he year from any one contribute ompleting Part III, enter the total of (Enter this information once. See	r. Complete columns exclusively religiou	ed in section 501(c)(7), (8), (a) through (e) and
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	De	(d) scription of how gift is held
	N/A			
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship	of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) scription of how gift is held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship (of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	De	(d) scription of how gift is held
	Transferee's name, addres	(e) Transfer of gift ss, and ZIP + 4	Relationship (of transferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	De	(d) scription of how gift is held
	Transferee's name, addres	(e) Transfer of gift s, and ZIP + 4	Relationship o	of transferor to transferee
BAA			Schedule B (Fo	rm 990, 990-EZ, or 990-PF) (2018)

2018	Federal Statements	Page 1
	Lamb Family Foundation, Inc.	20-3863303
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees		(d) haritable Purposes
852	Total $\frac{\$}{\$}$ 1,853. $\frac{\$}{\$}$ 0. $\frac{\$}{\$}$	1,853. 1,853.
Statement 2 Form 990-PF, Part I, Line 16c Other Professional Fees		
ACH Transfer Fee Postage Registered Agent Fee		(d) haritable Purposes 60. 14. 79. 153.
Statement 3 Form 990-PF, Part I, Line 18 Taxes		
State of Delaware	<u>per Books</u> <u>Income</u> <u>Net Income</u>	(d) haritable Purposes 25. 25.
Statement 4 Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants		
Cash Grants and Allocations Class of Activity: Donee's Name: Donee's Address: Relationship of Donee: Amount Given:	Education, support opera Palm Springs Opera of the Desert 2150 E. Tahquitz Canyon Way, Ste 6 Palm Springs CA 92262 Donee	1,220.
Class of Activity: Donee's Name: Donee's Address: Relationship of Donee:	Art Awareness, education Palm Springs Art Museum PO Box 2310 Palm Springs CA 92263 Donee	
Amount Given: Class of Activity:	Education, student prog	4,700.

•

2018	Federal Statements	Page 2
·	Lamb Family Foundation, Inc.	 20-3863303
Statement 4 (continued) Form 990-PF, Part I, Line 25 Contributions, Gifts, and Grants		
Donee's Name: Donee's Address: Relationship of Donee: Amount Given:	Palm Springs Pathfinders PO Box 5005 Rancho Mirage CA 92270 Donee	\$ 1,000.
Class of Activity: Donee's Name: Donee's Address: Relationship of Donee:	Art Awareness, education Palm Springs Art Museum 101 Museum Drive Palm Springs CA 92263 Donee	900.
Amount Given: Class of Activity: Donee's Name: Donee's Address: Relationship of Donee: Amount Given:	Art Awareness, education Oregon Symphony 921 SW Washington, Ste 200 Portland OR 97205 Donee	2,500.
Class of Activity: Donee's Name: Donee's Address: Relationship of Donee: Amount Given:	Art Awareness, education Palm Springs Art Museum 101 Museum Drive Palm Springs CA 92263 Donee	3,500.
Class of Activity: Donee's Name: Donee's Address: Relationship of Donee: Amount Given:	Art Awareness, education McCallum Theatre 73000 Fred Waring Drive Palm Springs CA 92260 Donee	2,140.
Donee's Name: Donee's Address: Amount Given:	McCallumTheatre 73000 Fred Waring Drive Palm Desert CA 92260	500.
Donee's Name: Donee's Address: Amount Given:	Portland Art Museum 1219 SW Park Avenue Portland OR 97205	2,000.
Noncash Grants and Allocations	<u></u>	
Class of Activity: Donee's Name: Donee's Address: Relationship of Donee:	Art Awareness, education Portland Art Museum 1219 SW Park Avenue Portland OR 97205 Donee	20. 615
FMV of Property: Description of Property: Date of Gift: Method used to Determine BV: Method used to Determine FMV:	90 sh Nvidia Corp Com Stk 1/18/2018 market price Market price	20,615.

Art Awareness, education

Class of Activity:

20	1	O
Zυ	ı	Ö

Federal Statements

Page 3

Lamb Family Foundation, Inc.

20-3863303

13,537.

9,428.

7,638.

10,110.

5,617.

