CHANGE IN ACCOUNTING PERIOD

Return of Private Foundation

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

Department of the Treasury

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

Form 990-PF (2019)

OMB No 1545-0047

|                  |  |            | eliue Service Posto il  | 10.10                                | 7 / 7 0  |  |   | areas continues a summaria contra      |  |
|------------------|--|------------|---|--------------------------------------|--|--|---|--|--|
|                  |  |            | dar year 2019 or tax year beginnin ${f @8/01/19}$ , a   | and ending $12/3$                    | <u>1/19_</u>                                     |  |   |  |  |
|                  |  |            | andation  |                                      |  | A Empl   | oyer identification number              |  |  |
|                  |  |            | dore & Elizabeth Schmidt Fa   | mıly                                 |  |  |   |  |  |
|                  | F  | <u>oun</u> | dation  |                                      |  |  | <u>-0422838</u>                         | <del></del>                            |  |
|                  | Number and street (or P O box number if mail is not delivered to street address) |            |   |                                      | iom/suite  | B Telephone number (see instructions)  |   |  |  |
|                  | _2.  | <u>112</u> | Connor Park Cove  |                                      |  | 80.  | <u>L-467-6868</u>                       |  |  |
|                  |  |            | , state or province, country, and ZIP or foreign postal code  Lake City UT 84109-2                            | 160                                  |  | C If exe   | g, check here                           |  |  |
|                  |  |            | <del></del>   |                                      |  |  |   |  |  |
|                  | G C  | heck a     |   | rn of a former public                | cnarity  | D 1 Fo   | oreign organizations, check h           | nere                                   |  |
|                  |  |            | Final return Amended  |                                      |  |  | reign organizations meeting             |  |  |
|                  |  |            | Address change Name cha   | <u> </u>                             |  | 85   | % test, check here and attac            | on computation                         |  |
| 7                | H C  | heck t     | type of organization $\overline{\mathbb{X}}$ Section 501(c)(3) exempt priva                                   | te foundation                        | nil  |  | ate foundation status was te            | rminated under                         |  |
| 7                | ∏_s  | ection     | n 4947(a)(1) nonexempt charitable trust Other taxab   | le private foundation                | U  | sectio   | n 507(b)(1)(A), check here              | ▶ ⊔                                    |  |
| +                | I Fa   | ır mar     | ket value of all assets at J Accounting method  | X Cash Acc                           | rual '   | F If the   | foundation is in a 60-month t           | termination                            |  |
|                  | en   | d of y     | ear (from Part II, col (c), Other (specify)   |                                      |  | under  | section 507(b)(1)(B), check             | here L                                 |  |
|                  | lın  | e 16)      | ▶ \$ 4,123,957 (Part I, column (d), mus   | st be on cash basis)                 |  |  |   |  |  |
|                  | Pa   | int I      | Analysis of Revenue and Expenses (The total of  | (a) Revenue and                      | (b) Net inv                                      | ostmont  | (c) Adjusted net                        | (d) Disbursements<br>for charitable    |  |
|                  |  |            | amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions) ) | expenses per<br>books                | inco   |  | income                                  | purposes                               |  |
|                  |  | _          |   |                                      |  |  |   | (cash basis only)                      |  |
|                  |  | 1          | Contributions, gifts, grants, etc , received (attach schedule)  |                                      |  |  |   |  |  |
|                  |  | 2          | Check $\blacktriangleright$ $X$ if the foundation is <b>not</b> required to attach Sch $X$                    |                                      |  |  |   |  |  |
|                  |  | 3          | Interest on savings and temporary cash investments  | 62 672                               |  | 60 670   |   |  |  |
|                  |  | 4          | Dividends and interest from securities  | 63,673                               | '  | 63 <b>,</b> 673  |   |  |  |
| 3                |  | 5a         | Gross rents   |                                      |  |  |   |  |  |
| .:.)             | ne   | b          | Net rental income or (loss)   |                                      | 7 - 1  | 0.40.00.00.00.00.00.00.00.00.00.00.00.00   |   |  |  |
| :3               | en   | 6a         | Net gain or (loss) from sale of assets not on line 10   | -63,461                              |  |  | State of the second state of the second | 1 Sharper Committee Committee          |  |
| ໄ, "Jece'vec" ໄ  | Revenue  | b          | Gross sales price for all assets on line 6a 207, 548  |                                      |  |  |   |  |  |
| ' <b>K</b>       | Ř  | 7          | Capital gain net income (from Part IV, line 2)  |                                      | 1  | 0  |   |  |  |
| <b>3</b>         |  | 8          | Net short-term capital gain   |                                      |  |  | 0                                       |  |  |
|                  |  | 9          | Income modifications  |                                      | <u>}-</u>  |  |   |  |  |
| CE D             |  | 10a        | Gross sales less returns and allowances   |                                      |  |  |   |  |  |
| Ö                |  | b          | Less Cost of goods sold   |                                      |  | The state of the s |   |  |  |
| -3<br>-3         |  | С          | Gross profit or (loss) (attach schedule)  |                                      |  |  |   |  |  |
| 0<br>3<br>3<br>3 |  | 11         | Other income (attach schedule)  | 010                                  |  | (2) (7)  |   |  |  |
| 3                | - 07   | 12         | Total. Add lines 1 through 11   | 212                                  | <del>†</del>                                     | 63 <b>,</b> 673  | <u> </u>                                |  |  |
|                  | Expenses   | 13         | Compensation of officers, directors, trustees, etc  | <u> </u>                             | <u> </u>   |  |   |  |  |
| 20               | en   | 14         | Other employee salaries and wages   |                                      | <u> </u>   |  |   |  |  |
| 2020             | xp   | 15         | Pension plans, employee benefits  | <b></b>                              | <u> </u>   |  |   |  |  |
| ග                |  |            | Legal fees (attach schedule)  |                                      |  | <del>-</del>   |   | <del> </del>                           |  |
| 0                | ive  | b          | Accounting fees (attach schedule)   | 7.655                                |  | 7 (55  |   |  |  |
| >                | Administrativ  | C          | Other professional fees (attach schedule) Stmt 1  | 7,655                                |  | 7,655  |   | <del> </del>                           |  |
| N0V              | stı  | 17         | Interest  |                                      |  | DEC  | EIVED                                   | · · · · · · · · · · · · · · · · · · ·  |  |
|                  | in   | 18         | Taxes (attach schedule) (see instructions)  |                                      | <del>                                     </del> | KEU  | 100                                     |  |  |
| Ç                | jΈ   | 19         | Depreciation (attach schedule) and depletion  |                                      | 6  |  |   |  |  |
| 日はお客でし           | A  | 20         | Occupancy   |                                      | 18   | <del>- JUL</del> -   | 0 1 2020                                | <del> </del>                           |  |
| 1 52<br>22       | פֿב  | 21         | Travel, conferences, and meetings   |                                      | 20   |  |   | <del> </del>                           |  |
| <                | ַ הַ   | 22         | Printing and publications   |                                      | <del>                                     </del> | OCT  | EN, UT                                  | <del></del>                            |  |
| ď                | ם<br>ם   | 23         | Other expenses (att sch )   |                                      | <u> </u>   | OGL  |   |  |  |
| 0                | Operating and  | 24         | Total operating and administrative expenses.  | 3 656                                |  | 7 (55  | ,                                       | _                                      |  |
|                  | ē  |            | Add lines 13 through 23   | 7,655                                |  | 7,655  | 0                                       |  |  |
|                  | d  | 25         | Contributions, gifts, grants paid   | 157,832                              | mane 16 years 1                                  | CAMBELL NO. ADDR.  |   | 157,832                                |  |
|                  |  | 26         | Total expenses and disbursements. Add lines 24 and 25   | 165,487                              |  | 7,655  | 0                                       | 157,832                                |  |
|                  |  | 27         | Subtract line 26 from line 12:  |                                      |  |  |   |  |  |
|                  |  | а          | Excess of revenue over expenses and disbursements   | -165,275                             |  |  |   |  |  |
|                  |  | b          | Net investment income (If negative, enter -0-)  | America (company (company (company)) | PROFES A LANGUESTA C                             | 56,018   |   | R. consists Fr. Consect Fr. Speciality |  |
|                  |  |            | Adjusted net income (if negative, enter -0-)  |                                      |  |  | 0                                       |  |  |

