

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)			Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
Assets	1	Cash—non-interest-bearing					
	2	Savings and temporary cash investments	621,301	1,094,548		1,094,548	
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)		538		538	
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____					
	8	Inventories for sale or use					
	9	Prepaid expenses and deferred charges					
	10a	Investments—U S and state government obligations (attach schedule)					
	b	Investments—corporate stock (attach schedule)					
	c	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment basis ▶ _____ 1,293,194 Less accumulated depreciation (attach schedule) ▶ _____ 333,283	978,515	959,911		1,401,084	
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)	24,416,698	23,208,837		23,904,991	
	14	Land, buildings, and equipment basis ▶ _____ 1,095,995 Less accumulated depreciation (attach schedule) ▶ _____ 319,016	791,723	776,979		1,141,863	
15	Other assets (describe ▶ _____)	235	8,442		8,442		
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	26,808,472	26,049,255		27,551,466		
Liabilities	17	Accounts payable and accrued expenses					
	18	Grants payable					
	19	Deferred revenue					
	20	Loans from officers, directors, trustees, and other disqualified persons					
	21	Mortgages and other notes payable (attach schedule).					
	22	Other liabilities (describe ▶ _____)	10,858	8,503			
	23	Total liabilities (add lines 17 through 22)	10,858	8,503			
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.						
	24	Unrestricted					
	25	Temporarily restricted					
	26	Permanently restricted					
	Foundations that do not follow SFAS 117, check here ▶ ☒ and complete lines 27 through 31.						
	27	Capital stock, trust principal, or current funds	0	0			
	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0	0			
	29	Retained earnings, accumulated income, endowment, or other funds	26,797,614	26,040,752			
	30	Total net assets or fund balances (see instructions)	26,797,614	26,040,752			
31	Total liabilities and net assets/fund balances (see instructions) .	26,808,472	26,049,255				

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	26,797,614
2	Enter amount from Part I, line 27a	2	-756,862
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	26,040,752
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	26,040,752

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e g , real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a See Additional Data Table			
b			
c			
d			
e			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a See Additional Data Table			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss) { If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	719,883
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 { }	3	

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	1,500,633	28,330,759	0 052968
2016	1,394,378	27,217,957	0 051230
2015	1,372,396	28,750,643	0 047734
2014	1,297,947	29,324,346	0 044262
2013	1,186,353	27,933,490	0 042471

2 Total of line 1, column (d) { }	2	0 238665
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years { }	3	0 047733
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5 { }	4	28,718,918
5 Multiply line 4 by line 3 { }	5	1,370,840
6 Enter 1% of net investment income (1% of Part I, line 27b) { }	6	7,926
7 Add lines 5 and 6 { }	7	1,378,766
8 Enter qualifying distributions from Part XII, line 4 { }	8	1,549,152

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See the Part VI instructions

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "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, check here ☒ and enter 1% of Part I, line 27b	1	7,926
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 foundations only. Others enter -0-)	2	0
3	Add lines 1 and 2.	3	7,926
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4	0
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	7,926
6	Credits/Payments		
a	2018 estimated tax payments and 2017 overpayment credited to 2018	6a	12,119
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	10,500
d	Backup withholding erroneously withheld	6d	0
7	Total credits and payments. Add lines 6a through 6d.	7	22,619
8	Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8	0
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	14,693
11	Enter the amount of line 10 to be Credited to 2019 estimated tax ☐ 14,693 Refunded ☐	11	0

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	No
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? (see Instructions for definition). <i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>	1b	No
c Did the foundation file Form 1120-POL for this year?	1c	No
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ☐ \$ 0 (2) On foundation managers ☐ \$ 0		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ 0		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? <i>If "Yes," attach a detailed description of the activities</i>	2	No
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	No
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	Yes
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	Yes
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? <i>If "Yes," attach the statement required by General Instruction T</i>	5	No
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	Yes
7 Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ☐ CA		
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) of each state as required by General Instruction G? <i>If "No," attach explanation</i> .	8b	Yes
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 year 2018 or the taxable year beginning in 2018? See the instructions for Part XIV <i>If "Yes," complete Part XIV</i>	9	No
10 Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10	No

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule. See instructions.	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions.	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	Yes	
14	The books are in care of ► CLAUDETTE SABIRON Telephone no ► (805) 962-5719			

Located at **►** 19 WEST CARRILLO STREET SANTA BARBARA CA ZIP+4 **►** 93101

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here ► ☐			
	and enter the amount of tax-exempt interest received or accrued during the year ► 15			
16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes", enter the name of the foreign country ►	16	Yes	No

