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Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation ▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

Department of the Treasury Internal Revenue Service ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

| Fo | r cal | endar year 2014 or tax year beginning | | | , 2014 | , and ending | 1 | | , 20 |
|--------------------------------------|------------|--|---------------|-----------------------------|---------------|---------------|-----|---------------------------------------|---|
| 1 | lame | of foundation | | | | | A | Employer identif | ication number |
|] | HAGI | LER PINKERTON FOUNDATION | | | | | 1 | 20-185431 | 2 |
| _ | | er and street (or P O box number if mail is not delivered | to stree | et address) | | Room/suite | В | | er (see instructions) |
| | | | | | | | | (91 | .8) 582-1112 |
| | 1502 | 2 S. BOULDER #21-F | | | | | | ,,, | , _ |
| _ | | town, state or province, country, and ZIP or foreign pos | tal code | • | | 1 | + | | |
| | • | | | | | | c | If exemption applica | ation is |
| , | PUT.S | SA, OK 74119 | | | | | | pending, check here | , |
| _ | | ck all that apply Initial return | | Initial return | of a former r | ublic charity | ∄. | 1 Foreign organiza | tions, shook been |
| _ | | Final return | _ | Amended ret | - | | ן ' | Foreign organiza Foreign organiza | • |
| | | Address change | | Name change | | | | 85% test, check h | nere and attach |
| н | Che | ck type of organization X Section 501(| c)(3) e | | | | 7 | computation . | |
| Ï | _ | ection 4947(a)(1) nonexempt charitable trust | \rightarrow | Other taxable pr | | tion | E | * | n status was terminated |
| $^{\perp}$ | | | | method X Ca | | rual | ╛ | - | o)(1)(A), check here . P |
| • | | I — | _ | specify) | 20.1 | ,, ,,, | | | s in a 60-month termination |
| | | | • | (d) must be on cas | | | - | | ,(1),(5),(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(1)(|
| Ð | | Analysis of Revenue and Expenses (The | | | | | | | (d) Disbursements |
| | | total of amounts in columns (b), (c), and (d) | | Revenue and expenses per | (b) Net inve | | (c) | Adjusted net | for charitable |
| | | may not necessanly equal the amounts in column (a) (see instructions)) | Ŭ | books | ıncon | ne | | income | purposes (cash basis only) |
| ╗ | 1 | Contributions, gifts, grants, etc., received (attach schedule) . | | 750. | | <u> </u> | | | " |
| g | <u></u> | Check if the foundation is not required to | | | | | | | |
| | 5 √3 | attach Sch B | | 8,403. | | 8,403. | | | |
| , | √ 3 | Dividends and interest from securities | | 7,462. | | 7,462. | | 1 REF | |
| 6 | 5a | Gross rents | | | | | | Torrect | |
| - 1 | | | | | | | | 181 <u> </u> | |
| 3 | | Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 | - | 50,756. | | | i | MAY 9 | 10/ |
| Ž | | Gross sales price for all 212.372. | - | | | ····· | | L | 10 2015 101 |
| اچ َ | - | Capital gain net income (from Part IV, line 2) . | | | 5 | 0,756. | -# | (To Carry Co | |
| WRevended y | 7 8 | Net short-term capital gain | | | | | | | i Tradition |
| | 9 | Income modifications | | | | | | | |
| | | Gross sales less returns | | | | | | | |
| | h | Less Cost of goods sold | | | | | | | |
| - | | Gross profit or (loss) (attach schedule) | | | | | | | |
| | 11 | Other income (attach schedule) ATCH. 1 | | 79,332. | 1 | 5,232. | | | |
| - 1 | 12 | Total. Add lines 1 through 11 | | 146,703. | 8 | 31,853. | | | |
| ٦ | 13 | Compensation of officers, directors, trustees, etc. | | 0 | | | | | |
| es | | Other employee salaries and wages | | | | | | | |
| Š | 15 | Pension plans, employee benefits | • | | | | | | |
| pe | 16 a | Legal fees (attach schedule) | | | | | | | |
| ũ | b | Accounting fees (attach schedule) | | 750. | | 200. | | | |
| <u>v</u> | c | Other professional fees (attach schedule) | | | | | | | |
| rat | 17 | Interest | | | | | | | |
| ist | 18 | Taxes (attach schedule) (see instructions)[2]. | | 302. | | | | | |
| Ë | 19 | Depreciation (attach schedule) and depletion. | | | | | | | |
| þ | 20 | Occupancy | | | | | | | |
| A E | 21 | Travel, conferences, and meetings | | | | | | _ | |
| aŭ | 22 | Printing and publications | | | | | | | |
| Operating and Administrative Expense | 23 | Other expenses (attach schedule) ATCH .3 . | | 23,385. | | 23,385. | | | |
| atir | 24 | Total operating and administrative expenses. | | |] | | | | |
| ēŗ | | Add lines 13 through 23 | | 24,437. | | 23,585. | | | |
| o | 25 | Contributions, gifts, grants paid | | 68,000. | | | | | 68,000 |
| _ | 26 | Total expenses and disbursements Add lines 24 and 25 | | 92,437. | | 23,585. | | | 68,000 |
| | 27 | Subtract line 26 from line 12 | | | | | | | |
| | а | Excess of revenue over expenses and disbursements | | 54,266. | | | | | |
| | b | Net investment income (if negative, enter -0-) | | | | 58,268. | | | |
| | _ | Adjusted net income (if negative enter -0-). | l | | | | | | 1 |