Statement 4 (continued)
Form 990-PF, Part I, Line 25
Contributions, Gifts, and Grants

Donee's Name: Donee's Address:

Relationship of Donee:

FMV of Property: Description of Property:

Date of Gift:

Method used to Determine BV: Method used to Determine FMV:

Class of Activity: Donee's Name: Donee's Address:

Relationship of Donee: FMV of Property:

Description of Property:

Date of Gift:

Method used to Determine BV: Method used to Determine FMV:

Class of Activity: Donee's Name: Donee's Address:

Relationship of Donee:

FMV of Property: PMV of Property:
Description of Property:

Date of Gift:

Date of Gift: 1/18/2018
Method used to Determine BV: market price
Method used to Determine FMV: Market price

Class of Activity:

Donee's Name: Donee's Address:

Relationship of Donee: FMV of Property:

Description of Property:

Date of Gift:

Method used to Determine BV:

Method used to Determine FMV:

45 shares Nvidia Com Stk

1/18/2018

market price

Market price

Class of Activity: Donee's Name: Donee's Address:

Relationship of Donee: FMV of Property:

Description of Property:

Date of Gift:

Date of Gift: 1/18/2018
Method used to Determine BV: market price
Method used to Determine FMV: Market price

Class of Activity: Donee's Name: Donee's Address:

Schwab Charitable-J. R. Lamb Fund

PO Box 628298 Orlando FL 32862

90 sh Nvidia Com Stock

12/13/2018 market price Market price

Art Awareness, education Schwab Charitable-J.R. Lamb Fund

PO Box 628298 Orlando FL 32862

Donee

Donee

90 sh Take Two Interactv 12/13/2018

market price Market price

Educational Purposes

University of Oregon Foundation 1720 E. 13th Avenue, Ste 410

Eugene OR 97403

Donee

34 sh Nvidia Corp Com Stk

Art Awareness, education McCallum Theatre

73000 Fred Waring Drive Palm Desert CA 92260

Donee

Art Awareness, education

Portland Opera 221SE Caruthers Street Portland OR 97214

Donee

25 sh Nvidia common stock

1/18/2018

Art Awareness, education

The Argyros PO Box4921 Ketchum ID 83340

2018	Federal Statements	Page 4
,	Lamb Family Foundation, Inc.	20-3863303
Statement 4 (continued) Form 990-PF, Part I, Line 25 Contributions, Gifts, and Gra Relationship of Donee: FMV of Property: Description of Property Date of Gift: Method used to Determin Method used to Determin	Donee 7: 50 sh Take Two Interactv 12/28/2018 ne BV: market price	\$ 5,264. Total \$ 90,669.
Statement 5 Form 990-PF, Part III, Line 3 Other Increases Prior Period Adjustment	cs	\$ 3,943. Total \$ 3,943.
Statement 6 Form 990-PF, Part III, Line 5 Other Decreases Net Unrealized Gains or See Allache		\$ 160,619. Total \$ 160,619.
Statement 7 Form 990-PF (See Attack	Part IV, Line 1	•