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

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

1a	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? ☐ Yes ☒ No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☒ Yes ☐ No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☒ 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)? ☐ Yes ☒ No			
	(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). ☐ Yes ☒ No			
b	If any answer is "Yes" to 1a(1)–(6), did any 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. Organizations relying on a current notice regarding disaster assistance check here. ► ☐	1b		No
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 2018?	1c		No
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))			
a	At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? If "Yes," list the years ► 20____, 20____, 20____, 20____ ☐ Yes ☒ No			
b	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).	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No			
b	If "Yes," did it have excess business holdings in 2018 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 2018).	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	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 2018?	4b		No

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

		Yes	No
5a	During the year did the foundation pay or incur any amount to		
(1)	Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	☐ Yes ☒ No	
(2)	Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	☐ Yes ☒ No	
(3)	Provide a grant to an individual for travel, study, or other similar purposes?	☐ Yes ☒ No	
(4)	Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	☐ Yes ☒ No	
(5)	Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	☐ Yes ☒ No	
b	If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.		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 from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945–5(d)	☐ Yes ☐ No	
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	☐ Yes ☒ No	
b	Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870		6b No
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	☐ Yes ☒ No	
b	If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?		7b
8	Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	☐ Yes ☒ No	

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

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions				
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Additional Data Table				
2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."				
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
Total number of other employees paid over \$50,000.				0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services.		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	26,822,643
b	Average of monthly cash balances.	1b	914,626
c	Fair market value of all other assets (see instructions).	1c	1,418,993
d	Total (add lines 1a, b, and c).	1d	29,156,262
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	29,156,262
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	437,344
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	28,718,918
6	Minimum investment return. Enter 5% of line 5.	6	1,435,946

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

1	Minimum investment return from Part X, line 6.	1	1,435,946
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	7,926
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	3,349
c	Add lines 2a and 2b.	2c	11,275
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	1,424,671
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	1,424,671
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	1,424,671

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	1,549,152
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	1,549,152
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	7,926
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	1,541,226

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

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				1,424,671
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.			1,226,658	
b Total for prior years 20____, 20____, 20____		0		
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 ▶ \$ <u>1,549,152</u>				
a Applied to 2017, but not more than line 2a			1,226,658	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2018 distributable amount.				322,494
e Remaining amount distributed out of corpus	0			
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0			
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 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				1,102,177
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 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	0			
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.				

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

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. ▶					
b Check box to indicate whether the organization is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)					
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year	Prior 3 years			(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 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					

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

Part XV	
1 Information Regarding Foundation Managers:	
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))	
b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest	
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:	
Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. to individuals or organizations under other conditions, complete items 2a, b, c, and d. See instructions.	
a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed VOLENTINE FAMILY FOUNDATION 19 W CARRILLO STREET SANTA BARBARA, CA 93101 (805) 962-5719	
b The form in which applications should be submitted and information and materials they should include GRANT REQUEST APPLICATION AND APPLICABLE SUPPORTING DOCUMENTATION	
c Any submission deadlines APRIL 20	
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors AWARDS ARE LIMITED TO ORGANIZATIONS OPERATING IN THE FOLLOWING GEOGRAPHICAL AREAS SANTA BARBARA, CA, MCCOOK, NE AND LOVELAND, CO	

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total			▶ 3a	
b <i>Approved for future payment</i>				
Total			▶ 3b	

Enter gross amounts unless otherwise indicated

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Form **990-PF** (2018)

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

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?		Yes	No
a Transfers from the reporting foundation to a noncharitable exempt organization of			
(1) Cash.	1a(1)		No
(2) Other assets.	1a(2)		No
b Other transactions			
(1) Sales of assets to a noncharitable exempt organization.	1b(1)		No
(2) Purchases of assets from a noncharitable exempt organization.	1b(2)		No
(3) Rental of facilities, equipment, or other assets.	1b(3)		No
(4) Reimbursement arrangements.	1b(4)		No
(5) Loans or loan guarantees.	1b(5)		No
(6) Performance of services or membership or fundraising solicitations.	1b(6)		No
c Sharing of facilities, equipment, mailing lists, other assets, or paid employees.	1c		No
d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.			

