		_	SECTION_6501(C)	(:4·)CC	NSENT-ATTACE	ED, NO	TAX~I	AYMENT-REQ	UIRED\ OMB No 1545-0047
	For		90-PF ▶□∘	or Sec	tion 4947(a)(1) Trust Treat ocial security numbers on	ted as Private	Foundation	de public.	2019
	Inter	Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990PF for instructions and the latest inf							Open to Public Inspection
	_		ndar year 2019 or tax year beginning	_		, and e	nding	A Foreign idealising	dian aumbas
			f foundation					A Employer identifica	
			MANS FAMILY FOUNDAT				Room/suite	81-32842	70
	_1	50	0 BROOKS AVENUE		·		Noom/suite	B Telephone number 585-328-	2550
			town, state or province, country, and ZIP of HESTER, NY 14624	r foreign po	ostal code			C If exemption application	is pending check here
	G	heck	k all that apply. Initial return		Initial return of a f	ormer public o	charity	D 1. Foreign organizat	tions, check here
			Final return Address chang		Amended return Name change			Foreign organization check here and attack	s meeting the 85% test, ch computation
X	H	_	k type of organization. X Section 5 ection 4947(a)(1) nonexempt charitable tru		empt private foundation Other taxable private found:	ation (7	E If private foundation under section 507(b	status was terminated
	I Fair market value of all assets at end of year J Accounting method: X Cash						ual	1	in a 60-month termination
	•	rom f	Part II, col (c), line 16)		ner (specify) in (d), must be on cash bas	us)		under section 507(t	
	_		Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)		(a) Revenue and	(b) Net in	vestment	(c) Adjusted net	(d) Disbursements for charitable purposes
	_		necessarily equal the amounts in column (a))		expenses per books	inco	ome	income N/A	(cash basis only)
			Contributions, gifts, grants, etc., received	-	1,000,240.			N/A	***
		3	Interest on savings and temporary cash investments	į	402.		402.		STATEMENT 1
	•	4	Dividends and interest from securities						
121		i .	Gross rents	}					
7		_	Net rental income or (loss) Net qain or (loss) from sale of assets not on line in	10	0.				
· C	֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	b	Gross sales price for all assets on line 6a 1,000,2						
64	9	l	Capital gain net income (from Part IV, line 2)			95	7,261.		
₹	α	8	Net short-term capital gain						
		9	Income modifications Gross sales less returns	ŀ			······		
SCANNED MAY 2 0 2021			l and allowances Less Cost of goods sold					<u> </u>	
ž		i	Gross profit or (loss)						
S		11	Other income						
ଊ	_	_	Total Add lines 1 through 11 [] [] []	ĭ	1,000,642.	95	7,663.		
		13 14	Compensation of officers directors, trustees etc Other employee salaries and wages	·	U •		0.		0.
		l	Pension plans, employee benefits	f					
	0.0	l		T 2	6,288.		REC	EIVED	6,288.
j	Expenses	b	Accounting fees	_		<u>_</u>		72	
j 1			Other professional fees	-		0028	JUN 1	0 2020	
	Administrative	18	Interest Taxes	-		 ŏ 		8	
	stra	19	Depreciation and depletion				OGDI	N, UT	
•	Ë	20	Оссирапсу				000		
,)		j	Travel, conferences, and meetings	}-					
	and	22	Printing and publications Other expenses STM	т з	206.		0.		206.
j	tinc	24	Total operating and administrative	·	2001				2001
•	Operating		expenses. Add lines 13 through 23		6,494.		0.		6,494.
1	0	25	Contributions, gifts, grants paid	<u> </u>	1,000,000.				1,000,000.
)		26	Total expenses and disbursements.		1,006,494.		0.		1,006,494.
		27	Add lines 24 and 25 \(\bigcap\) \(\bigcap\		1,000,434.		0.		1,000,454.
			Excess of revenue over expenses and disbursem	ents	<5,852.>				
			Net investment income (if negative, enter -0	-			7,663.		
		C	Adjusted net income (if negative, enter -0-)	1 N N N L		<u>, , , , , , , , , , , , , , , , , , , </u>		N/A	<u> </u>

923501 12-17-19 LHA For Paperwork Reduction Act Notice, see instructions.