JSA For Paperwork Reduction Act Notice, see instructions. $^{4E1410\,1\,000}$ 15543F K931

Form 990-PF (2014

| Part II | Ralanca Shoote | Attached schedules and amounts in the description column should be for end-of-year | Beginning of year | End | of year |
|---------------|---|--|------------------------------|----------------------------|---|
| raitii | Datatice Sticets | amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| 1 0 | Cash - non-interest-beari | ng | 158,595. | 106,090. | 106,090. |
| 1 | | | | | |
| 3 / | Accounts receivable | | | | |
| | | btfut accounts ▶ | | | |
| 1 | | | | | |
| | | | | | |
| | | | | _ | |
| | | officers, directors, trustees, and other | | | |
| - 1 | | tach schedule) (see instructions) | | | |
| | | eceivable (attach schedule) | | | |
| | | btful accounts ▶ | | | |
| - 1 | | | | . <u> </u> | |
| | | eferred charges | | | |
| Ø 10 a i | | e government obligations (attach schedule) | | | |
| | | stock (attach schedule) ATCH 4 | 1,063,759. | 1,170,530. | 1,625,970 |
| | | bonds (attach schedule) | | | |
| 11 | Investments - land, building | s, bation | | | |
| 12 | (attach schedule) | loans | | | |
| | | and and adula) | | | |
| 14 | Land, buildings, and | | | • | |
| | Less accumulated deprecia | tion | | | |
| 15 | (attach schedule) Other assets (describe | >) | | | |
| | | completed by all filers - see the | | | |
| | | age 1, item I) | 1,222,354 | 1,276,620. | 1,732,060 |
| | | accrued expenses | 1,222,3011 | 1,2,0,020. | 27.027000 |
| | | | | | _ |
| - 1 | | | | | - |
| <u>ii</u> 20 | | | **- | 3.4. 7.4. 10. 4 | 1 |
| | | ors, trustees, and other disqualified persons | | | 1 |
| - | | otes payable (attach schedule) | | | 1 |
| 22 | Other liabilities (describe | • ▶) | | | - |
| 23 | Total liabilities (add las | on 17 through 22) | o | (| |
| $\overline{}$ | | es 17 through 22) | | | 1 |
| 88 | and complete lines | low SFAS 117, check here . ▶ ☐ 24 through 26 and lines 30 and 31. | | | |
| 24 R | Unrestricted | , | | | 1 |
| MI. | | | | | 1 |
| 물 26 | | · · · · · · · · · · · · · · · · · · · | | | 1 |
| 쾬 | Foundations that do | not follow SFAS 117, ▶ 🗓 | | | |
| 6 | | plete lines 27 through 31. | | | |
| <u>ي</u> 27 | | cipal, or current funds | | | 4 |
| % | | r land, bldg , and equipment fund | 1 000 354 | 1 076 600 | |
| 2 9 | • | ulated income, endowment, or other funds | 1,222,354. | 1,276,620. | = |
| → 1 | | d balances (see instructions) | 1,222,354. | 1,276,620. | <u>-</u> |
| 31 | Total liabilities and | net assets/fund balances (see | | | |
| | | | 1,222,354. | 1,276,620. | · <u> </u> |
| | | nges in Net Assets or Fund Balar | | | |
| | | palances at beginning of year - Part I | | | |
| | | ed on prior year's return) | | | 1,222,354 |
| | er amount from Part I | | | | 54,266 |
| | | ded in line 2 (itemize) ▶ | | 3 | |
| 4 Add | lines 1, 2, and 3 | | | 4 | 1,276,620 |
| 5 Dec | reases not included i | n line 2 (itemize) ▶ | | 5 | |
| 6 Tota | I net assets or fund b | palances at end of year (line 4 minus | line 5) - Part II, column (b |), line 30 6 | 1,276,620 |