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

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

b If "Yes," complete the following schedule

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

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

Sign Here	*****	2019-11-07	*****	May the IRS discuss this return with the preparer shown below? (see instr)? ☒ Yes ☐ No
	Signature of officer or trustee	Date	Title	

Paid Preparer Use Only	Print/Type preparer's name	Preparer's Signature	Date	Check if self-employed ☐	PTIN
	CATHERINE MACAULAY				P00178796
	Firm's name ▶ DAMITZ BROOKS NIGHTINGALE	Firm's EIN ▶ 77-0076647			
	Firm's address ▶ 200 EAST CARRILLO STREET SUITE 303 SANTA BARBARA, CA 93101				Phone no (805) 963-1837

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d			
List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 GOLDMAN SACHS #7660 HARDING		2017-01-01	2018-12-31
1 GOLDMAN SACHS #8452 EQUITIES & FIXED INCOME		2017-01-01	2018-12-31
GOLDMAN SACHS #8668		2017-01-01	2018-12-31
GOLDMAN SACHS #8718 CORPORATE FIXED INCOME		2017-01-01	2018-12-31
GOLDMAN SACHS #8726		2017-01-01	2018-12-31
GOLDMAN SACHS #8734		2017-01-01	2018-12-31
GOLDMAN SACHS #8742		2017-01-01	2018-12-31
MONTECITO BANK & TRUST #8459-00		2017-01-01	2018-12-31
MONTECITO BANK & TRUST #8459-01		2017-01-01	2018-12-31
NORTHERN TRUST #96747		2017-01-01	2018-12-31

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
88,145		84,832	3,313
920,607		905,137	15,470
448,826		449,290	-464
754,259		696,646	57,613
297,032		229,318	67,714
95,518		58,193	37,325
			0
1,397,056		1,243,277	153,779
147,967		153,582	-5,615
1,391,672		1,334,876	56,796

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(I) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			3,313
			15,470
			-464
			57,613
			67,714
			37,325
			0
			153,779
			-5,615
			56,796

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
NORTHERN TRUST #4747			2017-01-01	2018-12-31
1	NT HEDGE FUND PARTNERSHIP		2017-01-01	2018-12-31
	NT PRIVATE EQUITY PARTNERSHIP		2017-01-01	2018-12-31
	TERRAPIN PARTNERS OFFSHORE, LTD		2017-01-01	2018-12-31
	COST BASIS ADJUSTMENTS		2017-01-01	2018-12-31
	CAPITAL GAINS DIVIDENDS	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
773,180		741,688	31,492
41,391			41,391
185,054			185,054
1,943		1,943	0
		4,534	-4,534
80,549			80,549

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
			31,492
			41,391
			185,054
			0
			-4,534
			80,549

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

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
NANCY K POPENHAGEN	PRESIDENT 3 00	58,933	0	3,485
19 W CARRILLO STREET SANTA BARBARA, CA 93101				
DIANE K HAYES	VICE PRESIDENT 11 00	42,582	13,448	1,742
19 W CARRILLO STREET SANTA BARBARA, CA 93101				
CLAUDETTE SABIRON	SECRETARY 30 00	58,500	4,950	0
19 W CARRILLO STREET SANTA BARBARA, CA 93101				
CATHERINE MACAULAY	TREASURER 1 00	14,000	0	0
19 W CARRILLO STREET SANTA BARBARA, CA 93101				
RICHARD A NIGHTINGALE	CHIEF FINANCIAL OFFICER 1 00	14,000	0	0
19 W CARRILLO STREET SANTA BARBARA, CA 93101				