20415 752200 81-3284270

100 IUIA	i ilavilliles allu	iiet assets/juliu Da	iaiices		1
	Analysis	of Changes in	NAT Accate	or Fund Ra	alancee

Foundations that do not follow FASB ASC 958, check here 🕨 🗓

1	Total 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	97,258.
2	Enter amount from Part I, line 27a	2	<5,852.>
3	Other increases not included in line 2 (itemize)	3	0.
4	Add lines 1, 2, and 3	4	91,406.
5	Decreases not included in line 2 (itemize)	5	0.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 29	6	91,406.

97,258

97,258

0.

0.

258.

Form 990-PF (2019)

Fund Balances

Zet a

23 Total liabilities (add lines 17 through 22)

24 Net assets without donor restrictions25 Net assets with donor restrictions

and complete lines 26 through 30.

29 Total net assets or fund balances

26 Capital stock, trust principal, or current funds

and complete lines 24, 25, 29, and 30,

Foundations that follow FASB ASC 958, check here

27 Paid-in or capital surplus, or land, bldg, and equipment fund

28 Retained earnings, accumulated income, endowment, or other funds

91,406

0.

406

406

	MANS FAMILY FO					0.	1-328	42/0	Page 3
(a) List and describe t	and Losses for Tax of the kind(s) of property sold (for rehouse, or common stock, 20	or example, real esta		(b) How P - Pu	acquired rchase	(c) Date a	acquired	(d) Date (mo , day	
	NS FOOD MARKE		CLASS B	D - D0	nation	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(1110 , dd)	/• • • • • • • • • • • • • • • • • • •
b STOCK	TANAM GOOT GIVE	ib, inc.	CHASS B		D	VARIO	าบร	07/09	/19
C	_							0.703	<u>, </u>
d			_						
е								L	
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				ain or (loss s (f) minus		
1 000 240		_	42.07						261
b 1,000,240.		_	42,97	9.				<u>957,</u>	201.
d		-							
<u>e</u>									
Complete only for assets showing	g gain in column (h) and own	ed by the foundation	on 12/31/69		(1) Gains (Ci	ol. (ħ) gaın	minus	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		xcess of col. (1) col. (3), if any		còl	. (k), but n	ot less tha (from col (n -0-) or	
<u>a</u>								~==	0.54
<u>b</u>								957,	261.
<u>c</u>	· · · · · · · · · · · · · · · · · · ·		<u> </u>						
d									
<u>e</u>	C 16 ann als		7	7	-				
2 Capital gain net income or (net cap	oital loss) If (loss) er	o enter in Part I, line nter -0- in Part I, line	. 7) ₂				957,	261.
	,		, ,	7					
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, 6	•	(5) and (6).							
If (loss), enter -0- in Part I, line 8				<u> </u>			N/A	·	
Part V Qualification Ur	nder Section 4940(e)	for Reduced	Tax on Net	Investn	nent Inco	me			
(For optional use by domestic private	foundations subject to the se	ction 4940(a) tax on	net investment in	come.)					
If section 4940(d)(2) applies, leave th	ic nort blank								
11 Section 4540(0)(2) applies, leave th	is part biarin.								
Was the foundation liable for the secti				ioqs				Yes _	X No
If "Yes," the foundation doesn't qualify									
1 Enter the appropriate amount in ea			ore making any er					(d)	
Base periód years	(b (a.in.) Adjusted qualifyii		Net value of no	(C) ncharitah!e	e-use assets	1,	Distrit	(d) oution ratio	٥١١
Calendar year (or tax year beginnin	5 ···/	,109,290.	1400 40100 01 110		30,797			nded by col. (187.00	
2018	13	0.			0,737				0000
2017		0.			0				0000
2015						<u> </u>			0000
2014									
	<u> </u>			_					
2 Total of line 1, column (d)						2		187.00	3107
3 Average distribution ratio for the 5	-year base period - divide the	total on line 2 by 5.0), or by the numbe	er of years					-
the foundation has been in existent	ce if less than 5 years					3		62.33	4369
4 Enter the net value of noncharitable	e-use assets for 2019 from Pa	art X, line 5				4		216,	<u>513.</u>
						1 1	_		
5 Multiply line 4 by line 3						5	1	3,496,	<u> 201.</u>
								0	C 7 7
6 Enter 1% of net investment income	e (1% of Part I, line 27b)					6		<u>,</u>	<u>577.</u>
7 Add lines 5 and 6						,	1	3,505,	778
7 Add lines 5 and 6						7		<u>,,,,,,,</u>	, , , , ,
8 Enter qualifying distributions from	Part XII line 4					8		1,006,	494.
If line 8 is equal to or greater than	·	/I line 1h and some	data that nort were	a a 10/ +a	rate			_, 555,	
See the Part VI instructions.	inie 7, check the DOX III Faft V	i, inic iu, anu cump	nete that part usin(ya 170 laX	ialt.				
923521 12-17-19							F	orm 990-P	F (2019)

