**Return of Private Foundation** Form 990-PF 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 Department of the Treasury Internal Revenue Service ► Go to www irs gov/Form990PF for instructions and the latest information 2019 For calendar year 2018 or tax year beginning JUL 1, 2018 JUN , and ending 30. Name of foundation A Employer identification number WINTEMUTE FAMILY FOUNDATION 45-6177617 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (858)558-9200 P.O. BOX 1711 City or town, state or province, country, and ZIP or foreign postal code C if exemption application is pending, check here MEDFORD, OR 97501 G Check all that apply Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method F If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 231,767. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income Contributions, gifts, grants, etc., received 3.719 N/A 2 Check X if the foundation is not required to attach Sch. B 3 Interest on savings and temporary cash investments 5,850. 5,850. STATEMENT 4 Dividends and interest from securities 5a Gross rents **b** Net rental income or (loss) 79,973 62 Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 252,336. 79,973. RECEIVED 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain (:) 9 Income modifications 10a Gross sales less returns and allowances NOV 1 8 2019 b Less Cost of goods sold c Gross profit or (loss) OUDEN IT 11 Other income 89,542 85,823 12 Total Add lines 1 through 11 0. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 2,500 STMT 2 250. 2,250. b Accounting fees c Other professional fees 17 Interest 203. · 0 • 0. 18 Taxes STMT 3 19 Depreciation and depletion 20 Occupancy 21 Travet-conferences, and meetings 22 Printing and publications 1,948. 628. 23 Other expenses STMT 4 2,576. 24 Total operating and administrative 2,878. 2,198. 5,279. expenses. Add lines 13 through 23

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions

a Excess of revenue over expenses and disbursements

b Net investment income (if negative, enter -0-)

c Adjusted net income (if negative, enter -0-)

Form **990-PF** (2018)

80,000.

85,279

4,263.

N/A

2,198

83,625.

Confidutions, gifts, grants paid
 Total expenses and disbursements

Add Mines 24 and 25

27 Subtract line 26 from line 12

80,000.

82,878.

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		H.   Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	of year (c) Fair Market Value		
		column should be for end-of-year amounts only	(a) Book Value	(b) Book Value			
	1	Cash - non-interest-bearing					
	2	Savings and temporary cash investments	9,945.	3,235.	3,235.		
	3	Accounts receivable	The state of the s		्र के विशेषका मुक्ति है । विशेषका कर्		
	ļ	Less allowance for doubtful accounts ▶			_		
	4	Pledges receivable ►	SELECTION OF THE SECOND SECOND SELECTION OF THE SECOND SECOND SECOND SECOND SELECTION OF THE SECOND	Carrier C Mills of the Carrier Communication	) 161/681 - 151/11 4 15		
		Less: allowance for doubtful accounts			-		
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons					
	7	Other notes and loans receivable					
		Less allowance for doubtful accounts					
22	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
Ä	l	Investments - U S and state government obligations					
		Investments - corporate stock STMT 5	192,191.	203,164.	228,532.		
	J	Investments - corporate bonds		-			
	۱.,	Investments - land, buildings, and equipment basis					
		Less accumulated depreciation		<del></del>			
	12	Investments - mortgage loans					
	1	Investments - other	<u> </u>				
	1	Land, buildings, and equipment basis	-	<del></del>			
		Less accumulated degreciation		<u> </u>			
	15	Other assets (describe ► )					
	ı	Total assets (to be completed by all filers - see the					
	"	instructions Also, see page 1, item I)	202,136.	206,399.	231,767.		
_	17	Accounts payable and accrued expenses					
	l	Grants payable					
S	19	Deferred revenue					
Liabilities	۱	Loans from officers, directors, trustees, and other disqualified persons					
ğ	21	Mortgages and other notes payable					
Ë	ı	Other liabilities (describe )					
	23	Total liabilities (add lines 17 through 22)	0.	0.			
-	-	Foundations that follow SFAS 117, check here		- <del></del>			
		and complete lines 24 through 26, and lines 30 and 31					
ës	24	Unrestricted					
ances	1	Temporarily restricted					
Bal		Permanently restricted		<del>-</del>			
P		Foundations that do not follow SFAS 117, check here		<del></del>			
교		and complete lines 27 through 31.					
ŏ	27	Capital stock, trust principal, or current funds	202,136.	206,399.			
Net Assets or Fund Bal	28	Paid-in or capital surplus, or land, bldg, and equipment fund	0.	0.			
Ass	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.			
e		Total net assets or fund balances	202,136.	206,399.			
_	-			<u> </u>	-		
_	31	Total liabilities and net assets/fund balances	202,136.	206,399.			
P	art	III Analysis of Changes in Net Assets or Fund B	alances				
<del>-</del> 1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line	30	<del></del>	-		
		st agree with end-of-year figure reported on prior year's return)		1	202,136.		
		ramount from Part I, line 27a		2	4,263.		
		r increases not included in line 2 (stemize)		3	0.		
		lines 1, 2, and 3		4	206,399.		
		eases not included in line 2 (itemize)		5	0.		
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30	6	206,399.		
_			V-11		Form <b>990-PF</b> (2018)		