| -c       | rm 990 | o-PF(2019) Theodore & Elizabeth Schmidt Fam   |  | 38                                 | Page 2                            |
|----------|--------|---|--|------------------------------------|-----------------------------------|
| III      | Part   | Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions) | Beginning of year  |                                    | f year                            |
|          |        |   | (a) Book Value   | (b) Book Value                     | (c) Fair Market Value             |
| 1        | 1      | Cash – non-interest-bearing   | 1.00 530   | 100 505                            | 122 505                           |
| 1        | 2      | Savings and temporary cash investments  | 166,539  | 123,505                            | 123,505                           |
| ١        | 3      | Accounts receivable >   |  |                                    |                                   |
| ١        |        | Less allowance for doubtful accounts ▶  |  |                                    |                                   |
| ١        | 4      | Pledges receivable ▶  |  |                                    |                                   |
| ١        |        | Less allowance for doubtful accounts ▶  |  |                                    |                                   |
| ١        | 5      | Grants receivable   |  |                                    | <del></del>                       |
| ١        | 6      | Receivables due from officers, directors, trustees, and other   |  |                                    |                                   |
| ļ        |        | disqualified persons (attach schedule) (see   |  |                                    |                                   |
| ١        |        | instructions)   | he dindre in the sist in the life is   | ethorulis b shakere i dindre b     | Քան ի փանձից իշրահարին է-դանա     |
| 1        | 7      | Other notes and loans receivable (att. schedule)  | <u> </u>   |                                    |                                   |
| ļ        |        | Less allowance for doubtful accounts ▶ 0  |  |                                    |                                   |
| 2        | 8      | Inventories for sale or use   |  |                                    |                                   |
| ğ        | 9      | Prepaid expenses and deferred charges   |  |                                    |                                   |
| Ć        | 10a    | Investments – U S and state government obligations (attach schedule)  |  |                                    |                                   |
| ١        | b      | Investments – corporate stock (attach schedule) See Stmt 2  | 2,334,074  | 2,211,833                          | 3,908,845                         |
| ١        | C      | Investments – corporate bonds (attach schedule) See Stmt 3  | 70,663   | 70,663                             | 91,607                            |
| ١        | 11     | Investments – land, buildings, and equipment basis ▶  |  |                                    | Marine Sile                       |
| ١        |        | Less accumulated depreciation (attach sch.) ▶   |  |                                    |                                   |
| ١        | 12     | Investments – mortgage loans  |  |                                    |                                   |
| ١        | 13     | Investments – other (attach schedule)   | The state of the s | W. K. MINISTER F SHEARING L'ANSAGE | L' spenius F. former L' dellace L |
| ١        | 14     | Land, buildings, and equipment basis  |  |                                    |                                   |
| ١        |        | Less accumulated depreciation (attach sch.)   |  |                                    |                                   |
| ١        | 15     | Other assets (describe ▶  |  |                                    |                                   |
|          | 16     | Total assets (to be completed by all filers – see the   |  |                                    |                                   |
| _        |        | instructions. Also, see page 1, item I)   | 2,571,276  | 2,406,001                          | 4,123,957                         |
| 1        | 17     | Accounts payable and accrued expenses   |  |                                    |                                   |
| ا۔       | 18     | Grants payable  |  |                                    |                                   |
| ű        | 19     | Deferred revenue  |  |                                    |                                   |
| Ĭ        | 20     | Loans from officers, directors, trustees, and other disqualified persons  |  |                                    |                                   |
| 9        | 21     | Mortgages and other notes payable (attach schedule)   |  |                                    |                                   |
| ᅦ        | 22     | Other liabilities (describe ▶ )   |  |                                    |                                   |
|          | 23     | Total liabilities (add lines 17 through 22)   | 0  | 0                                  |                                   |
|          |        | Foundations that follow FASB ASC 958, check here  |  |                                    |                                   |
| ű        |        | and complete lines 24, 25, 29, and 30.  |  |                                    |                                   |
| 9        | 24     | Net assets without donor restrictions   |  | <u></u>                            |                                   |
| 힛        | 25     | Net assets with donor restrictions  |  |                                    |                                   |
| 5        |        | Foundations that do not follow FASB ASC 958, check here   |  |                                    |                                   |
| 3        |        | and complete lines 26 through 30.   |  |                                    |                                   |
| <u>-</u> | 26     | Capital stock, trust principal, or current funds  | 2,571,276  | 2,406,001                          |                                   |
| ٦        | 27     | Paid-in or capital surplus, or land, bldg, and equipment fund   |  |                                    |                                   |
| ž        | 28     | Retained earnings, accumulated income, endowment, or other funds  |  |                                    |                                   |
| Ÿ        | 29     | Total net assets or fund balances (see instructions)  | 2,571,276  | 2,406,001                          |                                   |
| 3        | 30     | Total liabilities and net assets/fund balances (see   |  |                                    |                                   |
| Ž        |        | instructions)   | 2,571,276  | 2,406,001                          |                                   |
| # initi  | Part   | Analysis of Changes in Net Assets or Fund Balances  |  |                                    |                                   |
| 1        | Tota   | net assets or fund balances at beginning of year - Part II, column (a), line 29   | (must agree with   |                                    |                                   |
|          | end-   | of-year figure reported on prior year's return)   |  | 1                                  | 2,571,276                         |
| 2        | Ente   | r amount from Part I, line 27a  |  | 2                                  | -165,275                          |
| 3        | Othe   | r increases not included in line 2 (itemize)  |  | 3                                  |                                   |
| 4        | Add    | lines 1, 2, and 3   |  | 4                                  | 2,406,001                         |
| 5        | Decr   | eases not included in line 2 (itemize)  |  |                                    |                                   |