orm 990'PF (2019) WEGMANS FAMILY FOUNDATION,			Page 4
Part VI Excise Tax Based on Investment Income (Section		instruc	tions
1a Exempt operating foundations described in section 4940(d)(2), check here			
Date of ruling or determination letter: (attach copy of le			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check	chere and enter 1%	<u>1</u>	9,153.
of Part I, line 27b] ,		
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations,	, enter 4% of Part I, line 12, col. (b)		
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations	s only; others, enter -0-)		0.
3 Add lines 1 and 2	3	1	9,153.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundation	ns only; others, enter -0-)		0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, ente	er -0-	1	9,153.
6 Credits/Payments:			
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a 0.		
b Exempt foreign organizations - tax withheld at source	6b' O.		
c Tax paid with application for extension of time to file (Form 8868)	6c 0.		
d Backup withholding erroneously withheld	6d 0.		
7 Total credits and payments Add lines 6a through 6d	7		0.
B Enter any penalty for underpayment of estimated tax. Check here X if Form 22			726.
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed (\$		1	9,879.
O Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount ov			70.7
1 Enter the amount of line 10 to be: Credited to 2020 estimated tax	Refunded 11		
Part VII-A Statements Regarding Activities			
a During the tax year, did the foundation attempt to influence any national, state, or I	local legislation or did it participate or intervene in		Yes No
any political campaign?	local legislation of the it participate of littervene in	10	X
· ·	and purposes? Can the unstructions for the definition	1a	$\frac{x}{x}$
b Did it spend more than \$100 during the year (either directly or indirectly) for politic		16	
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	d copies of any materials published or		
distributed by the foundation in connection with the activities		\vdash	
c Did the foundation file Form 1120-POL for this year?		1c	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed of	• •		
(1) On the foundation. > \$ (2) On foundation			
e Enter the reimbursement (if any) paid by the foundation during the year for political managers ▶ \$	al expenditure tax imposed on foundation		
Has the foundation engaged in any activities that have not previously been reported	d to the IRS?	2	X
If "Yes," attach a detailed description of the activities.			
Has the foundation made any changes, not previously reported to the IRS, in its go	overning instrument, articles of incorporation, or		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the char		3	X
a Did the foundation have unrelated business gross income of \$1,000 or more during	-	4a	X
b If "Yes." has it filed a tax return on Form 990-T for this year?	N/A	4b	
Was there a liquidation, termination, dissolution, or substantial contraction during		5	X
If "Yes," attach the statement required by General Instruction T	•		
Are the requirements of section 508(e) (relating to sections 4941 through 4945) sa	atisfied either:		
By language in the governing instrument, or			
By state legislation that effectively amends the governing instrument so that no research.	mandatory directions that conflict with the state law		
remain in the governing instrument?	mandatory an obtains that sommet with the state law	6	Х
Did the foundation have at least \$5,000 in assets at any time during the year? If "Ye	es " complete Part II. col. (c), and Part YV	7	X
Did the loutibation have at least \$5,000 in assets at any time during the year. If It	es, complete rait ii, coi (c), and rait xv	\ ' -	
Enter the states to which the foundation reports or with which it is registered. See	instructions. ►	.	
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF	F to the Attorney General (or designate)		
of each state as required by General Instruction G? If "No," attach explanation	SEE STATEMENT 5	8b	X
Is the foundation claiming status as a private operating foundation within the mean			
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "\		9	Х
Did any persons become substantial contributors during the tax year? if "Yes," attac		10	X
			-PF (2019)