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Part IV   Capital Gains and	d Losses for Tax on Ir	nvestmen	t Income					<u> </u>	
(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, or common stock, 200 shs. MLC Co.)			(b) How acquired P - Purchase D - Donation			acquired day, yr )	(d) Date sold (mo , day, yr )		
1a PUBLICLY TRADED		<del></del>			00.10.10.11	VAR I	OUS	VARIOUS	
b CAPITAL GAINS DI	VIDENDS				-				
С									
<u>d</u>		_		ļ					
<u>e</u>	//\ D_= = -t_= = -t = = -t	T (.) 0		١		(5)	2 (1	<u></u>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				Gain or (loss is (f) minus		
a 250,842.		<del> </del>	172,36	3.				78,479.	
b 1,494.		<u> </u>				_		1,494.	
C				Ì					
đ									
e		<u> </u>							
Complete only for assets showing ga	<del></del>	т					Col (h) gain not less tha		
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (1) col. (j), if any		C.		(from col		
a								78,479.	
<u>b</u>								1,494.	
С						_			
d	<del></del>			$\rightarrow$					
<u>e</u>		L		$\rightarrow$	<del>-</del>				
2 Capital gain net income or (net capital	loss) { If gain, also enter loss}			}	2			79,973.	
3 Net short-term capital gain or (loss) a	`			(			1		
If gain, also enter in Part I, line 8, colu		(0)		)			4		
If (loss), enter -0- in Part I, line 8  Part V   Qualification Und	Cookies 4040/s\/s=	. Darker	Towar Net		3		N/A	·	
<u> </u>						come		<u></u>	
(For optional use by domestic private fou	ndations subject to the section 4	494U(a) tax on	i net investment in	icome	)				
If section 4940(d)(2) applies, leave this p	art blank.								
Was the foundation liable for the section	4942 tax on the distributable am	nount of any ve	ear in the base per	rıod?				Yes X No	
If "Yes," the foundation doesn't qualify un			•						
1 Enter the appropriate amount in each	column for each year, see the ii	nstructions be	fore making any e	ntries		_			
(a) Base period years	(b)	4. b. 4	Naturalisa at a a	(c) Net value of noncharitable-use assets			(d) Distribution ratio		
Calendar year (or tax year beginning in			Net value of no	nichar			(col (b) div	nded by col. (c))	
2017		2,612. 1,710.			229,24			.316745	
2016		1,710.			307,13			.168362	
2013		1,710.			369,69			.139871	
2013		1,838.	-		406,22	6.		.127609	
			·	-	<u> </u>			<u></u>	
2 Total of line 1, column (d)						2	ļ	.936992	
3 Average distribution ratio for the 5-ye	ar base period - divide the total (	on line 2 by 5 (	0, or by the numb	er of y	ears				
the foundation has been in existence i	f less than 5 years					3		.187398	
								225 244	
4 Enter the net value of noncharitable-u	se assets for 2018 from Part X,	line 5				4	<b>├</b>	226,241.	
						_	ļ	42 207	
5 Multiply line 4 by line 3						5	<del> </del>	42,397.	
6 Enter 19/ of not investment income /1	9/ of Dart Lline 27h)					6		836.	
6 Enter 1% of net investment income (1	70 OF F BILL, IIIIG 27 U)					<del>                                   </del>	<del>                                     </del>		
7 Add lines 5 and 6						7		43,233.	
- ਜ਼ਿਲ੍ਹੇ ਸਮਝਦ ਦੇ <b>ਦਿੱਤਿ ਦ</b>						<u> </u>			
8 Enter qualifying distributions from Pa	t XII, line 4					8		82,878.	
If line 8 is equal to or greater than line See the Part VI instructions	7, check the box in Part VI, line	1b, and comp	olete that part usin	g a 19	% tax rate.				