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ACADEMY OF HEALING ARTS FOR TEENS (AHA) 1209 DE LA VINA ST STE A SANTA BARBARA, CA 93101	NONE	PC	YOUTH SUPPORT SERVICES	10,000
ALANO CLUB OF SANTA BARBARA 235 E COTA ST SANTA BARBARA, CA 93101	NONE	PC	ALCOHOL AND DRUG RECOVERY SERVICES	178,152
ALEXANDER HOUSEPO BOX 23642 SANTA BARBARA, CA 93121	NONE	PC	COMMUNITY SUPPORT SERVICES	10,000
Total ► 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
AMERICAN HEART ASSOCIATION 212 W FIGUEROA ST SANTA BARBARA, CA 93101	NONE	PC	HUMAN HEALTH SERVICES	1,000
ANGELS FOSTER CARE OF SANTA BARBARA 3905 STATE ST STE 7 SANTA BARBARA, CA 93105	NONE	PC	YOUTH SUPPORT SERVICES	2,000
ASSISTANCE LEAGUE 1249 VERONICA SPRINGS RD SANTA BARBARA, CA 93105	NONE	PC	SCHOOL BELL PROGRAM	15,000
Total ► 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
BOYS & GIRLS CLUB OF LARIMER COUNTY 103 SMOKEY ST FORT COLLINS, CO 80525	NONE	PC	YOUTH SUPPORT SERVICES	10,000
CALM1236 CHAPALA ST SANTA BARBARA, CA 93101	NONE	PC	CHILD ABUSE TREATMENT AND PREVENTION	10,000
CANCER CENTER OF SANTA BARBARA 300 W PUEBLO ST SANTA BARBARA, CA 93105	NONE	PC	HUMAN HEALTH SERVICES	3,000
Total ► 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CASA COURT APPOINTED SPECIAL ADVOCATES 402 E GUTIERREZ ST SANTA BARBARA, CA 93101	NONE	PC	CHILD ABUSE TREATMENT AND PREVENTION	10,000
CASA SERENA1515 BATH ST SANTA BARBARA, CA 93101	NONE	PC	ALCOHOL AND DRUG RECOVERY SERVICES	30,250
CHILDREN'S MUSEUM OF SANTA BARBARA (MOXI) 125 STATE ST SANTA BARBARA, CA 93101	NONE	PC	EDUCATION	10,000
Total ► 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CITY OF GOODYEAR 190 N LITCHFIELD RD GOODYEAR, AZ 85338	NONE	PC	COMMUNITY SUPPORT SERVICES	10,000
COMMUNITY HOSPITAL HEALTH FOUNDATION PO BOX 1328 MCCOOK, NE 69001	NONE	PC	HUMAN HEALTH SERVICES	10,000
COMMUNITY KITCHEN816 CACIQUE ST SANTA BARBARA, CA 93103	NONE	PC	FAMILY SUPPORT SERVICES	3,000
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
COTTAGE REHAB HOSPITAL FOUNDATION 2415 DE LA VINA ST SANTA BARBARA, CA 93105	NONE	PC	HUMAN HEALTH SERVICES	10,000
COUNCIL ON ALCOHOLISM & DRUG ABUSE PO BOX 28 SANTA BARBARA, CA 93102	NONE	PC	ALCOHOL AND DRUG RECOVERY SERVICES	22,250
DOMESTIC VIOLENCE SOLUTIONS PO BOX 3782 SANTA BARBARA, CA 93103	NONE	PC	FAMILY SUPPORT SERVICES	10,000
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
DREAM FOUNDATION 1528 CHAPALA ST 304 SANTA BARBARA, CA 93101	NONE	PC	DREAMS FOR VETERANS	5,000
EASTSIDE BOYS & GIRLS CLUB 632 E CANON PERDIDO ST SANTA BARBARA, CA 93101	NONE	PC	YOUTH SUPPORT SERVICES	10,000
EATON SCHOOL DISTRICT 200 PARK AVE EATON, CO 80615	NONE	PC	EDUCATION	790
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ED THOMAS YMCA901 W E ST MCCOOK, NE 69001	NONE	PC	RECREATION AND SPORTS	10,000
ESTES PARK SCHOOL DISTRICT RE3 1605 BRODIE AVE ESTES PARK, CO 80517	NONE	PC	EDUCATION	3,910
FAMILY SERVICE AGENCY 123 W GUTIERREZ ST SANTA BARBARA, CA 93101	NONE	PC	FAMILY SUPPORT SERVICES	10,000
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
FOOD FROM THE HEARTPO BOX 3908 SANTA BARBARA, CA 93130	NONE	PC	FAMILY SUPPORT SERVICES	13,100
FOODBANK OF SANTA BARBARA 4554 HOLLISTER AVE SANTA BARBARA, CA 93110	NONE	PC	FAMILY SUPPORT SERVICES	25,000
FOUNDATION FOR SBCCCARE 721 CLIFF DR SANTA BARBARA, CA 93109	NONE	PC	EDUCATION	20,599
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GIRLS INCHOLLISTER AVE SANTA BARBARA, CA 93111	NONE	PC	YOUTH SUPPORT SERVICES	15,000
GREATER SANTA BARBARA ICE SKATING ASSOCIATION PO BOX 478 SANTA BARBARA, CA 93102	NONE	PC	RECREATION AND SPORTS	5,000