Form **990-PF** (2019)

X

35

4a

during the year?

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,

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

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

Schedule C, to determine if the foundation had excess business holdings in 2019)

had not been removed from jeopardy before the first day of the tax year beginning in 2019?

Yes X No

N/A

TOTAL STOCK (2019) WEGINANS PARTIES FOUNDATION			01-3204	<u> </u>		Page 6
Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be R	Required _{(conti}	nued)		150	
5a During the year, did the foundation pay or incur any amount to:			[]		Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section			res X No			
(2) Influence the outcome of any specific public election (see section 4955), or	r to carry on, directly or indire		. 👽			
any voter registration drive?	•		es X No	4		
(3) Provide a grant to an individual for travel, study, or other similar purposes		L\	es X No			
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section		. ভি			
4945(d)(4)(A)? See instructions			'es X No			
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or i		es X No			
the prevention of cruelty to children or animals?	don the evenetions decembed		es 🛕 No			
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance? See instru	•	in Regulations	NT / 2			
Organizations relying on a current notice regarding disaster assistance. See institu			N/A	5b		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		uno d				
expenditure responsibility for the grant?		- /	/			
If "Yes," attach the statement required by Regulations section 53 4945-5(d).	L	V/A1	es No	;		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to g	nav nremijime op					
a personal benefit contract?	Day premiums on		es X No			
b Did the foundation, during the year, pay premiums, directly or indirectly, on a pi	ersonal henefit contract?	· · · · · ·	E3 [42] NO [6b		X
If "Yes" to 6b, file Form 8870.	ersonar benefit contract,		F	, 00		
7a At any time during the tax year, was the foundation a party to a prohibited tax si	helter transaction?		es X No			
b If "Yes," did the foundation receive any proceeds or have any net income attribu		'	N/A	7b		
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$			-17/11			
excess parachute payment(s) during the year?	1,000,000 in ramaneration of		es X No			
Part VIII Information About Officers, Directors, Truste	es, Foundation Mar					
Paid Employees, and Contractors	•					
1 List all officers, directors, trustees, and foundation managers and th	eir compensation.					
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred	1 ((e) Expe	ense
(a) Name and address	to position	enter -0-)	and delerred compensation	a	allowar	ices
,		•				
		_				
SEE STATEMENT 6		0.	0.	ļ		<u>0.</u>
			,			
				 		
	·					
		1				
Compensation of five highest-paid employees (other than those inclination)	uded on line 1). If none, a	enter "NONE."				
		1	(d) Contributions to	1	e) Expe	ense
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deterred compensation	aò	e) Expe count, allowan	other
NONE	devoted to position		compensation	 	allowari	
			i			
				+		
				1		
					_	
Total number of other employees paid over \$50,000						0
			Form	990	-PF (2019)

Form 990-PF (2019) WEGMANS FAMILY FOUNDATION, INC	<u> </u>	3284270 Page 7
Part VIII Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. If none, e	enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u> 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant	ctatistical information such as the	<u> </u>
number of organizations and other beneficiaries served, conferences convened, research papers	produced, etc.	Expenses
1 N/A		
2	1-14	
	-	
3		
4		
		•
Part IX-B Summary of Program-Related Investments		····
Describe the two largest program-related investments made by the foundation during the tax year	r on lines 1 and 2.	Amount
1 <u>N/A</u>		
All other program-related investments. See instructions		
3		
Total. Add lines 1 through 3	>	0.
		Form 990-PF (2019)