Form 990-PF (2018) WINTEMUTE FAMILY FOUNDATION 45-6177		Page 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ctions)
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%		836.
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 foundations only, others, enter -0-)		<u> </u>
3 Add lines 1 and 2		836.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0.
5 Tax based on investment income Subtract line 4 from line 3. If zero or less, enter -0-		836.
6 Credits/Payments		1
a 2018 estimated tax payments and 2017 overpayment credited to 2018 6a 0.		
b Exempt foreign organizations - tax withheld at source 6b 0.		}
c Tax paid with application for extension of time to file (Form 8868)		
d Backup withholding erroneously withheld 6d 0.		
7 Total credits and payments Add lines 6a through 6d		0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		6.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		842.
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		
11 Enter the amount of line 10 to be Credited to 2019 estimated tax Refunded 11		
Part VII-A Statements Regarding Activities	<del></del>	- 1
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in	$\vdash$	Yes No
any political campaign?	1a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b	X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	1 1	
distributed by the foundation in connection with the activities.		
c Did the foundation file Form 1120-POL for this year?	10	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	1 1	
(1) On the foundation $\blacktriangleright$ \$ 0 . (2) On foundation managers $\blacktriangleright$ \$ 0 .		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	1 1	
managers. ► \$ O .	<u>  </u>	
2 Has the foundation engaged in any activities that have not previously been reported 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 governing instrument, articles of incorporation, or		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?  b If "Yes," has it filed a tax return on Form 990-T for this year?  N/A	4a	<del></del>
·	4b 5	X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	-	<del>-   ^-</del> 1
If "Yes," attach the statement required by General Instruction T		
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.	1 1	
<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law</li> </ul>		
remain in the governing instrument?	6	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	<u>X</u>
This the foundation have at least \$5,000 in assets at any time during the year? If Tes, complete Fart II, cor (c), and Fart Av	<del>  '  </del>	<del>^</del>
8a Enter the states to which the foundation reports or with which it is registered. See instructions.		
OR	1 1	] ]
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? If "No," attach explanation	8b	X
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	<del>  ""  </del>	^
year 2018 or the tax year beginning in 2018? See the instructions for Part XIV If "Yes," complete Part XIV	9	$-\frac{1}{x}$
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	$\frac{1}{x}$
		- <b>PF</b> (2018)

X

3ь

4a

46

N/A

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,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2018 )

had not been removed from jeopardy before the first day of the tax year beginning in 2018?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