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29

2,406,001 Form **990-PF** (2019) Form 990-PF (2019) Theodore & Elizabeth Schmidt Family 68-0422838

| Rart IV Capital Gains and   | Losses for Tax on Inves  | tment Incom       | e                                       | <del></del>  |                              |   |
|---|--|-------------------|---|--------------|------------------------------|---|
| (a) List and describe the kind  | ne kınd(s) of property sold (for example, real estate, ehouse, or common stock, 200 shs MLC Co ) |                   |   | (c) Date acc |                              | (d) Date sold<br>(mo , day, yr )            |
| 1a Kraft Heinz Co   | <del></del>  |                   | D – Donation                            | 01/11        | /19                          | 11/29/19                                    |
| <b>b</b> CVS Health Corp  |  | P V               |   |              |                              | 10/29/19                                    |
| c Freeport-McMoran  | Inc  |                   |   |              |                              |   |
| d JPMorgan Chase &  |  |                   | P                                       | 09/27        |                              | 10/21/19                                    |
| e Kraft Heinz Co  |  |                   | P                                       | Vario        | ous                          | 11/29/19                                    |
| (e) Gross sales price   | (f) Depreciation allowed<br>(or allowable)   |                   | ost or other basis<br>expense of sale   | (            | (h) Gain<br>(e) plus (f)     |   |
| a 18,282  |  |                   | 26,931                                  |              |                              | -8,649                                      |
| b 32,907  |  |                   | 36,164                                  |              |                              | -3 <b>,</b> 257                             |
| c 52,018  |  |                   | 121,318                                 |              | _                            | -69 <u>,300</u>                             |
| d 61,684  |  |                   | 9,418                                   |              |                              | 52,2 <u>66</u>                              |
| e 42,657  |  |                   | <u>77,178</u>                           |              |                              | <u>-34,521</u>                              |
| Complete only for assets showing ga   | ain in column (h) and owned by   | the foundation or | 12/31/69                                | (I) G        | Sains (Col                   | (h) gain minus                              |
| (ı) FMV as of 12/31/69  | (j) Adjusted basis<br>as of 12/31/69   |                   | Excess of col (i)<br>er col (j), if any |              | (), but not l<br>Losses (fro | ess than -0-) or<br>m col (h))              |
| a   |  |                   |   |              |                              | <u>-8,649</u>                               |
| b   |  |                   |   |              |                              | <u>-3,257</u>                               |
| С   |  |                   |   |              |                              | -69,3 <u>0</u> 0                            |
| d   |  |                   |   |              |                              | 52 <b>,</b> 266                             |
| е   |  |                   |   |              |                              | <u>-34,521</u>                              |
| 2 Capital gain net income or (net capit   | al loss) If gain, also enter If (loss), enter -0-  |                   | }                                       | 2            |                              | -63,461                                     |
| 3 Net short-term capital gain or (loss)   | _ ` `  | _                 | •                                       |              |                              | <del></del>                                 |
| If gain, also enter in Part I, line 8, co   |  |                   | 1                                       |              |                              |   |
| Part I, line 8  | ( )  | _                 | <u>'</u>                                | 3            |                              |   |
|   | r Section 4940(e) for Re   | duced Tax o       | n Net Investment                        | ncome        |                              |   |
| (For optional use by domestic private for if section 4940(d)(2) applies, leave this p | part blank   |                   |   |              |                              | ☐ Yes ☒ No                                  |
| Was the foundation liable for the section If "Yes," the foundation doesn't qualify u  |  |                   | r in the base period?                   |              |                              | ☐ fes 🔼 No                                  |
| 1 Enter the appropriate amount in eac   | h column for each year; see the  | instructions befo | re making any entries.                  |              | -                            |   |
| (a)<br>Base penod years   | (b) Adjusted qualifying distribution   | Ĭ                 | (c) value of nonchantable-use asso      | ets          |                              | (d)<br>abution ratio<br>avided by col. (c)) |
| Calendar year (or tax year beginning in) 2018   | 30:  | 5,258             | 3,801,                                  | 613          | (                            | 0.080297                                    |
| 2017  | 19   |                   | 4,262,                                  |              |                              | 0.044958                                    |
| 2016  |  | 5,101             | 4,563,                                  |              |                              | 0.060285                                    |
| 2015  |  | 5,279             | 4,348,                                  |              |                              | 0.090908                                    |
| 2014  |  | 0,872             | 4,554,                                  |              | -                            | 0.063868                                    |
|   |  | 0,012             | 1,001,                                  | 2            |                              | 0.340316                                    |
| 2 Total of line 1, column (d)   |  |                   |   |              |                              | 0.540510                                    |
| 3 Average distribution ratio for the 5-ye<br>the number of years the foundation I     |  |                   | , or by                                 | 3            |                              | 0.068063                                    |
| 4 Enter the net value of noncharitable  | use assets for 2019 from Part >  | (, line 5         |   | 4            |                              | 3,895,382                                   |
| 5 Multiply line 4 by line 3   |  |                   |   | 5 265,13     |                              | 265,131                                     |
| 6 Enter 1% of net investment income   | (1% of Part I, line 27b)   |                   |   | 6            |                              | _560  |
| 7 Add lines 5 and 6   |  |                   |   | 7            |                              | 265 <u>,</u> 691                            |
| 8 Enter qualifying distributions from Pa  |  |                   |   | 8            | <u> </u>                     | 157,832                                     |
| If line 8 is equal to or greater than lin   | ne 7 check the hox in Part VI li   | ne 1b. and compl  | ete that part using a 1%                | tax rate. Se | ee the                       |   |

Part VI instructions

|            | 990-PF(2019) Theodore & Elizabeth Schmidt Family68-0422838   | 4040   | <del></del> | * 4          |              | ge <b>4</b> |   |
|------------|--|--------|-------------|--------------|--------------|-------------|---|
|            | Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or   | 4948   | - see       | ınstr        | uctio        | ons         |   |
| 1a         | Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.  |        | 1.34        | C.           |              |             |   |
|            | 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   | 1      |             |              | <u> </u>     | <u>-20</u>  |   |
|            | here and enter 1% of Part I, line 27b  |        |             |              |              |             |   |
| С          | All other domestic foundations enter 2% of line 27b Exempt foreign organizations, enter 4% of  |        |             |              | Ľami.        | _E_3        |   |
| _          | Part I, line 12, col (b)   | ا ،    | Ĭ           |              |              | $\circ$     |   |
|            | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)   | 3      |             |              | 1 1          | 20          |   |
| 3          | Add lines 1 and 2  | 4      |             |              | <u> </u>     | <u>.20</u>  |   |
|            | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)  Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-           | 5      | -           |              | 1 1          | 20          |   |
| 5<br>6     | Credits/Payments:  |        |             |              |              |             |   |
|            | 2019 estimated tax payments and 2018 overpayment credited to 2019  [6a]  2,525   |        |             |              |              |             |   |
| b          | Exempt foreign organizations – tax withheld at source  6b  |        |             |              |              |             |   |
| C          | Tax paid with application for extension of time to file (Form 8868)  6c  |        |             |              |              |             |   |
|            | Backup withholding erroneously withheld 6d   |        |             |              |              |             |   |
| 7          | Total credits and payments. Add lines 6a through 6d  | 7      |             |              | 2,5          | 25          |   |
|            | Enter any penalty for underpayment of estimated tax. Check her if Form 2220 is attached  | 8      |             |              |              |             |   |
| 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     |             |              | 1,4          | 0.5         |   |
|            | Enter the amount of line 10 to be Credited to 2020 estimated tax ▶ 1,405 Refunded ▶  | 11     |             |              |              |             |   |
| <b></b> ₽a | ntVII-A Statements Regarding Activities  |        |             |              |              |             |   |
| 1a         | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it   |        |             |              | Yes          | No          |   |
|            | participate or intervene in any political campaign?  |        |             | 1a           | <b></b>      | X           |   |
| b          | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the   |        |             | ı l          |              |             |   |
|            | 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 distributed by the foundation in connection with the activities.  |        |             | X5-04011- FR |              | V           |   |
|            | Did the foundation file Form 1120-POL for this year?   |        |             | 1c           |              |             |   |
| d          | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.   |        |             |              |              |             |   |
| _          | (1) On the foundation ▶ \$ (2) On foundation managers. ▶ \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed                                      | _      |             |              |              |             |   |
| е          | on foundation managers > \$  |        |             |              |              |             |   |
| 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  |        | ļ           |              | TINE         | 1.#         |   |
| 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            |              | Χ           |   |
| 4a         | Did the foundation have unrelated business gross income of \$1,000 or more during the year?  |        |             | 4a           |              | X           |   |
| b          | If "Yes," has it filed a tax return on Form 990-T for this year?   |        | N/A         | 4b           |              |             |   |
| 5          | Was there a liquidation, termination, dissolution, or substantial contraction during the year?   |        |             | 5            | transcen als | X           |   |
|            | If "Yes," attach the statement required by General Instruction T   |        |             |              |              | 1.1         |   |
| 6          | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either   |        | ļ           |              |              |             |   |
|            | By language in the governing instrument, or  |        |             |              | L            |             |   |
|            | 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            | 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), are   | io Par | ۱۸۷         | 7            | X            | 1 19        |   |
| 8a         | Enter the states to which the foundation reports or with which it is registered. See instructions.   |        |             |              |              |             |   |
| L          | UT   |        |             |              |              |             |   |
| b          | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General   |        |             | 8b           | X            | ##تطب       |   |
| 0          | (or designate) of each state as required by General Instruction G? If "No," attach explanation Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or |        |             |              | Â            |             |   |
| 9          | 4942(j)(5) for calendar year 2019 or the tax year beginning in 2019? See instructions for Part XIV If "Yes,"   |        |             |              | و المناسطة   | #           | , |
|            | complete Part XIV  |        |             | 9            | - 1          | Χ           | 2 |
| 10         | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their   |        |             |              |              |             |   |
|            | names and addresses  |        |             | 10           |              | X           |   |
|            |  |        |             | 990          | N_DE         | (2040)      |   |