	The state of the s			3204270 Faye 6
LP	art X Minimum Investment Return (All domestic foundations must com	plete this part. Foreign foun	dations, s	ee instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., pu	rposes:		
a	Average monthly fair market value of securities		1a	0.
b	Average of monthly cash balances		1b	219,810.
C	Fair market value of all other assets		1c	
d	Total (add lines 1a, b, and c)		1d	219,810.
е	Reduction claimed for blockage or other factors reported on lines 1a and			.
	1c (attach detailed explanation) 1e	0.		
2	Acquisition indebtedness applicable to line 1 assets		2	0.
3	Subtract line 2 from line 1d		3	219,810.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instru	ıctıons)	4	3,297.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, li		5	216,513.
6	Minimum investment return. Enter 5% of line 5		6	10,826.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) pl	rivate operating foundations and	d certain	
	foreign organizations, check here and do not complete this part.)			
1	Mınımum investment return from Part X, line 6		_1	10,826.
2a	Tax on investment income for 2019 from Part VI, line 5	19,153.		
b	Income tax for 2019 (This does not include the tax from Part VI.)			
C	Add lines 2a and 2b	-	2c	19,153.
3	Distributable amount before adjustments Subtract line 2c from line 1		3	0.
4	Recoveries of amounts treated as qualifying distributions		4	0.
5	Add lines 3 and 4		5	0.
6	Deduction from distributable amount (see instructions)		6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	<u> </u>	7	0.
P	art XII Qualifying Distributions (see instructions)			<u>-</u>
<u> </u>	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:			
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26		1a	1,006,494.
ь	Program-related investments - total from Part IX-B	•	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., pu	irposes	2	
3	Amounts set aside for specific charitable projects that satisfy the.			
a	Suitability test (prior IRS approval required)	ŀ	3a	
	Cash distribution test (attach the required schedule)		3b	
4	Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII	I. line 4	4	1,006,494.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	,	-	
	income. Enter 1% of Part I, line 27b		5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4		6	1,006,494.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calcul	ating whether the foundation or		
	4940(e) reduction of tax in those years.			

Form **990-PF** (2019)

Part XIII	Undistributed	Income	(see instructions)
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	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,	Обираз	1 0213 \$1101 10 20 10	2010	
line 7				0.
2 Undistributed income, if any, as of the end of 2019	1			
a Enter amount for 2018 only			0.	
b Total for prior years:		_		
		0.		
3 Excess distributions carryover, if any, to 2019:	1			
a From 2014	ł			
b From 2015				
c From 2016				
d From 2017				
e From 2018 15, 253, 655.				
f Total of lines 3a through e	15,253,655.			-
4 Qualifying distributions for 2019 from			·	
Part XII, line 4. ► \$ 1,006,494.				
a Applied to 2018, but not more than line 2a			0.	١.
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				* **
(Election required - see instructions)	0.	ĺ		
d Applied to 2019 distributable amount				0.
e Remaining amount distributed out of corpus	1,006,494.		· · · · · · · · · · · · · · · · · · ·	
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d) the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	16,260,149.			
b Prior years' undistributed income Subtract	10,200,143.	· · · · · · · · · · · · · · · · · · ·		-
line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously		•		
assessed		- 0.		
d Subtract line 6c from line 6b. Taxable			programme in 4 4 gr	• •
amount - see instructions		0.		
e Undistributed income for 2018. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2019 Subtract		,		
lines 4d and 5 from line 1. This amount must				
be distributed in 2020				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	1			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2014		, , , , , , , , , , , , , , , , , , ,	***************************************	
not applied on line 5 or line 7	0.		'	
9 Excess distributions carryover to 2020.	-	· · · · · · · · · · · · · · · · · · ·		
Subtract lines 7 and 8 from line 6a	16,260,149.			
O Analysis of line 9.	, ,			
a Excess from 2015				
b Excess from 2016	1		ļ	
c Excess from 2017				
d Excess from 2018 15, 253, 655.				1
e Excess from 2019 1,006,494.				