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WINTEMUTE FAMILY FOUNDATION

Part VII-B	Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)				
5a During the	year, did the foundation pay or incur any amount to				Ye	s No		
(1) Carry o	on propaganda, or otherwise attempt to influence legislation (secti	on 4945(e))?	Y	es 🗶 No 🖟	*	[		
(2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly,								
any voter registration drive?								
(3) Provide a grant to an individual for travel, study, or other similar purposes?								
(4) Provide a grant to an organization other than a charitable, etc., organization described in section								
4945(d)(4)(A)? See instructions Yes X No								
(5) Provid	e for any purpose other than religious, charitable, scientific, literar	y, or educational purposes, or f			·	. # J = # J		
•	the prevention of cruelty to children or animals?							
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								
Organizatio	ns relying on a current notice regarding disaster assistance, check	c here		▶□		-		
	er is "Yes" to question 5a(4), does the foundation claim exemption		. —		_  _			
expenditure	e responsibility for the grant?	N	I/A L Y	es L No	.   ' -	- I		
•	ach the statement required by Regulations section 53 4945-5(d)				" f = .	_ # _ #		
6a Did the fou	ndation, during the year, receive any funds, directly or indirectly, to	o pay premiums on			1			
•	benefit contract?		Y	es X No				
<b>b</b> Did the fou	ndation, during the year, pay premiums, directly or indirectly, on a	personal benefit contract?			6b	X		
	b, file Form 8870.	_		TT		- i '		
,	during the tax year, was the foundation a party to a prohibited tax		Y	es X No		<del>   </del>		
	the foundation receive any proceeds or have any net income attri			N/A	7b	+ + +		
	dation subject to the section 4960 tax on payment(s) of more than	\$1,000,000 in remuneration or		(TT)		1		
	achute payment(s) during the year?			es X No	=			
Part VIII	Information About Officers, Directors, Trus Paid Employees, and Contractors	itees, Foundation Ma	inagers, Highly	y				
1 List all offu	cers, directors, trustees, and foundation managers and	their compensation	<u>.                                    </u>					
- List all ollin	cers, directors, a distees, and foundation managers and		(c) Compensation	(d) Contributions to	(e)	xoense		
	(a) Name and address	(b) Title, and average hours per week devoted	`(If not paid,	(d) Contributions to employee benefit plans and deferred	accou	Expense int, other wances		
		to position	enter -0-)	compensation	allo	wances		
<del>-</del>		4						
SEE STA	rement 6	$\dashv$	0.	Ι ο.		0.		
SEE SIA	TEMENT 0				<u>'                                    </u>			
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		-						
	· · · · · · · · · · · · · · · · · · ·	-						
2 Compensa	tion of five highest-paid employees (other than those ii	ncluded on line 1). If none,	enter "NONE."	L	1			
		(b) Title, and average		(d) Contributions to employee benefit plans	(e)	xpense		
(a) Nar	ne and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	1 40000	unt, other wances		
NO	ONE		<u> </u>	oompondaon.				
		┪			İ			
		-			1			
		1						
-		_						
		1						
		7		1				
Total number o	f other employees paid over \$50,000			<b></b>		0		
			<del></del>	Forn	1990-F	<b>PF</b> (2018)		

Form 990-PF (2018) WINTEMUTE FAMILY FOUNDATION	45-	6177617 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundary Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	r "NONE."	<del></del>
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
		<del></del>
Total number of others receiving over \$50,000 for professional services	I	<b>&gt;</b> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers pro	tical information such as the duced, etc	Expenses
1 N/A		
2		
3		
4		
Part IX-B Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on	lines 1 and 2	Amount
1 N/A	imos vara E	7,11100111
	<del> </del>	l
2		
All other program-related investments. See instructions		
3		l
	-	1
Total. Add lines 1 through 3		0.

Par	Minimum Investment Return (All domestic foundations	must complete this pa	rt Foreign foun	dations, see	instructions)
1 Fa	air market value of assets not used (or held for use) directly in carrying out charita	ble, etc , purposes			
a A	verage monthly fair market value of securities			1a	215,150. 14,536.
bΑ	verage of monthly cash balances			1b	14,536.
c Fa	air market value of all other assets			1c	
d T	otal (add lines 1a, b, and c)			1d	229,686.
e R	eduction claimed for blockage or other factors reported on lines 1a and		Ţ		
	c (attach detailed explanation)	1e	0.		
2 A	equisition indebtedness applicable to line 1 assets			2	0.
<b>3</b> S	ubtract line 2 from line 1d			3	229,686.
4 C	ash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amou	nt, see instructions)		4	3,445.
	et value of noncharitable-use assets Subtract line 4 from line 3. Enter here and		ſ	5	226,241.
	linimum investment return. Enter 5% of line 5		6	11,312.	
Par	t XII Distributable Amount (see instructions) (Section 4942(j)(3)	and (j)(5) private operatin	foundations and	certain	
	foreign organizations, check here 🕨 🔛 and do not complete this pai				
1 N	Inimum investment return from Part X, line 6			1	11,312.
2a T	ax on investment income for 2018 from Part VI, line 5	2a	836.		
<b>b</b> Ir	come tax for 2018 (This does not include the tax from Part VI)	2b			
сА	dd lines 2a and 2b			2c	836.
3 D	istributable amount before adjustments. Subtract line 2c from line 1		[	3	10,476.
4 R	ecoveries of amounts treated as qualifying distributions		[	4	0.
5 A	dd lines 3 and 4			5	10,476.
6 D	eduction from distributable amount (see instructions)		[	6	0.
	istributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Pa	rt XIII, line 1		7	10,476.
	Qualifying Distributions (see instructions)				
	mounts paid (including administrative expenses) to accomplish charitable, etc., pi	urposes.			02 070
	xpenses, contributions, gifts, etc total from Part I, column (d), line 26			1a	82,878.
	rogram-related investments - total from Part IX-B		1	1b	0.
	mounts paid to acquire assets used (or held for use) directly in carrying out chari	table, etc , purposes	1	2	
	mounts set aside for specific charitable projects that satisfy the.		-		
	uitability test (prior IRS approval required)			3a	
	ash distribution test (attach the required schedule)		<u> </u>	3b	00 050
	ualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8,			4	82,878.
5 F	oundations that qualify under section 4940(e) for the reduced rate of tax on net in	vestment			000
	come. Enter 1% of Part I, line 27b		ļ	5	836.
	djusted qualifying distributions. Subtract line 5 from line 4		Į	6	82,042.
N	lote. The amount on line 6 will be used in Part V, column (b), in subsequent years 4940(e) reduction of tax in those years.	when calculating whether	the foundation q	ualifies for the	section