| ÆD: | art VII-A Statements Regarding Activities (continued)   |                  |            |      |              |
|-----|---|------------------|------------|------|--------------|
|     |   |                  | 200        | Yes  | No           |
| 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         |      | Χ            |
| 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         |      | Х            |
| 13  | Did the foundation comply with the public inspection requirements for its annual returns and exemption application    | on?              | 13         | X    |              |
|     | Website address ► N/A   |                  |            |      |              |
| 14  |   | ▶ 801-4          | 67-        | 686  | 8            |
|     | 3115 Connor Park Cove   |                  |            |      |              |
|     |   | 4▶ 84109         | -24        | 68   |              |
| 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 2019, did the foundation have an interest in or a signature or other authority       |                  |            | Yes  | No           |
|     | over a bank, securities, or other financial account in a foreign country?   |                  | 16         |      | X            |
|     | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of          |                  |            |      |              |
|     | the foreign country ▶   |                  |            |      |              |
| Pa  | 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.                               |                  |            | Yes  | No           |
| 1a  |   |                  |            | ## T |              |
|     | (1) Engage in the sale or exchange, or leasing of property with a disqualified person?                                | es 🛚 No          |            |      | <b>7 4</b> 1 |
|     | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a                             |                  |            |      |              |
|     |   | es 🗓 No          |            |      |              |
|     | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?                            | es 🗓 No          |            |      |              |
|     | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?                                  | es 🗓 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)?   | es 🛚 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                                     |                  | M          |      |              |
|     | termination of government service, if terminating within 90 days )  | es 🗓 No          |            |      |              |
| b   | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in            | <del></del>      |            | 1    |              |
|     | Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions               | N/A              | 1b         |      |              |
|     | Organizations relying on a current notice regarding disaster assistance, check here                                   | ▶ 🔲              |            |      |              |
| С   | 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 2019?  | N/A              | 1c         |      |              |
| 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))   |                  |            |      | • M          |
| а   | At the end of tax year 2019, did the foundation have any undistributed income (Part XIII, lines                       | _                |            |      |              |
|     | 6d and 6e) for tax year(s) beginning before 2019?   | es 🗓 No          |            |      |              |
|     | If "Yes," list the years ▶ 20 , 20 , 20 , 20  |                  |            |      |              |
| b   | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) |                  |            |      | -0           |
|     | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to    |                  |            |      |              |
|     | all years listed, answer "No" and attach statement – see instructions)  | N/A              | 2b         |      |              |
| C   | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here       |                  |            |      |              |
|     | <b>▶</b> 20 , 20 , 20 , 20  |                  |            |      |              |
| 3a  | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise                         |                  | <b>249</b> |      |              |
|     |   | es $oxtime X$ No |            |      |              |
| b   | If "Yes," did it have excess business holdings in 2019 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 Form 4720, Schedule C, to determine if the                  | 4-               |            |      |              |
|     | foundation had excess business holdings in 2019 )   | N/A              | 3b         |      |              |
| 4a  | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?       |                  | 4a         |      | X            |
| 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 2019     |                  | 4b         |      | <u>X</u>     |
|     |   | Fo               | rm 99      | v-PF | (2019)       |