HARMONY FOUNDATION INC 1600 FISH HATCHERY RD ESTES PARK, CO 80517	NONE	PC	ALCOHOL AND DRUG RECOVERY SERVICES	17,800
Total ► 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HEARTS & HORSES 163 N COUNTY RD 29 LOVELAND, CO 80537	NONE	PC	DISABILITY SUPPORT SERVICES	10,000
HIGHLAND HIGH SCHOOL 2900 ROYAL SCOTS WAY BAKERSFIELD, CA 93306	NONE	PC	EDUCATION	4,778
HOSPICE OF SANTA BARBARA INC 520 W JUNIPERO ST SANTA BARBARA, CA 93105	NONE	PC	HUMAN HEALTH SERVICES	11,350
Total ► 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
HOUSE OF NEIGHBORLY SERVICE 565 N CLEVELAND AVE LOVELAND, CO 80537	NONE	PC	FAMILY SUPPORT SERVICES	13,200
JUSTICE HIGH SCHOOL 805 EXCALIBUR ST LAFAYETTE, CO 80026	NONE	PC	EDUCATION	4,875
KIDS PACK HOPE AND CHARITY FOR CHILDREN 3725 FRONTAGE RD NORTH STE 1 LAKELAND, FL 33810	NONE	PC	YOUTH SERVICES	3,000
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
LOVELAND FOOD BANK 245 S MADISON AVE LOVELAND, CO 80537	NONE	PC	FAMILY SUPPORT SERVICES	70,000
MCCOOK COLLEGE FOUNDATION 1205 E 3RD ST MCCOOK, NE 69001	NONE	PC	EDUCATION	10,000
MEALS ON WHEELS LOVELAND & BERTHOUD 535 N DOUGLAS AVE LOVELAND, CO 80537	NONE	PC	FAMILY SUPPORT SERVICES	20,000
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MENTAL WELLNESS CENTER 617 GARDEN ST SANTA BARBARA, CA 93101	NONE	PC	HUMAN HEALTH SERVICES	10,000
NATURAL DISASTER SEARCH DOG FOUNDATION 501 E OJAI AVE OJAI, CA 93023	NONE	PC	DISASTER SUPPORT SERVICES	25,000
NEW HOUSE2434 BATH ST SANTA BARBARA, CA 93105	NONE	PC	ALCOHOL AND DRUG RECOVERY SERVICES	28,725
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PACIFIC PRIDE FOUNDATION 608 ANACAPA ST SANTA BARBARA, CA 93101	NONE	PC	COMMUNITY SUPPORT SERVICES	10,000
PAGE YOUTH CENTER 4540 HOLLISTER AVE SANTA BARBARA, CA 93110	NONE	PC	RECREATION AND SPORTS	15,000
PATHPOINT315 W HALEY ST 102 SANTA BARBARA, CA 93101	NONE	PC	DISABILITY SUPPORT SERVICES	10,000
Total ► 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PATHWAYS HOSPICE585 N MARY AVE SUNNYVALE, CA 94085	NONE	PC	HUMAN HEALTH SERVICES	10,000
PINNACLE CHARTER SCHOOL 1001 W 84TH AVE DENVER, CO 80260	NONE	PC	EDUCATION	5,860
POLICE ACTION LEAGUE (PAL) 222 E ANAPAMU STE 24 SANTA BARBARA, CA 93190	NONE	PC	YOUTH SUPPORT SERVICES	10,000
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PROJECT SELF-SUFFICIENCY 2001 S SHIELD ST D-203 FORT COLLINS, CO 80526	NONE	PC	FAMILY SUPPORT SERVICES	10,000
RESURRECTION CHRISTIAN SCHOOL 6508 E CROSS ROADS BLVD LOVELAND, CO 80538	NONE	PC	EDUCATION	4,105
ROCKY MOUNTAIN LUTHERAN HIGH SCHOOL 2300 W 90TH AVE DENVER, CO 80260	NONE	PC	EDUCATION	390
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SALVATION ARMYPO BOX 6190 SANTA BARBARA, CA 93160	NONE	PC	HOMELESS SUPPORT SERVICES	15,000
SALVATION ARMY OF LOVELAND 840 N LINCOLN AVE LOVELAND, CO 80537	NONE	PC	GENERAL	10,000
SANTA BARBARA ATHLETIC ROUND TABLE PO BOX 3813 SANTA BARBARA, CA 93130	NONE	PC	RECREATION AND SPORTS	2,000
Total ► 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SANTA BARBARA CITY COLLEGE PROMISE 721 CLIFF DR SANTA BARBARA, CA 93109	NONE	PC	EDUCATION	50,000
SANTA BARBARA COTTAGE HOSPITAL FOUNDATION PO BOX 689 SANTA BARBARA, CA 93102	NONE	PC	HUMAN HEALTH SERVICES	50,000
SANTA BARBARA INTERNATIONAL FILM FESTIVAL 1528 CHAPALA ST 203 SANTA BARBARA, CA 93101	NONE	PC	ARTS	25,000
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SANTA BARBARA MUSEUM OF NATURAL HISTORY 2559 PUESTA DEL SOL SANTA BARBARA, CA 93105	NONE	PC	EDUCATION	10,000
SANTA BARBARA NEIGHBORHOOD CLINICS 970 EMBARCADERO DEL MAR ISLA VISTA, CA 93117	NONE	PC	HUMAN HEALTH SERVICES	30,000