## 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,	00.900			
line 7				10,476.
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only			0.	
b Total for prior years				
, ,		0.		
3 Excess distributions carryover, if any, to 2018			-	_
a From 201331,722.				
b From 2014 33,367.				
c From 2015 36,454.				
dFrom 2016 37,893.				
eFrom 2017 61,476.		" •		each the extended
f Total of lines 3a through e	200,912.			
4 Qualifying distributions for 2018 from				
Part XII, line 4 ►\$ 82,878.			_	
a Applied to 2017, but not more than line 2a			0.	·
<b>b</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				10,476.
e Remaining amount distributed out of corpus	72,402.			
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:	ļ			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	273,314.			
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 instr			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.			·
8 Excess distributions carryover from 2013				
not applied on line 5 or line 7	31,722.			
9 Excess distributions carryover to 2019				
Subtract lines 7 and 8 from line 6a	241,592.			
10 Analysis of line 9	j			•
a Excess from 2014 33, 367.				
b Excess from 2015 36, 454.				
c Excess from 2016 37,893.				
dExcess from 2017 61,476.				
e Excess from 2018 72,402.	<u></u>			Form <b>990. DE</b> (2018)

Part XV Supplementary Informatio				
3 Grants and Contributions Paid During the		т	<del></del>	
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient		
LOGGERHEAD MARINELIFE CENTER INC.	NONE	PUBLIC	GENERAL	
14200 US HIGHWAY ONE				
TUNO BEACH, FL 33408	<del></del>			5,000
NEW VENTURE FUND	, NONE	PUBLIC	GENERAL	
201 CONNECTICUT AVE. NW, SUITE 300	,,,,,,,			
WASHINGTON, DC 20036			<u> </u>	10,000
RIDE FOR JOY THERAPEUTIC RIDING	NONE	PUBLIC	GENERAL	
P.O BOX 140295 BOISE, ID 83714				5,000
ROGUE RETREAT	NONE	PUBLIC	GENERAL	
711 E MAIN ST #25				
MEDFORD, OR 97504	<del></del>		<del> </del>	7,500
THE FRIDA CINEMA	NONE	PUBLIC	J GENERAL	
305 E. 4TH STREET #100				
SANTA ANA, CA 92701				10,000
	-			
			<u> </u>	
Total from continuation sheets				37,500