| Part IV Capital Gains | and Losses for Tax on Inv | estment Income | | | |
|---|---|--|---|---|----------------------------------|
| | d describe the kind(s) of property sold (| • • | (b) How acquired P - Purchase D - Donation | (c) Date acquired (mo , day, yr) | (d) Date sold (mo , day, yr.) |
| a SEE PART IV SCHE | DULE | - | D - Donation | (,, | |
| b | | | | | |
| С | | | | | |
| <u>d</u> | | 10-pt | | | |
| <u>e</u> | | | | <u></u> | <u> </u> |
| (e) Gross sales price | (f) Depreciation allowed (or allowable) | (g) Cost or other basis plus expense of sale | | (h) Gain or (lo (e) plus (f) minu | |
| ab | | | | | |
| c | | | | | |
| d | | | | | |
| 9 | | | | | |
| Complete only for assets | showing gain in column (h) and owne | d by the foundation on 12/31/69 | (1) | Gains (Col (h) g | ain minus |
| (i) F M V as of 12/31/69 | (j) Adjusted basis as of 12/31/69 | (k) Excess of col (i) over col (j), if any | col | (k), but not less t Losses (from co | |
| a | | | | | |
| b | | | | | |
| C | | | | | |
| d | | | | | |
| e | | | | | |
| 2 Capital gain net income of | | gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7 | 2 | | 50,756. |
| | un or (loss) as defined in sections | | | - | |
| | | tructions) If (loss), enter -0- in | | | |
| Part I, line 8 | | duced Tax on Net Investment I | 3 | _ | 0 |
| | the section 4942 tax on the distrib | outable amount of any year in the b | ase period | 1? <u> </u> | Yes X No |
| | not qualify under section 4940(e) | | | | |
| (a) | | ar, see the instructions before making | ig any ent I | (d) | |
| Base penod years Calendar year (or tax year beginning in) | (b) Adjusted qualifying distributions | (c) Net value of noncharitable-use assets | | Distribution of (col (b) divided by | col (c)) |
| 2013 | 70,000. | 1,810,900. | 1 | | 0.038655 |
| 2012 | 70,000. 60,000. | 1,621,181. | | | 0.043178 |
| 2011 2010 | 39,000. | 1,720,302. 1,146,993. | | | 0.034878 |
| 2009 | 40,000. | 589,073. | | | 0.034002 |
| 2000 | 40,000. | 307,073. | - | | 0.00/303 |
| 2 Total of line 1 column (d |) | | 2 | | 0.218616 |
| | | de the total on line 2 by 5, or by the | | . | 0.210010 |
| | • • | ss than 5 years | 3 | | 0.043723 |
| Enter the net value of no | ncharitable-use assets for 2014 fr | rom Part X, line 5 | 4 | 1, | 791,055. |
| Multiply line 4 by line 3. | | | 5 | | 78,310. |
| 6 Enter 1% of net investme | ent income (1% of Part I, line 27b) | | 6 | | 583. |
| 7 Add lines 5 and 6 | | | 7 | | 78,893. |
| B Enter qualifying distributi | ons from Part XII, line 4 | | 8 | | 68,000. |
| If line 8 is equal to or given Part VI instructions | reater than line 7, check the box | in Part VI, line 1b, and complete | that part | using a 1% ta | x rate See th |