SANTA BARBARA POLICE OFFICERS ASSOCIATION PO BOX 687 SANTA BARBARA, CA 93102	NONE	PC	COMMUNITY SUPPORT SERVICES	500
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
SANTA BARBARA RESCUE MISSION 535 E YANONALI ST SANTA BARBARA, CA 93103	NONE	PC	ALCOHOL AND DRUG RECOVERY SERVICES	71,000
SANTA BARBARA SCHOOL OF SQUASH 1530 CHAPALA ST STE B SANTA BARBARA, CA 93101	NONE	PC	RECREATION AND SPORTS	10,000
SANTA BARBARA YMCA 36 HITCHCOCK WAY SANTA BARBARA, CA 93105	NONE	PC	RECREATION AND SPORTS	10,000
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SANTA BARBARA ZOO500 NINOS DR SANTA BARBARA, CA 93103	NONE	PC	EDUCATION	10,000
SANTA COPS OF LARIMER COUNTY PO BOX 580 FORT COLLINS, CO 80522	NONE	PC	YOUTH SUPPORT SERVICES	2,500
SCHOLARSHIP FOUNDATION OF SANTA BARBARA PO BOX 3620 SANTA BARBARA, CA 93130	NONE	PC	EDUCATION	30,000
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
STORYTELLER2115 STATE ST SANTA BARBARA, CA 93105	NONE	PC	EDUCATION	10,000
TEDDY BEAR CANCER FOUNDATION 133 E DE LA GUERRA ST 163 SANTA BARBARA, CA 93101	NONE	PC	HUMAN HEALTH SERVICES	14,500
THE FIRST TEE CENTRAL COAST PO BOX 1611 SUMMERLAND, CA 93067	NONE	PC	RECREATION AND SPORTS	15,000
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
THOMPSON R-2J SCHOOL DISTRICT 800 S TAFT AVE LOVELAND, CO 80537	NONE	PC	EDUCATION	25,000
TRANSITION HOUSE425 E COTA ST SANTA BARBARA, CA 93101	NONE	PC	FAMILY SUPPORT SERVICES	19,000
UCSB FOUNDATION 1210 CHEADLE HALL SANTA BARBARA, CA 93106	NONE	PC	GUARDIAN SCHOLARS PROGRAM	10,000
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
UNITED BOYS & GIRLS CLUB OF SANTA BARBARA 5701 HOLISTER AVE GOLETA, CA 93116	NONE	PC	YOUTH SUPPORT SERVICES	15,000
UNITED WAY OF SANTA BARBARA 320 E GUTIERREZ ST SANTA BARBARA, CA 93101	NONE	PC	COMMUNITY SUPPORT SERVICES	28,000
UNITY SHOPPE1236 CHAPALA ST SANTA BARBARA, CA 93101	NONE	PC	FAMILY SUPPORT SERVICES	45,000
Total ► 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
VISITING NURSE & HOSPICE CARE 220 E CANON PERDIDO ST SANTA BARBARA, CA 93101	NONE	PC	HUMAN HEALTH SERVICES	17,500
WELD COUNTY RE-1 SCHOOL DISTRICT 14827 WELD COUNTY RD 42 GILCREST, CO 80623	NONE	PC	EDUCATION	14,040
WELD COUNTY RE-3J SCHOOL DISTRICT 99 W BROADWAY ST KEENESBURG, CO 80643	NONE	PC	EDUCATION	6,835
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WELD COUNTY RE-8 SCHOOL DISTRICT 301 REYNOLDS ST FORT LUPTON, CO 80621	NONE	PC	EDUCATION	14,430
WELD COUNTY SCHOOL DISTRICT RE-7 501 CLARK ST KERSEY, CO 80644	NONE	PC	EDUCATION	4,485
WINDSOR MIDDLE SCHOOL 1100 MAIN ST WINDSOR, CO 80550	NONE	PC	EDUCATION	878
Total ► 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
WINDSOR SCHOOL DISTRICT 1020 MAIN ST WINDSOR, CO 80550	NONE	PC	EDUCATION	878
YOUNG LIFE123 W PADRE ST 3 SANTA BARBARA, CA 93105	NONE	PC	YOUTH SUPPORT SERVICES	16,000
YOUTH AND FAMILY SERVICES YMCA 105 E CARRILLO ST SANTA BARBARA, CA 93101	NONE	PC	FAMILY PROGRAMS	10,000
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
BISHOP GARCIA DIEGO HIGH SCHOOL 4000 LA COLINA RD SANTA BARBARA, CA 93110	NONE	PC	EDUCATION	2,000
CARE4PAWSPO BOX 60524 SANTA BARBARA, CA 93160	NONE	PC	ANIMAL WELFARE	2,500
ORGANIC SOUP KITCHEN 315 MEIGS RD STE A 369 SANTA BARBARA, CA 93109	NONE	PC	COMMUNITY SUPPORT SERVICES	10,000
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SALT RIVER WILD HORSE MANAGEMENT 4610 N 68TH ST UNIT 477 SCOTTSDALE, AZ 85251	NONE	PC	ANIMAL WELFARE	2,500
SANTA BARBARA COUNTY SEARCH AND RESCUE PO BOX 6602 SANTA BARBARA, CA 93160	NONE	PC	DISASTER SUPPORT SERVICES	10,000
STARGATE SCHOOL 14530 WASHINGTON ST THORNTON, CO 80023	NONE	PC	EDUCATION	1,560
Total ▶ 3a				1,408,240