| Forn           |  | <u> Elizabeth Schmidt</u>   |   |   |   |  | Page 6                                 |
|----------------|--|---|---|---|---|--|--|
| ER             | irt VII-B Statements Rega  | arding Activities for Which Fo  | orm 4720 May B  | e Required (                                    | continued)  |  |  |
| 5a             | During the year did the foundation p   | pay or incur any amount to  |   | _   | _   |  | Yes No                                 |
|                | (1) Carry on propaganda, or otherw   | vise attempt to influence legislation (se                                   | ection 4945(e))?  |   | Yes 🛚 🗓 No  | o <b>       </b>   |  |
|                | (2) Influence the outcome of any sp  | pecific public election (see section 495                                    | 5), or to carry on,   | _   |   |  |  |
|                | directly or indirectly, any voter re   | egistration drive?  |   |   | Yes 🔀 No  |  |  |
|                | (3) Provide a grant to an individual   | for travel, study, or other similar purpo                                   | ses?  | X ,   | Yes 🗌 No  | o  |  |
|                | (4) Provide a grant to an organization   | on other than a charitable, etc., organi                                    | zation described in   | _   |   | 200  |  |
|                | section 4945(d)(4)(A)? See inst  | ructions  |   |   | Yes 🔀 No  |  |  |
|                | (5) Provide for any purpose other th   | han religious, charitable, scientific, liter                                | rary, or educational  |   |   |  |  |
|                | purposes, or for the prevention  | of cruelty to children or animals?  |   | [ ] ·   | Yes 🔀 No  | o <b>28</b>  |  |
| b              | If any answer is "Yes" to 5a(1)-(5),   | did any of the transactions fail to quali                                   | ify under the exceptio  | ns described                                    |   |  |  |
|                | ın Regulations section 53 4945 or ir   | n a current notice regarding disaster as                                    | ssistance? See instru   | ctions  | نو.   | 5b   | X                                      |
|                | Organizations relying on a current r   | notice regarding disaster assistance, cl                                    | heck here   |   | ▶ [   |  |  |
| С              | If the answer is "Yes" to question 5a  | a(4), does the foundation claim exemp                                       | tion from the tax   | . —   |   |  |  |
|                | because it maintained expenditure  | responsibility for the grant?   |   | N/A ∐ '   | Yes 🔛 No  | 0  |  |
|                | If "Yes," attach the statement requir  | ed by Regulations section 53 4945–5(  | (d)   |   |   |  |  |
| 6a             | Did the foundation, during the year,   | receive any funds, directly or indirectly                                   | y, to pay premiums  |   |   |  |  |
|                | on a personal benefit contract?  |   |   |   | Yes 🛚 🗓 No  |  |  |
| þ              | Did the foundation, during the year,   | pay premiums, directly or indirectly, o                                     | n a personal benefit o  | contract?                                       |   | 6b   | X                                      |
|                | If "Yes" to 6b, file Form 8870.  |   |   |   |   |  |  |
| 7a             |  | s the foundation a party to a prohibited                                    |   |   | Yes X No  |  |  |
| b              | If "Yes," did the foundation receive a   | any proceeds or have any net income   | attributable to the trai  | nsaction?                                       | N./   | A 7b   |  |
| 8              | Is the foundation subject to the sect  | tion 4960 tax on payment(s) of more th                                      | nan \$1,000,000 in  |   | . <del>.</del> .  |  |  |
| E              | remuneration or excess parachute   | payment(s) during the year?   |   |   | Yes X No  | En. Bergalth.  | ## ### 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| E B            |  | t Officers, Directors, Trustee  | s, Foundation M   | anagers, Hig                                    | jhly Paid E   | mploye   | ees,                                   |
|                | and Contractors  |   |   |   |   |  |  |
| 1 1            | ist all officers, directors, trustees,   | , and foundation managers and thei  | r compensation. Sec   | e instructions.                                 |   |  |  |
|                |  | ·   |   |   |   |  |  |
|                |  | .,  | (b) Title, and average  | (c) Compensation                                | (d) Contribution<br>employee ber  |  | pense account,                         |
|                |  | and address   |   |   | employee ber  | nefit (e) Ex<br>erred othe   | pense account,<br>er allowances        |
|                | (a) Name a   | and address   | (b) Title, and average hours per week devoted to position   | (c) Compensation<br>(If not paid,               | employee ber  | nefit (e) Ex<br>erred othe   |  |
| Tì             | (a) Name a<br>leodore Schmidt  | Salt Lake City  | (b) Title, and average hours per week devoted to position  President  | (c) Compensation<br>(If not paid,<br>enter -0-) | employee ber<br>plans and defe<br>compensation  | nefit (e) Ex<br>erred othe<br>on   | er allowances                          |
| Th             | (a) Name a<br>leodore Schmidt<br>15 Connor Park Cove   | Salt Lake City<br>UT 84109  | (b) Title, and average hours per week devoted to position  President 0.00                                       | (c) Compensation<br>(If not paid,               | employee ber<br>plans and defe<br>compensation  | nefit (e) Ex<br>erred othe   |  |
| Tr<br>21<br>Sa | (a) Name a<br>seodore Schmidt<br>.15 Connor Park Cove<br>.ndefur Schmidt   | Salt Lake City UT 84109 Provo   | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer                            | (c) Compensation<br>(If not paid,<br>enter -0-) | employee ber<br>plans and defe<br>compensation  | nefit (e) Exerned other  | er allowances 0                        |
| Tr<br>21<br>Sa | (a) Name a<br>leodore Schmidt<br>15 Connor Park Cove   | Salt Lake City<br>UT 84109  | (b) Title, and average hours per week devoted to position  President 0.00                                       | (c) Compensation<br>(If not paid,<br>enter -0-) | employee ber<br>plans and defe<br>compensation  | nefit (e) Ex<br>erred othe<br>on   | er allowances                          |
| Tr<br>21<br>Sa | (a) Name a<br>seodore Schmidt<br>.15 Connor Park Cove<br>.ndefur Schmidt   | Salt Lake City UT 84109 Provo   | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer                            | (c) Compensation<br>(If not paid,<br>enter -0-) | employee ber<br>plans and defe<br>compensation  | nefit (e) Exerned other  | er allowances 0                        |
| Tr<br>21<br>Sa | (a) Name a<br>seodore Schmidt<br>.15 Connor Park Cove<br>.ndefur Schmidt   | Salt Lake City UT 84109 Provo   | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer                            | (c) Compensation<br>(If not paid,<br>enter -0-) | employee ber<br>plans and defe<br>compensation  | nefit (e) Exerned other  | er allowances 0                        |
| Tr<br>21<br>Sa | (a) Name a<br>deodore Schmidt<br>15 Connor Park Cove<br>andefur Schmidt  | Salt Lake City UT 84109 Provo   | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer                            | (c) Compensation<br>(If not paid,<br>enter -0-) | employee ber<br>plans and defe<br>compensation  | nefit (e) Exerned other  | er allowances 0                        |
| Tr 21 Sa 50    | (a) Name a<br>leodore Schmidt<br>.15 Connor Park Cove<br>indefur Schmidt<br>.1 E Normandy Drive  | Salt Lake City UT 84109 Provo UT 84604                                      | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer 0.00                       | (c) Compensation<br>(If not paid,<br>enter -0-) | employee ber<br>plans and defe<br>compensation  | efit (e) Ex other  | er allowances 0                        |
| Tr 21 Sa 50    | (a) Name a leodore Schmidt  15 Connor Park Cove leadefur Schmidt  1 E Normandy Drive  Compensation of five highest-park  | Salt Lake City UT 84109 Provo   | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer 0.00                       | (c) Compensation<br>(If not paid,<br>enter -0-) | employee ber<br>plans and defe<br>compensation  | efit (e) Ex other  | er allowances 0                        |
| Tr 21 Sa 50    | (a) Name a<br>leodore Schmidt<br>.15 Connor Park Cove<br>indefur Schmidt<br>.1 E Normandy Drive  | Salt Lake City UT 84109 Provo UT 84604                                      | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer 0.00  uded on line 1 – see | (c) Compensation<br>(If not paid,<br>enter -0-) | employee ber plans and defe compensation  | efit (e) Ex other  | er allowances 0                        |
| Tr 21 Sa 50    | (a) Name a second control of the second cont | Salt Lake City UT 84109 Provo UT 84604  id employees (other than those incl | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer 0.00  uded on line 1 – see | (c) Compensation (if not paid, enter -0-)       | employee ber plans and defe compensation  f none, enter  (d) Contribution employee ber                | on (e) Experied other ot | 0 0                                    |
| Tr 21 Sa 50    | (a) Name a leodore Schmidt  15 Connor Park Cove leadefur Schmidt  1 E Normandy Drive  Compensation of five highest-park  | Salt Lake City UT 84109 Provo UT 84604  id employees (other than those incl | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer 0.00  uded on line 1 – see | (c) Compensation<br>(If not paid,<br>enter -0-) | employee ber plans and defe compensation  | O O O O O O O O O O O O O O O O O O O  | O 0                                    |
|                | (a) Name and address of each empire  | Salt Lake City UT 84109 Provo UT 84604  id employees (other than those incl | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer 0.00  uded on line 1 — see | (c) Compensation (if not paid, enter -0-)       | employee ber plans and defe compensation  f none, enter  (d) Contribution employee ber plans and defe | O O O O O O O O O O O O O O O O O O O  | 0 0                                    |
|                | (a) Name a second control of the second cont | Salt Lake City UT 84109 Provo UT 84604  id employees (other than those incl | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer 0.00  uded on line 1 — see | (c) Compensation (if not paid, enter -0-)       | employee ber plans and defe compensation  f none, enter  (d) Contribution employee ber plans and defe | O O O O O O O O O O O O O O O O O O O  | 0 0                                    |
|                | (a) Name and address of each empire  | Salt Lake City UT 84109 Provo UT 84604  id employees (other than those incl | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer 0.00  uded on line 1 — see | (c) Compensation (if not paid, enter -0-)       | employee ber plans and defe compensation  f none, enter  (d) Contribution employee ber plans and defe | O O O O O O O O O O O O O O O O O O O  | 0 0                                    |
|                | (a) Name and address of each empire  | Salt Lake City UT 84109 Provo UT 84604  id employees (other than those incl | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer 0.00  uded on line 1 — see | (c) Compensation (if not paid, enter -0-)       | employee ber plans and defe compensation  f none, enter  (d) Contribution employee ber plans and defe | O O O O O O O O O O O O O O O O O O O  | 0 0                                    |
|                | (a) Name and address of each empire  | Salt Lake City UT 84109 Provo UT 84604  id employees (other than those incl | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer 0.00  uded on line 1 — see | (c) Compensation (if not paid, enter -0-)       | employee ber plans and defe compensation  f none, enter  (d) Contribution employee ber plans and defe | O O O O O O O O O O O O O O O O O O O  | 0 0                                    |
|                | (a) Name and address of each empire  | Salt Lake City UT 84109 Provo UT 84604  id employees (other than those incl | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer 0.00  uded on line 1 — see | (c) Compensation (if not paid, enter -0-)       | employee ber plans and defe compensation  f none, enter  (d) Contribution employee ber plans and defe | O O O O O O O O O O O O O O O O O O O  | 0 0 pense account,                     |
|                | (a) Name and address of each empire  | Salt Lake City UT 84109 Provo UT 84604  id employees (other than those incl | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer 0.00  uded on line 1 — see | (c) Compensation (if not paid, enter -0-)       | employee ber plans and defe compensation  f none, enter  (d) Contribution employee ber plans and defe | O O O O O O O O O O O O O O O O O O O  | 0 0 pense account,                     |
|                | (a) Name and address of each empire  | Salt Lake City UT 84109 Provo UT 84604  id employees (other than those incl | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer 0.00  uded on line 1 — see | (c) Compensation (if not paid, enter -0-)       | employee ber plans and defe compensation  f none, enter  (d) Contribution employee ber plans and defe | O O O O O O O O O O O O O O O O O O O  | 0 0 pense account,                     |
|                | (a) Name and address of each empire  | Salt Lake City UT 84109 Provo UT 84604  id employees (other than those incl | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer 0.00  uded on line 1 — see | (c) Compensation (if not paid, enter -0-)       | employee ber plans and defe compensation  f none, enter  (d) Contribution employee ber plans and defe | O O O O O O O O O O O O O O O O O O O  | 0 0                                    |
|                | (a) Name and address of each empire  | Salt Lake City UT 84109 Provo UT 84604  id employees (other than those incl | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer 0.00  uded on line 1 — see | (c) Compensation (if not paid, enter -0-)       | employee ber plans and defe compensation  f none, enter  (d) Contribution employee ber plans and defe | O O O O O O O O O O O O O O O O O O O  | 0 0                                    |
| 21 See 50      | (a) Name and address of each empire  | Salt Lake City UT 84109 Provo UT 84604  id employees (other than those incl | (b) Title, and average hours per week devoted to position  President 0.00  Treasurer 0.00  uded on line 1 — see | (c) Compensation (if not paid, enter -0-)       | employee ber plans and defe compensation  f none, enter  (d) Contribution employee ber plans and defe | O O O O O O O O O O O O O O O O O O O  | 0 0 pense account,                     |