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	FAMILY FOU		iC.		284270 Page 10
Part XIV Private Operating F	·			N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo			▶ ∟		
b Check box to indicate whether the foun	dation is a private operatir	ng foundation described		4942(j)(3) or	4942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year_		Prior 3 years		
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4, for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c		_			
3 Complete 3a, b, or c for the alternative test relied upon:					
a "Assets" alternative test - enter.					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6, for each year listed					
c "Support" alternative test - enter.					
(1) Total support other than gross			+		
investment income (interest,					
dividends, rents, payments on securities loans (section					
512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income			<u> </u>		
Part XV Supplementary Info			if the foundation	had \$5,000 or mo	ore in assets
at any time during t	ne year-see instri	uctions.)			
1 Information Regarding Foundation	•				
a List any managers of the foundation wh year (but only if they have contributed r			ributions received by the	foundation before the clo	se of any tax
DANIEL R. WEGMAN					
b List any managers of the foundation wh other entity) of which the foundation ha			(or an equally large portion	on of the ownership of a p	partnership or
NONE					
2 Information Regarding Contributi					
Check here 🕨 🗓 if the foundation of					uests for funds If
the foundation makes gifts, grants, etc.,	to individuals or organiza	tions under other condit	tions, complete items 2a,	b, c, and d.	
a The name, address, and telephone num	ber or email address of the	e person to whom applic	cations should be address	ed.	,
b The form in which applications should b	pe submitted and informati	ion and materials they sl	hould include.		
c Any submission deadlines.					
d Any restrictions or limitations on award	s, such as by geographica	l areas, charitable fields,	kinds of institutions, or o	other factors:	

3 Grants and Contributions Paid During the Ye	·	Down aut		
Recipient	If recipient is an individual	Payment		
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Paid during the year	or substantial contributor	, recipioni		
			1	
F.F. THOMPSON FOUNDATION, INC.		PC	TO BE USED FOR	
350 PARRISH STREET			OPERATIONAL EXPENSES	
CANANDAIGUA, NY 14424		_[_		500,000.
ι				
ENCOMPASS: RESOURCE FOR LEARNING		PC	TO BE USED FOR	
4 LAKE VIEW PARK			OPERATIONAL EXPENSES	
ROCHESTER, NY 14613				500,000.
			•	
				<u> </u>
	,			
		<u> </u>		
Total b Approved for future payment		<u> </u>	▶ 3a	1,000,000.
Approved for future payment		ł		
NONE				
				
i				
				····
		,		
-				
		}		
Total			▶ 3b	0.
			Fo	rm 990-PF (2019)

Part XVI-A	Analysis of Income-Producing Ac	tivities
I WILLY I-A	Alialysis of illoonic-i roddellig Ad	LIVILICO

(a) Business code	(b)	(c) Exclu-	(d)	(e)
			(0)	Related or exempt
	Amount	sion	Amount	function income
		1		
			_	
		14	402.	
	•			
		18		
	0	•	402.	0.
			13	402.
<u> </u>				
	o the Accom		18	18

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes).
23621 12-17-	. Form 990-PF (20