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
VITAMIN ANGELS 111 W MICHELTORENA ST 300 SANTA BARBARA, CA 93140	NONE	PC	HUMAN HEALTH SERVICES	5,000
YOUTH INTERACTIVE1219 STATE ST SANTA BARBARA, CA 93101	NONE	PC	YOUTH SUPPORT SERVICES	5,000
Total ▶ 3a				1,408,240

TY 2018 Accounting Fees Schedule**Name:** VOLENTINE FAMILY FOUNDATION**EIN:** 77-0203235

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
DAMITZ, BROOKS, NIGTHINGALE, ET AL	57,298	42,974		14,325

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

TY 2018 Depreciation Schedule

Name: VOLENTINE FAMILY FOUNDATION

EIN: 77-0203235

Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
BUILDING	2001-12-20	752,332	284,691	SL	39 000000000000	19,291	0		
LAND	2001-12-20	112,418		L		0	0		
FMV IN EXCESS OF BASIS	2001-12-20	60,000		L		0	0		
FOUNDATION OFFICE CHAIRS	2004-02-17	3,507	3,507	200DB	7 000000000000	0	0		
CONFERENCE TABLE	2004-02-24	4,254	4,254	200DB	7 000000000000	0	0		
OFFICE FURNITURE	2005-10-27	2,353	2,287	200DB	7 000000000000	0	0		
OFFICE FURNITURE	2006-04-30	1,540	1,540	200DB	7 000000000000	0	0		
HP LASER JET P3015	2011-01-03	795	795	SL	5 000000000000	0	0		
HP LASER JET P3015	2011-06-30	630	630	SL	5 000000000000	0	0		
BUILDING REMODEL	2012-07-01	892,939	125,928	SL	39 000000000000	22,896	0		
DESK	2012-01-25	10,364	10,364	SL	5 000000000000	0	0		
BUILDING REMODEL	2013-07-01	30,678	3,541	SL	39 000000000000	787	0		
REMOVABLE WALL	2013-07-01	19,855	5,958	SL	15 000000000000	1,324	0		
BUILDING REMODEL	2015-07-01	51,305	3,290	SL	39 000000000000	1,316	0		
BUILDING	2001-12-20	335,168	144,018	SL	39 000000000000	8,594	0		
LAND	2001-12-20	50,082		L		0	0		
ELECTRICAL RECONFIGURATION	2014-09-30	5,512	458	SL	39 000000000000	141	0		
DELL OFFICE COMPUTER	2014-12-15	2,594	1,600	SL	5 000000000000	519	0		
COPIER	2014-06-06	1,101	788	SL	5 000000000000	220	0		
KEYLESS LOCKING SYSTEM	2016-07-12	8,334	834	SL	15 000000000000	556	0		

Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
BUILDING REMODEL	2016-11-09	19,546	585	SL	39 00000000000000	501	0		
HID ACCESS CONTROL SYSTEM	2018-04-05	10,390		SL	15 00000000000000	520	0		
CARPET	2018-03-19	2,560		SL	5 00000000000000	384	0		
MAILBOX	2018-11-29	10,938		SL	5 00000000000000	182	0		

TY 2018 General Explanation Attachment**Name:** VOLENTINE FAMILY FOUNDATION**EIN:** 77-0203235**General Explanation Attachment**

Identifier	Return Reference	Explanation	
1	PART VII-B, LINE 1A(3)	FORM 990- PF	THE FOUNDATION UTILIZES THE SERVICES OF THE CPA FIRM DAMITZ,BROOKS, NIGHTINGALE, TURNER & MORRISSET FOR TAX RETURNAND ACCOUNTING SERVICES, MRS MACAULAY IS A PARTNEROF THE ACCOUNTING FIRM AND A TREASURER OF THE FOUNDATION FOR THESE SERVICES THE FOUNDATION PAYS THE USUAL ANDCUSTOMARY FEES AS BILLED TO IT BY THIS ENTITY