Corp 100 WEST 8TH STREET UNIT 218E

Total Known Realized Gain/(Loss) \$/%		Total Kn	own Short	Known Short-Term Gain/(Loss)	(S)	Total Know	Total Known Long-Term Gain/(Loss)	m Gain/(Loss	
(\$51,9	(\$51,946.58)	(85	=	במונו למונו (בסי	2	\$159,022.39	9 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	iii daiiii(Loss	_
Total Known Cost Basis \$461,266.60		own Co	st [Basis					
Cost Basis - Realized Gain/(Loss) - Filtered by: Previous Year	11								Results: 15
Sold/ Acquired/ Quantity Closed Opened Sold	· (*. 4	Ouan	ett. od	Total Proceeds	Cost Basis ³	Short Term	Long Term	Total	Total % . Notes ¹
ABBVIE INC DUTCH 05/16/2018 09/11/2017 400 00000		00 001	000	\$42,003 80	\$34,619 23	\$7,384 57	,	\$7,384 57	21 33%
APPLIED MATERIALS 09/06/2018 View Lots 680 00000		980 00	000	\$27,511 71	\$30,985 75	(\$3,474 04)		(\$3,474 04)	(11 21%)
COLGATE-PALMOLIVE 07/24/2018 08/29/2012 360 00000		360 00(000	\$23,572 58	\$19,167 79		\$4,404 79	\$4,404 79	22 98%
COMCAST CORP 12/12/2018 View Lots 2,080 00000 CLASS A		380 000	00	\$77,310 34	\$41,673 33		\$35,637 01	\$35,637 01	85 52%
CORESITE REALTY 02/15/2018 View Lots 355 00000		355 00000		\$34,139 94	\$25,436 76	(\$868 80)	\$9,571 98	\$8,703 18	34 21%
DIGITAL REALTY 02/15/2018 View Lots 365 00000	i	365 00000		\$38,304 86	\$40,411 79	(\$2,132 70)	\$25 77	(\$2,106.93)	(5 21%)
EASTMAN CHEMICAL 09/10/2018 03/02/2018 250 00000		250 0000		\$24,378 48	\$25,174 93	(\$796 45)		(\$796 45)	(3 16%)
FACEBOOK INC 10/02/2018 View Lots 510 00000 CLASS A .		310 0000	0	\$81,315 68	\$38,003 54		\$43,312 14	\$43,312 14	113 97%
GARRETT MOTION INC 10/17/2018 View Lots 19 00000		19 0000	0	\$279 93	\$81 40		\$198 53	\$198 53	243 89%
MICRON TECHNOLOGY 12/19/2018 07/19/2018 750 00000		,50 00000		\$24,845 46	\$41,979 30	(\$17.133 84)		(\$17,133 84)	(40 81%)
RESIDEO 12/07/2018 View Lots 31 00000		31 0000	စ္က	\$638 63	\$214 86		\$423 77	\$423 77	197 23%
RESIDEO TECHNOLOGIES INC 10/29/2018 02/25/2009 0 66667		9999 0		\$14 17	\$3 28		\$10.89	\$10 89	332 01%

©2019 Charles Schwab & Co. Inc ("Schwab"). All rights reserved. Member SIPC
Schwab Advisor Services"* (formerly known as Schwab Institutional®) serves independent investment advisors and includes the custody, trading and support services of Schwab
This material is for institutional investor use only. This material may not be forwarded or made available, in part or in whole, to any party that is not an institutional investor.

`	Symbol Name	Name	Sold/ Closed	Acquired/ Opened	Quantity Sold	y Total Proceeds Cost Basis ³		Short Term	Short Term Long Term	Total	, Total %	Notes1
±	SBUX	STARBUCKS CORP	06/20/2018 View Lots	View Lots	1,590 00000	\$82,535 33	\$44,178 40		\$38,356 93	\$38,356 93	86 82%	
	SQ	SQUARE INC CLASS A 12/12/2018 10/03/2018 1,025 00000	12/12/2018	10/03/2018	1,025 00000	\$65,423 44	\$100,348 76 (\$34,925 32)	(\$34,925 32)		(\$34,925 32) (34 80%)	(34 80%)	
±	SWKS	SKYWORKS SOLUTIONS	09/06/2018 View Lots	View Lots	520 00000	\$46,068 06	\$18,987 48		\$27,080 58	\$27,080 58 142 62%	142 62%	

Disclosures

The Realized Gain/Loss page provides summary information of closed transactions. Not all closed transactions appear on this page

We calculate cost basis using data that you or your client have provided to us or that we have obtained from market data supplied by third party sources. We may also display cost basis data that we have not calculated but that has been supplied by you or your client, a prior custodian or another third party source Because the accuracy of cost basis data depends upon these third party inputs, we are not able to guarantee the availability, accuracy or completeness of such cost basis data
Only covered transactions will be reported to the IRS Schwab does not provide tax or legal advice Please have your clients consult with a tax advisor regarding their specific tax situation

Footnotes apply where indicated on the data view.

Missing: Indicates cost basis has not been provided for this security

Not Tracked: Indicates original cost basis is not available

- Data for this holding has been edited or provided by the Advisor Ø
- Data for this holding has been edited or provided by the end client Φ
 - Data for this holding has been edited or provided by a third party
- Cost Basis was reported as unknown on the received cost basis report 3
- w Cost Basis adjusted due to a wash sale
- 3 Cost Basis for fixed income securities is now adjusted to reflect amortized/accreted values. Click the acquired/opened date to view original cost in the Details page. Note. Some securities, including variable rate/term instruments and mortgage backed securities, may only reflect original cost even when the amortization/accretion preference is on
 - 8 Total excludes missing cost basis information, or values not tracked by Schwab

(0307 - 0369)