Part		Information Re	egarding Tran		nd Transactions a	nd Relations	hips With Nonchar		Pa	ige is
	1	Exempt Organ							IV	NI.
					ng with any other organizat g to political organizations'		ction 501(c)	-	Yes	NO
•		from the reporting found	•	•	• •	•				
	Cash	• •	and to a nononana	iolo oxompt of	gamzanon or.			1a(1)		Х
٠,		assets						1a(2)		Х
b Otl	her tran	sactions.								
(1)	Sales	of assets to a noncharita	ible exempt organiza	tion				1b(1)		Х
(2)	Purcl	nases of assets from a no	ncharitable exempt o	organization			•	1b(2)		Х
٠.		al of facilities, equipment,						1b(3)		X
٠,		bursement arrangements						1b(4)		X
		s or loan guarantees rmance of services or me	ambarahin ar fundrai	cina naliaitatia	200			1b(5)		X
		f facilities, equipment, ma	•	-				1b(6) 1c		X
	_		· ·		• •	always show the fair	r market value of the goods,		iets.	
or	service		oundation. If the foul	ndation receiv			on or sharing arrangement, s		,	
(a) Line n		(b) Amount involved	,		e exempt organization	(d) Descripti	on of transfers, transactions and	sharing arr	angemen	ts
``		. ,		N/A	· · · · · · · · · · · · · · · · · · ·					
	\perp		ļ				·			
	_									
	-			· · · · · · · · · · · · · · · · · · ·			 			
	 -		 		 					
			-			-				
		-								
							<u></u>			
	-									
ın s	section	ndation directly or indirect 501(c) (other than section complete the following scho	n 501(c)(3)) or in se		or more tax-exempt organ	nizations described	[Yes	X] No
	•	(a) Name of org			(b) Type of organization		(c) Description of relations	hip		
		N/A								
								 -	·	
Sign Here	and be		nplete Declaration of pre		accompanying schedules and staxpayer) is based on all informations.		has any knowledge ret	y the IRS ourn with the own below?	See inst	r
	1 3.91	Print/Type preparer's na		Preparer's si		Date	Check If PTIN			
		CHRISTINE		,	. ^		self- employed			
Paid		SACKETT		Chris	tine a Secret	4/16/2020		1233	961	
Prepa		Firm's name ►NIX	ON PEABOD	Y LLP			Firm's EIN ► 16-0			
Use (Only									
		Firm's address ► 13								
		RO	CHESTER,	NY 146	U4-1792		Phone no. 585-2			
							F	orm 990)-アト (2019)

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF.

➤ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545 0047

2019

Name of the organization

Employer identification number

W	EGMANS FAMILY FOUNDATION, INC.	81-3284270
Organization type (check	one)	-
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	•	
	is covered by the General Rule or a Special Rule.	
Note: Only a section 501(c	c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	ile See instructions
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totalin yone contributor. Complete Parts I and II. See instructions for determining a contributor.	• • • • • • • • • • • • • • • • • • • •
Special Rules		
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, for, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount and 1 Complete Parts I and II	or 16b, and that received from
year, total contrib	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from outions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educate to children or animals. Complete Parts I, II, and III	•
year, contribution is checked, enter purpose Don't co	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from s exclusively for religious, charitable, etc., purposes, but no such contributions totaled in here the total contributions that were received during the year for an exclusively religious implete any of the parts unless the General Rule applies to this organization because it lie, etc., contributions totaling \$5,000 or more during the year	nore than \$1,000 If this box is, charitable, etc,
but it must answer "No" or	hat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (F n Part IV, line 2, of its Form 990, or check the box on line H of its Form 990·EZ or on its F the filing requirements of Schedule B (Form 990, 990·EZ, or 990·PF)	

Name of c	organization		Employer identification number
WEGMA	NS FAMILY FOUNDATION, INC.	20000000	81-3284270
Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	al space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
1	DANIEL R. WEGMAN 1500 BROOKS AVENUE ROCHESTER, NY 14624	\$1,000,2	(Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
		\$	Person Payroll (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d)
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) <u>No.</u>	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d)
			Person Payroll

923452 11-06-19

(Complete Part II for noncash contributions)

Name of organization

Employer identification number

WEGMANS FAMILY FOUNDATION, INC.

81-3284270

rt II I	Noncash Property (see instructions) Use duplicate copies of Par	in in additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
2	,117 SHARES WEGMANS FOOD MARKETS, INC. CLASS B		
<u>1</u> NO	ON-VOTING COMMON STOCK		
-		\$ <u>1,000,240.</u>	_07/03/19
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received

	rganization		Employer identification number					
WEGMAI	NS FAMILY FOUNDATION, IN	C.	81-3284270					
Part III		ons to organizations described in sec through (e) and the following line entr haritable, etc., contributions of \$1,000 or le	ction 501(c)(7), (8), or (10) that total more than \$1,000 for the year					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
-		(e) Transfer of gift						
	Transferee's name, address, an		Relationship of transferor to transferee					
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I		(1, coo o g						
	(e) Transfer of gift							
	Transferee's name, address, an		Relationship of transferor to transferee					
(a) No.								
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	(e) Transfer of gift							
	Transferee's name, address, and	Relationship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
-	(e) Transfer of gift							
_	Transferee's name, address, and	1 ZIP + 4	Relationship of transferor to transferee					