Part XVI-A	Analysis of Income-Producing Activities
Part XVI-A	Analysis of income-Producing Activities

nter gross amounts unless otherwise indicated		Unrelated business income			ded by section 512, 513, or 514	(e)
,	(a) Business	(b)		(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue	code	Amount		code	Amount	function income
a						
b						
c						
d		_				
e						
f						<u></u>
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash						
investments						
4 Dividends and interest from securities				14	-,	
5 Net rental income or (loss) from real estate:	<b>西部中海</b>	EMPT,T	华華	##-		₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩₩
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal						
property			_			
7 Other investment income						
8 Gain or (loss) from sales of assets other						
than inventory				18	79,973.	
9 Net income or (loss) from special events						
O Gross profit or (loss) from sales of inventory						
1 Other revenue						
a						
b						_
C						
d						
e					05 000	
2 Subtotal. Add columns (b), (d), and (e)	Frank Train 1		0.	4	85,823.	85,823
3 Total. Add line 12, columns (b), (d), and (e)					13_	65,623
See worksheet in line 13 instructions to verify calcula	tions )	-				
Part XVI-B Relationship of Activ	ities to the Acco	mplishmen	t of Ex	œmp	t Purposes	
		. () (5				
Line No Explain below how each activity for what the foundation's exempt purposes (of				CONTIN	outed importantly to the accor	nplisnment of
the foundation's exempt purposes (or	unan by providing for	Tus for such purp	JSCS J.		<u> </u>	
					·	

▼	the foundation's exempt purposes (other than by providing funds for such purposes).	
	<del></del>	
$\longrightarrow$		
		<del></del>
$\rightarrow$	<u> </u>	
+	<u> </u>	<del>-</del> · · · · · · · · · · · · · · · · · · ·
		<del></del>
		· · · · · · · · · · · · · · · · · · ·
		· <del> ·</del>
621 12-11-		Form <b>990-PF</b> (20

1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)

Yes No

## Information Regarding Transfers to and Transactions and Relationships With Noncharitable **Exempt Organizations**

(other ti	han section 501(c)(3) organ	izations) or in section	527, relating	g to political organizations?	•				
a Transfe	rs from the reporting founda	ition to a noncharitabl	e exempt or	ganization of:					
(1) Cas	sh						1a(1)		<u> </u>
(2) Oth	ner assets						1a(2)		X
b Other transactions									
	es of assets to a noncharital						1b(1) 1b(2)	_	<u>X</u>
· · ·									X
(3) Rental of facilities, equipment, or other assets									X
	imbursement arrangements						1b(4)		X
• •	ans or loan guarantees						1b(5)	-	X
	formance of services or me	•	•				1b(6)		$\frac{\mathbf{x}}{\mathbf{x}}$
_	) of facilities, equipment, mainswer to any of the above is	•		• •	lwave chow the fair n	narkat value of the goods	ــــــــــــــــــــــــــــــــــــــ		
	ces given by the reporting fo		-	` '	-			.5,	
	(d) the value of the goods, (			ou loss than lan marrot van	oo iii ariy a anoadiida	or sharing arrangement,	5 III		
(a)Line no	(b) Amount involved			e exempt organization	(d) Description	of transfers, transactions, and	sharing arrar	gemen	its
<del></del> +			N/A			<del></del>			
	<del></del>			- <u></u>		<del></del>			
						_			
						<del></del>			<del></del>
						<u></u>			
2a is the fo	oundation directly or indirect	ly affiliated with or rel	lated to one	or more fay-eyemnt organ	izations described	<del></del>	<u> </u>		
	on 501(c) (other than section			or more tax-exempt organ	izations described	ſ	Yes	X	No
	complete the following sche	· /· //	don SET					بعف	110
<u> </u>	(a) Name of org			(b) Type of organization		(c) Description of relation	ship		<del></del>
	N/A	····							
-	<u> </u>				<u> </u>				
						_			
	der penalties of perjury, I declare to belief it is true, correct, and con-						ay the IRS dis	cuss th	IIS
Sign	Date of	111-1-	<u>_</u>	المراد المرادوس	<b>N</b> 0.	ير st	turn with the room below?	repare See inst	t l
Here	+wucia x	Umamal	<u> </u>	11-13-19		lee	X Yes		No
Sı	ignature of officer or trustee			Date	Title	——————————————————————————————————————			
	Print/Type preparer's na	me	Preparer's s	ignature \	Date	Check if PTIN			
Paid	MICHELLE	Marine 3	001.5	1, 20	11/7/19	self- employed	11000	0.0	
	MICHELLE A		MUCH		<u> </u>		10867		
Preparei Use Only	7 O	DSAY & BRC	MNRTT	, шшР		Firm's EIN ► 33-0	000009	2	
Joe Oill		25 EVECTION	VE CO	UARE, SUITE	1150	<del> </del>			
		JOLLA, CA			TT30	Phone no. 858 5	58020	Λ	
	LA LA	OULLA, CA	3 3203	<u> </u>			Form <b>990</b> -		20.191
						•	01111 <b>330-</b>	* * (A	2010)