| Form 990-PF (2019) Theodore & Elizabeth Schmidt Family  Partylli Information About Officers, Directors, Trustees, Foundat  |                               | Page /                                  |
|--|-------------------------------|---|
| Information About Officers, Directors, Trustees, Foundat and Contractors (continued)   | ion managers, nighty Par      | d Employees,                            |
| 3 Five highest-paid independent contractors for professional services. See instruct  | tions. If none, enter "NONE." |   |
| (a) Name and address of each person paid more than \$50,000  | (b) Type of service           | (c) Compensation                        |
| NONE   | 1                             |   |
|  |                               |   |
|  |                               |   |
| <u> </u>   |                               |   |
|  |                               |   |
| <del></del>  |                               |   |
|  |                               |   |
|  |                               |   |
|  |                               |   |
| Total number of others receiving over \$50,000 for professional services   |                               | <u> </u>                                |
| PartiX-A Summary of Direct Charitable Activities   |                               |   |
| List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such organizations and other beneficiaries served, conferences convened, research papers produced, etc. | as the number of              | Expenses                                |
| 1 N/A  |                               | · · · · · · · · · · · · · · · · · · ·   |
|  |                               |   |
|  |                               |   |
| 2  |                               |   |
|  |                               |   |
| 3  |                               |   |
|  |                               |   |
|  |                               |   |
| 4  |                               |   |
|  |                               |   |
| Part IX B Summary of Program-Related Investments (see instruction  | one)                          |   |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2   | 0113)                         | Amount                                  |
| 1 N/A  |                               |   |
|  |                               |   |
|  |                               |   |
| 2  |                               |   |
|  | •                             |   |
| All other program-related investments. See instructions  |                               |   |
| 3  |                               |   |
|  |                               |   |
| Total. Add lines 1 through 3   |                               | - · · · · · · · · · · · · · · · · · · · |
|  |                               |   |

qualifies for the section 4940(e) reduction of tax in those years

Page 8

Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, Part X see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., 1a 3.809.681 Average monthly fair market value of securities 1b Average of monthly cash balances c Fair market value of all other assets (see instructions) 1c 954 1d d Total (add lines 1a, b, and c) Reduction claimed for blockage or other factors reported on lines 1a and 1e 1c (attach detailed explanation) 2 2 Acquisition indebtedness applicable to line 1 assets 3 Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see instructions) 895 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 6 Minimum investment return. Enter 5% of line 5 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations Part XI and certain foreign organizations, check here and do not complete this part.) 643 Minimum investment return from Part X, line 6 1,120 Tax on investment income for 2019 from Part VI, line 5 2a Income tax for 2019 (This does not include the tax from Part VI) 2b 2c c Add lines 2a and 2b Distributable amount before adjustments. Subtract line 2c from line 1 3 3 4 4 Recoveries of amounts treated as qualifying distributions 523 5 80, Add lines 3 and 4 Deduction from distributable amount (see instructions) 6 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, 80,523 line 1 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 157,832 a Expenses, contributions, gifts, etc. – total from Part I, column (d), line 26 1a 1b Program-related investments - total from Part IX-B 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes Amounts set aside for specific charitable projects that satisfy the: 3 Suitability test (prior IRS approval required) За 3b Cash distribution test (attach the required schedule) 4 157.83 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 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 Adjusted qualifying distributions. Subtract line 5 from line 4 Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation

Form 990-PF (2019)