TY 2018 Investments - Land Schedule**Name:** VOLENTINE FAMILY FOUNDATION**EIN:** 77-0203235

Category/ Item	Cost/Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
BUILDING	565,500	237,428	328,072	484,184
LAND	115,700	0	115,700	170,755
REMODEL	571,369	88,008	483,361	713,367
FURNITURE AND FIXTURES	40,625	7,847	32,778	32,778

TY 2018 Investments - Other Schedule

Name: VOLENTINE FAMILY FOUNDATION

EIN: 77-0203235

Investments Other Schedule 2

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
TRITON PACIFIC	AT COST	28,369	28,369
LANX OFFSHORE PARTNERS II	AT COST	1,812	1,812
NORTHERN TRUST #797	AT COST	2,941,983	2,861,200
NORTHERN TRUST DIVERSIFIED HEDGE FUND	AT COST	4,705,318	4,350,759
NORTHERN TRUST PRIVATE EQUITY	AT COST	329,019	783,641
NORTHER TRUST PRIVATE EQUITY CORE FUND	AT COST	1,024,901	1,269,622
MINERAL INTEREST - WATERFLOOD	AT COST	10,025	10,025
MINERAL INTEREST - ACKMAN	AT COST	360	360
GOLDMAN SACHS #7660	AT COST	533,801	558,931
GOLDMAN SACHS #8452	AT COST	5,010,072	5,069,517
GOLDMAN SACHS #8718	AT COST	2,930,232	2,855,118
GOLDMAN SACHS #8726	AT COST	379,378	392,319
GOLDMAN SACHS #8734	AT COST	843,159	970,009
MONTECITO BANK & TRUST #8459-00	AT COST	2,998,187	3,313,063
MONTECITO BANK & TRUST #8459-01	AT COST	1,472,221	1,440,246

**TY 2018 Land, Etc.
Schedule****Name:** VOLENTINE FAMILY FOUNDATION**EIN:** 77-0203235

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
FURNITURE AND FIXTURES	38,584	28,415	10,169	10,169
REMODEL	428,611	71,435	357,176	527,137
BUILDING	522,000	219,166	302,834	446,937
LAND	106,800	0	106,800	157,620

TY 2018 Other Assets Schedule

Name: VOLENTINE FAMILY FOUNDATION

EIN: 77-0203235

Other Assets Schedule

Description	Beginning of Year - Book Value	End of Year - Book Value	End of Year - Fair Market Value
LEASE COMMISSIONS	235	8,442	8,442

TY 2018 Other Expenses Schedule**Name:** VOLENTINE FAMILY FOUNDATION**EIN:** 77-0203235**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INSURANCE	20,054	10,027		10,027
AUTO EXPENSE	1,174	587		587
MISCELLANEOUS	2,924	1,462		1,462
OFFICE EXPENSE	5,022	2,510		2,511
FINANCE CHARGE	33	33		0
RENTAL EXPENSES	28,242	28,242		0
PASS-THRU PARTNERSHIP EXPENSES (NON-DEDUCTIBLE)	384	0		0

TY 2018 Other Income Schedule

Name: VOLENTINE FAMILY FOUNDATION

EIN: 77-0203235

Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
PARTNERSHIP UNRELATED BUSINESS INCOME	16,948	0	16,948
ROYALTY INCOME - MINERAL INTERESTS	5,075	5,075	5,075
ORDINARY INCOME FROM PASSTHROUGHS	1,512	1,512	1,512
IRS REFUND	4,000	0	4,000
PARTNERSHIP PASS THROUGH INTEREST EXPENSE	-5,792	-5,792	-5,792

TY 2018 Other Liabilities Schedule**Name:** VOLENTINE FAMILY FOUNDATION**EIN:** 77-0203235

Description	Beginning of Year - Book Value	End of Year - Book Value
CREDIT CARD PAYABLE	1,697	359
PAYROLL TAXES PAYABLE	3,886	5,144
SECURITY DEPOSITS	5,275	3,000

TY 2018 Other Professional Fees Schedule**Name:** VOLENTINE FAMILY FOUNDATION**EIN:** 77-0203235

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
INVESTMENT ADVISOR FEES	256,226	256,226		0
CONSULTING	7,633	7,289		344

TY 2018 Taxes Schedule**Name:** VOLENTINE FAMILY FOUNDATION**EIN:** 77-0203235

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FILING FEES	160	0		160
PAYROLL TAXES	9,660	4,830		4,830
REAL ESTATE TAXES	9,300	4,650		4,650
FOREIGN TAXES ON INVESTMENT INCOME	17,776	17,776		0
MINERAL TAX	334	334		0