		· · · · · · · · · · · · · · · · · · ·				
FORM 990-PF	DIVIDENDS	S AND INTER	EST FROM SECUR	RITIES ST	TATEMENT 1	
SOURCE	GROSS AMOUNT	CAPITAL GAINS DIVIDEND	REVENUE	(B) NET INVEST- MENT INCOME		
MERRILL LYNCH	7,344.	1,49	4. 5,850.	5,850.		
TO PART I, LINE 4	7,344.	1,49	5,850.	5,850.		
FORM 990-PF		ACCOUNTI	NG FEES	Si	TATEMENT 2	
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME		(D) CHARITABLE PURPOSES	
ACCOUNTING FEES	_	2,500.	250.		2,250.	
TO FORM 990-PF, PG	1, LN 16B	2,500.	250.		2,250.	
FORM 990-PF		TAXES		STATEMENT 3		
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
FEDERAL EXCISE TAX STATE FILING FEES		163. 40.	0.		0.	
TO FORM 990-PF, PG	1, LN 18 ==	203.	0.		0.	
FORM 990-PF		OTHER EXPENSES		STATEMENT 4		
DESCRIPTION		(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
INVESTMENT FEES POSTAGE EXPENSES TRAVEL EXPENSE		1,948. 154. 474.	1,948.		0. 154. 474.	
TO FORM 990-PF, PG	1, LN 23	2,576.	1,948.		628.	

FORM 990-PF CO	RPORATE STOCK		STATI	EMENT 5	
DESCRIPTION		BOOK VALUE		FAIR MARKET VALUE	
MERRILL LYNCH #50128 - MUTUAL FUND MERRILL LYNCH #50131 - MUTUAL FUND		184,05 19,11		208,839.	
TOTAL TO FORM 990-PF, PART II, LIN	E 10B	203,16	54.	228,532.	
FORM 990-PF PART VIII - LIST TRUSTEES AND	OF OFFICERS, DEFOUNDATION MANAGE		STATI	EMENT 6	
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT	
GLENN A. WINTEMUTE P.O. BOX 1711 MEDFORD, OR 97501	FOUNDING TRUSTI	0.	0.	0.	
PATRICIA L. WINTEMUTE P.O. BOX 1711 MEDFORD, OR 97501	FOUNDING TRUSTS	EE 0.	0.	0.	
GAREN J. WINTEMUTE P.O. BOX 1711 MEDFORD, OR 97501	TRUSTEE 1.00	0.	0.	0.	
ERIC G. WINTEMUTE P.O. BOX 1711 MEDFORD, OR 97501	TRUSTEE 1.00	0.	0.	0.	
MITCHELL R. WINTEMUTE P.O. BOX 1711 MEDFORD, OR 97501	TRUSTEE 1.00	0.	0.	0.	
ANNE K. WINTEMUTE TOFEL P.O. BOX 1711 MEDFORD, OR 97501	TRUSTEE 1.00	0.	0.	0.	
WOLF WINTEMUTE P.O. BOX 1711 MEDFORD, OR 97501	TRUSTEE 1.00	0.	0.	0.	

WINTEMUTE FAMILY FOUN	EMUTE FAMILY FOUNDATION		45-6177617	
LION WINTEMUTE P.O. BOX 1711 MEDFORD, OR 97501	TRUSTEE 1.00	0.	0.	0.
TOTALS INCLUDED ON 990-	PF, PAGE 6, PART VIII	0.	0.	0.
FORM 990-PF	PART XV - LINE 1A LIST OF FOUNDATION MANAGERS		STATEME	NT 7

NAME OF MANAGER

GLENN A. WINTEMUTE PATRICIA L. WINTEMUTE