Undistributed Income (see instructions) (d) (b) (c) Years prior to 2018 2018 2019 Corpus Distributable amount for 2019 from Part XI, 80,523 line 7 Undistributed income, if any, as of the end of 2019 a Enter amount for 2018 only \_ , 20\_ **b** Total for prior years 20 Excess distributions carryover, if any, to 2019 a From 2014 From 2015 c From 2016 d From 2017 123,241 e From 2018 f Total of lines 3a through e Qualifying distributions for 2019 from Part XII, 157,832 line 4 ▶ \$ a Applied to 2018, but not more than line 2a b Applied to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Applied to 2019 distributable amount e Remaining amount distributed out of corpus Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount must be shown in column (a)) Enter the net total of each column as indicated below: 506,954 a Corpus Add lines 3f, 4c, and 4e. Subtract line 5 b Prior years' undistributed income Subtract line 4b from line 2b 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 d Subtract line 6c from line 6b Taxable amount - see instructions e Undistributed income for 2018 Subtract line 4a from line 2a Taxable amount - see instructions f Undistributed income for 2019 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2020 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) Excess distributions carryover from 2014 not applied on line 5 or line 7 (see instructions) Excess distributions carryover to 2020. 436,169 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 Excess from 2015 Excess from 2016 Excess from 2017 123,243 Excess from 2018 Excess from 2019 Form 990-PF (2019)

|     | 1 990-PF (2019) Theodore & 1                        |                         |                          |                         |                         | Page <b>1</b> (   |
|-----|---|-------------------------|--------------------------|-------------------------|-------------------------|-------------------|
|     | art XIV Private Operating Fo                        |                         |                          |                         | on 9)                   |                   |
| 18  | If the foundation has received a ruling of          |                         |                          | erating                 |                         |                   |
|     | foundation, and the ruling is effective for         |                         |                          |                         |                         |                   |
| b   | Check box to indicate whether the foun              |                         | erating foundation de    |                         | 1942(j)(3) or 494       | 2(၂)(5)           |
| 2a  | Enter the lesser of the adjusted net                | Tax year                | 1110010                  | Prior 3 years           | 1 (1) 2010              | (e) Total         |
|     | income from Part I or the minimum                   | (a) 2019                | <b>(b)</b> 2018          | (c) 2017                | (d) 2016                |                   |
|     | investment return from Part X for                   |                         |                          |                         |                         |                   |
|     | each year listed                                    |                         |                          | <u> </u>                | ļ                       |                   |
| b   | 85% of line 2a                                      |                         |                          | <u> </u>                | ļ                       |                   |
| С   | 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             | <u></u>                 |                          |                         |                         |                   |
| 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:                       |                         |                          | X                       |                         |                   |
| а   | "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                       | /                        | 1                       |                         |                   |
|     | of minimum investment return shown in               | ı                       |                          |                         |                         |                   |
|     | Part X, line 6, for each year listed                |                         |                          |                         |                         |                   |
| С   | "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) |                         | 1                        |                         |                         |                   |
|     | (2) Support from general public                     |                         |                          |                         |                         |                   |
|     | and 5 or more exempt                                |                         |                          |                         |                         |                   |
|     | organizations as provided in                        |                         |                          |                         |                         |                   |
|     | section 4942(j)(3)(B)(III)                          |                         |                          |                         |                         |                   |
|     | (3) Largest amount of support from                  |                         |                          |                         |                         |                   |
|     | an exempt organization                              |                         |                          |                         | <u> </u>                |                   |
|     | (4) Gross investment income                         |                         |                          | <u> </u>                |                         |                   |
| Pε  | Supplementary Infor                                 | •                       | •                        | if the foundation       | on had \$5,000 or i     | more in assets a  |
|     | any time during the y                               | <u>rear – see instr</u> | uctions.)                |                         |                         |                   |
| 1   | Information Regarding Foundation N                  | lanagers:               |                          |                         |                         |                   |
| а   | List any managers of the foundation wh              | o have contributed i    | more than 2% of the to   | otal contributions rec  | eived by the foundation | 1                 |
|     | before the close of any tax year (but on            | ly if they have contri  | buted more than \$5,0    | 00) (See section 50)    | <b>7</b> (d)(2) )       |                   |
|     | N/A   |                         |                          |                         |                         |                   |
| b   | List any managers of the foundation wh              | o own 10% or more       | of the stock of a corp   | oration (or an equally  | large portion of the    |                   |
|     | ownership of a partnership or other enti-           | ty) of which the four   | dation has a 10% or o    | greater interest        |                         |                   |
|     | N/A   |                         |                          |                         |                         |                   |
| 2   | Information Regarding Contribution,                 |                         | ·                        | _                       |                         |                   |
|     | Check here ► X if the foundation onl                | y makes contributior    | is to preselected char   | itable organizations a  | and does not accept     |                   |
|     | unsolicited requests for funds. If the four         | ndation makes gifts,    | grants, etc , to individ | duals or organization:  | s under other condition | s,                |
|     | complete items 2a, b, c, and d See ins              | tructions.              |                          |                         |                         |                   |
| а   | The name, address, and telephone num                | nber or email addres    | s of the person to who   | om applications shou    | ld be addressed:        |                   |
|     | N/A   |                         |                          |                         |                         |                   |
|     |   |                         |                          |                         | <del>-</del>            |                   |
| b   | The form in which applications should b             | e submitted and info    | ormation and materials   | s they should include   | •                       |                   |
|     | N/A   |                         |                          |                         |                         |                   |
| С   | Any submission deadlines:                           |                         |                          |                         |                         |                   |
|     | N/A   |                         |                          | <u></u> _               |                         |                   |
| d   | Any restrictions or limitations on awards           | s, such as by geogra    | phical areas, charitab   | le fields, kinds of ins | atutions, or other      |                   |
|     | factors:  |                         |                          |                         |                         |                   |
|     | N/A   |                         |                          |                         |                         |                   |
| DAA |   |                         |                          |                         |                         | Form 990-PF (2010 |

Form 990-RF (2019) Theodore & Elizabeth Schmidt Family 68-0422838

Part XVI Supplementary Information (continued)

|   | g the Year or Approved  If recipient is an individual, |                      |                                  |                  |
|---|--|----------------------|----------------------------------|------------------|
| Recipient <sup>2</sup>  | show any relationship to                               | Foundation status of | Purpose of grant or contribution | Amount           |
| Name and address (home or business)   | any foundation manager<br>or substantial contributor   | recipient            | contribution                     |                  |
| a Paid during the year Logan Neal 8091 South 150 East Sandy UT 84070          | None   | Individual S         | cholarship                       | 7,387            |
| Milos Petrovic<br>2321 Dewight Way<br>Berkley CA 94704                        | None   | Individual S         | cholarship                       | 11,250           |
| Nate Azera<br>2519 West 5400 South<br>Taylorsville UT 84129                   | None   | Individual S         | cholarship                       | o 4,295          |
| Neuman Kante<br>351 West University Blvd<br>Cedar City UT 84720               | None   | Individual S         | cholarship                       | 13,500 ر         |
| Boy Scouts of America<br>PO Box 152079<br>Irving TX 75015-2079                | Public Charity   |                      | al Support                       | 300              |
| Global Prosperity & Peace<br>192 Lake Breeze Road<br>Saratoga Springs UT 8404 | Public Charity   |                      | al Support                       | 18,000           |
| Phi Delta Theta Education<br>2 South Campus Avenue<br>Oxford OH 45056         | Fund<br>Public Charity                                 |                      | al Support                       | 100,000          |
| Rescue Mission of Salt La<br>463 S. 400 West<br>Salt Lake City UT 84101       | ke<br>Public Charity                                   |                      | al Support                       | t 600            |
| Salt Lake City Mission<br>PO Box 142<br>Salt Lake City UT 84110-              | Public Charity   | Exempt<br>Gener      | al Support                       | t 600            |
| The Salvation Army P.O.Box 96322 Wahsington DC 20090                          | Public Charity   |                      | al Support                       | t 600<br>157,832 |
| Total b Approved for future payment   |  |                      | 34                               | 131,032          |
| N/A   |  |                      |                                  |                  |
| ,   |  |                      |                                  |                  |
|   |  |                      |                                  |                  |
|   |  |                      |                                  |                  |
|   |  |                      |                                  |                  |
|   |  |                      |                                  |                  |
|   |  |                      |                                  |                  |
|   |  | 1                    | 1                                |                  |