FORM 990-PF INTEREST ON SAV	INGS AND TEM	PORARY	CASH	INVESTMENTS	STATEMENT 1
SOURCE	(A REVE PER B	NUE		(B) INVESTMENT INCOME	(C) ADJUSTED NET INCOME
ESL FEDERAL CREDIT UNION		402.		402.	
TOTAL TO PART I, LINE 3		402.	<u> </u>	402.	
FORM 990-PF	LEGAL	FEES			STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	NET IN	3) NVEST- INCOME	(C) ADJUSTED NET INCOM	
NIXON PEABODY LLP	6,288.		0 .	•	6,288.
TO FM 990-PF, PG 1, LN 16A =	6,288.	0.			6,288.
FORM 990-PF	OTHER E	XPENSES	S		STATEMENT 3
DESCRIPTION	(A) EXPENSES PER BOOKS		B) IVEST- INCOME	(C) ADJUSTED NET INCOM	
DELAWARE SECRETARY OF STATE - ANNUAL FILING FEE PUBLICATION OF LEGAL NOTICE NEW YORK STATE DEPARTMENT OF	125.		0.	•	125. 31.
LAW - ANNUAL FILING FEE	50.		0.		50.
TO FORM 990-PF, PG 1, LN 23	206.		0.	•	206.

FOOTNOTES

STATEMENT 4

PART VI, LINE 9. AS PROVIDED IN GENERAL INSTRUCTION V, AN ORGANIZATION TERMINATING ITS PRIVATE FOUNDATION STATUS UNDER IRC SECTION 507(B)(1)(B) MAY FILE FORM 990-PF WITHOUT PAYING THE SECTION 4940 EXCISE TAX BASED ON INVESTMENT INCOME IF IT FILED A CONSENT UNDER SECTION 6501(C)(4) WITH ITS NOTICE OF TERMINATION PRIOR TO THE START OF THE 60-MONTH PERIOD. THE FOUNDATION HAS FILED A CONSENT UNDER SECTION 6501(C)(4), A COPY OF WHICH IS ATTACHED. NO TAX IS THEREFORE DUE.

FORM 990-PF EXPLANATION CONCERNING PART VII-A, LINE 8B

STATEMENT 5

EXPLANATION

AS REQUIRED, THE FOUNDATION FILES A COPY OF FORM 990-PF WITH THE NEW YORK ATTORNEY GENERAL. HOWEVER, BECAUSE THE FOUNDATION DOES NOT CONDUCT ACTIVITIES IN THE STATE OF DELAWARE, IT IS NOT REQUIRED TO FILE A COPY OF ITS FORM 990-PF WITH THE DELAWARE ATTORNEY GENERAL AND THERE IS NO MECHANISM FOR THE FOUNDATION TO DO SO.

	T OF OFFICERS, DO FOUNDATION MANAGE		STATEMENT 6			
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	EXPENSE ACCOUNT		
DANIEL R. WEGMAN 1500 BROOKS AVENUE ROCHESTER, NY 14624	CHAIR/DIRECTOR 0.50	0.	0.	0.		
STEPHEN R. VAN ARSDALE 1500 BROOKS AVENUE ROCHESTER, NY 14624	SECRETARY 0.50	0.	0.	0.		
EDWARD J. PETTINELLA 75 COLLEGE AVENUE ROCHESTER, NY 14607-1009	DIRECTOR 0.50	0.	0.	0.		
MILT SENDER 75 COLLEGE AVENUE ROCHESTER, NY 14607-1009	DIRECTOR 0.50	0.	0.	0.		
COLLEEN J. WEGMAN 1500 BROOKS AVENUE ROCHESTER, NY 14624	VICE CHAIR/TREA	ASURER 0.	0.	0.		
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	0.	0.	0.		