RartXV: Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of Amount contribution any foundation manager recipient Name and address (home or business) or substantial contributor a Paid during the year Utah Food Bank Public Charity Exempt 3150 South 900 West 300 Salt Lake City UT 84119 General Support The Heritage Foundation 214 Massachusetts Avenue Public Charity Exempt General Support 1,000 Washington DC 20002 ▶ 3a **b** Approved for future payment N/A ▶ 3b **Total** 

| Form 990-PF (2019) Theodore & Elizabeth -Part-XVI-A Analysis of Income-Producing   |                      | Family68-           | 04228                    | 138                         | Page 12   |
|--|----------------------|---------------------|--------------------------|-----------------------------|---|
| Enter gross amounts unless otherwise indicated   | · · · I              | d business income   | Excluded                 | by section 512, 513, or 514 | (e)   |
| 4.8  | (a)<br>Business code | (b)<br>Amount       | (c)<br>Exclusion<br>code | (d)<br>Amount               | Related or exempt<br>function income<br>(See instructions.) |
| Program service revenue.     a   |                      |                     | +                        |                             | <u> </u>  |
| b  |                      |                     |                          |                             |   |
| c  | _                    |                     |                          |                             |   |
| d  | _                    |                     | <del> </del>             |                             |   |
| e  |                      |                     | <del> </del>             |                             |   |
| g Fees and contracts from government agencies  | -                    | <del> </del>        |                          |                             |   |
| 2 Membership dues and assessments  |                      |                     |                          |                             |   |
| 3 Interest on savings and temporary cash investments   |                      |                     |                          |                             |   |
| 4 Dividends and interest from securities   |                      | and design are      | 14                       | 63,673                      | thanse it be  |
| 5 Net rental income or (loss) from real estate   | (                    |                     | <b>作产业信</b>              |                             |   |
| a Debt-financed property   |                      | <del></del>         | _                        |                             |   |
| <ul><li>b Not debt-financed property</li><li>6 Net rental income or (loss) from personal property</li></ul>  | -                    |                     | <del>-</del>             |                             |   |
| 7 Other investment income  |                      | <u> </u>            | <del> </del>             |                             |   |
| 8 Gain or (loss) from sales of assets other than inventory   |                      | <del></del>         | 18                       | -63,461                     |   |
| 9 Net income or (loss) from special events   |                      |                     |                          |                             |   |
| 10 Gross profit or (loss) from sales of inventory  |                      |                     |                          |                             |   |
| 11 Other revenue a   | _                    |                     | -                        |                             |   |
| b  | -                    | <del></del>         | -                        |                             |   |
| c  | _                    | <del></del>         | _                        |                             |   |
|  | 1 1                  |                     |                          |                             |   |
| d  | -                    | -                   |                          |                             |   |
| e  |                      |                     | 0:49.                    | 212                         |   |
| e  |                      |                     | 0 - 1/52 - 1             | 212<br>13                   | 212   |
| e  |                      |                     |                          | 13                          |   |
| e  | Accomplish           |                     | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  (See worksheet in line 13 instructions to verify calculations)  Part-XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which income                                      | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part-XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which incomplishment of the foundation's exempt p | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  13 See worksheet in line 13 instructions to verify calculations )  Part-XVI-B Relationship of Activities to the Line No. Explain below how each activity for which income                                    | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which incomplishment of the foundation's exempt p | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part-XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which incomplishment of the foundation's exempt p | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part-XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which incomplishment of the foundation's exempt p | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part-XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which incomplishment of the foundation's exempt p | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which incomplishment of the foundation's exempt p | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which incomplishment of the foundation's exempt p | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part-XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which incomplishment of the foundation's exempt p | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part-XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which incomplishment of the foundation's exempt p | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part-XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which incomplishment of the foundation's exempt p | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which incomplishment of the foundation's exempt p | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part-XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which incomplishment of the foundation's exempt p | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which incomplishment of the foundation's exempt p | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which incomplishment of the foundation's exempt p | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which incomplishment of the foundation's exempt p | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which incomplishment of the foundation's exempt p | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part-XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which incomplishment of the foundation's exempt p | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part-XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which incomplishment of the foundation's exempt p | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |
| e  12 Subtotal Add columns (b), (d), and (e)  13 Total. Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculations )  Part XVI-B Relationship of Activities to the Line No.  Explain below how each activity for which incomplishment of the foundation's exempt p | Accomplish           | n column (e) of Par | pt Purp                  | oses                        | 212   |

Preparer's signature

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Scott A. Czaja, <u>CPA</u>

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|    | Form | 99         | 0- | PF        | (201      | <u>-</u> - |

5/26/20

Firm's EIN ▶ 87-0517754

Phone no

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Check \_\_\_\_\_ if self-employed

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Pnnt/Type preparer's name

Scott A. Czaja,

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## 19141 Theodore & Elizabeth Schmidt Family

| 68-0422838<br>FYE: 12/31/2019  | Federa                             | Federal Statements              | ents  |                       | •                                 |
|--|------------------------------------|---------------------------------|---|-----------------------|-----------------------------------|
| Statement 1 - For  | orm 990-PF, Pa                     | rt I, Line 16                   | rm 990-PF, Part I, Line 16c - Other Professional Fees   | ssional Fees          |                                   |
| Description  | Total                              | <u>r</u>                        | Net<br>Investment                                       | Adjusted<br>Net       | Charitable<br>Purpose             |
| Investment Advisory Fees \$ \$   | 7,655                              | , <sub>ν</sub> , <sub>ν</sub> , | 7,655   | \$                    | \$                                |
| Statement 2 - Form   |                                    | , Line 10b                      | 990-PF, Part II, Line 10b - Corporate Stock Investments | ck Investments        |                                   |
| Description  | Beginning<br>of Year               | <b>5</b> 0                      | End of<br>Year  | Basis of<br>Valuation | Fair Market<br>Value              |
| Common Stock UBS Account - 139<br>Common Stock UBS Account - 344<br>Mutual Funds UBS Account - 139 | \$ 1,975,474<br>155,045<br>203,555 |                                 | \$ 1,829,667<br>155,045<br>227,121                      | Cost<br>Cost<br>Cost  | \$ 3,359,678<br>457,560<br>91,607 |
| Total  | \$ 2,334,                          | , 074                           | \$ 2,211,833  |                       | \$ 3,908,845                      |
| Statement 3 - Form   |                                    | I, Line 10c                     | 990-PF, Part II, Line 10c - Corporate Bond Investments  | nd Investments        |                                   |
| Description Corp Bonds UBS Account - 139 Total   | Beginning of Year \$ 70,6          | 63<br>63<br>63                  | End of Year \$ 70,663                                   | Basis of Valuation    | Fair Market  Value  \$ 91,607     |
|  |                                    |                                 |   |                       |                                   |