| orm | 990-PF (2014) HAGLER PINKERION FOUNDATION 20-1854 | 312 | ٢ | age 4 |
|-----|--|-------|----------|-------|
| Par | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see in | nstru | ctions | s) |
| 1a | Exempt operating foundations described in section 4940(d)(2), check here | | | |
| | 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 | | 1,1 | 65. |
| • | 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 \mathcal{I} Part I, line 12, col (b). | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2 | | | |
| 3 | Add lines 1 and 2 | | 1.1 | 65. |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | | | 0 |
| 5 | Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0- | | 1.1 | 65. |
| 6 | Credits/Payments | | | |
| | 2014 estimated tax payments and 2013 overpayment credited to 2014 6a | | | |
| | Exempt foreign organizations - tax withheld at source | | | |
| c | Tax paid with application for extension of time to file (Form 8868) 6c | | | |
| d | Backup withholding erroneously withheld | | | |
| 7 | Total credits and payments Add lines 6a through 6d | | | 0 |
| 8 | Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached | | | 7. |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | 1,1 | 72. |
| 0 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | |
| 1 | Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶ 11 | | | |
| Par | t VII-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 | | Χ. |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see | | | |
| | Instructions for the definition)? | 1b | | Х |
| | 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 | | | |
| C | 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 ▶ \$ | | | |
| e | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on | | | |
| • | foundation managers ▶ \$ | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | Х |
| _ | If "Yes," attach a detailed description of the activities | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of | | | |
| | incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | 3 | | Х |
| 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? | 4b | | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | Х |
| | If "Yes," attach the statement required by General Instruction T. | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either | | | |
| | By language in the governing instrument, or | | | |
| | • By state legislation that effectively amends the governing instrument so that no mandatory directions that | | | |
| | conflict with the state law remain in the governing instrument? | 6 | <u> </u> | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV | 7 | Х | ļ |
| 8a | Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ OK, | | | |
| b | If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General | | | |
| | (or designate) of each state as required by General Instruction G? If "No," attach explanation | 8b | X | L |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or | | | |
| | 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," | | | |
| | complete Part XIV | 9_ | | Х |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their | 10 | | x |

| Par | t VII-A Statements Regarding Activities (continued) | | | |
|-----|--|-----|------|----------|
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the | | 1 | |
| | meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) | 11 | | <u>X</u> |
| 12 | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified | | İ | |
| - | person had advisory privileges? If "Yes," attach statement (see instructions) | 12 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | 13 | Х | |
| | Website address ► N/A | | | |
| 14 | The books are in care of ► NIETA M. PINKERTON Telephone no ► 918-582- | 111 | 2 | |
| | Located at ▶1502 S. BOULDER 21-F TULSA, OK ZIP+4 ▶ 74119 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here | | | Ш |
| | and enter the amount of tax-exempt interest received or accrued during the year | | | |
| 16 | At any time during calendar year 2014, 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 | | <u>X</u> |
| | See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-221) If | | | |
| | "Yes," enter the name of the foreign country > | | | |
| Par | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1 a | During the year did the foundation (either directly or indirectly) | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a | | | |
| | disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X 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)? | | | |
| | (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 | İ | | |
| | termination of government service, if terminating within 90 days)Yes X No | | | |
| b | olf any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations | 1 | | |
| | section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? | 1b | | |
| | Organizations relying on a current notice regarding disaster assistance check here | | | |
| C | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that | | | ., |
| | were not corrected before the first day of the tax year beginning in 2014? | 1c | | <u> </u> |
| 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)) | | | |
| а | At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and | | | |
| | 6e, Part XIII) for tax year(s) beginning before 2014? | | | |
| | If "Yes," list the years | | | |
| t | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to | 26 | | İ |
| | all years listed, answer "No" and attach statement - see instructions) | 2b | | _ |
| C | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | | | |
| 2 - | Pud the foundation held more than a 20/ direct or undirect interest in any hydrocal enterprise | | | |
| 38 | a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? Yes X No | | | |
| | at any time during the year? | | | |
| | disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the | | İ | |
| | Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of | | | |
| | the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the | | | |
| | foundation had excess business holdings in 2014) | 3b | | x |
| A · | a 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 2014? | 4b | | х |
| | | | O.DE | (2014) |

| | t VII-B Statements Regarding Activities | for Which Form | 4/20 May Be Req | uirea (continuea) | | |
|-----|--|---------------------------------------|-----------------------------------|---|--|-----------------------|
| 5a | During the year did the foundation pay or incur any amo | unt to | | | | |
| | (1) Carry on propaganda, or otherwise attempt to influe | | n 4945(e))? | Yes X No | | |
| | (2) Influence the outcome of any specific public ele | ection (see section 4 | 1955), or to carry on | | | |
| • | directly or indirectly, any voter registration drive? | | | Yes X No | , | |
| | (3) Provide a grant to an individual for travel, study, or o | | | | | |
| | (4) Provide a grant to an organization other than a | | | | | |
| | section 4945(d)(4)(A)? (see instructions) | | | | , | |
| | (5) Provide for any purpose other than religious, ch | | | | | |
| | purposes, or for the prevention of cruelty to children | | | | , | |
| b | If any answer is "Yes" to 5a(1)-(5), did any of the | | | | , | |
| | Regulations section 53 4945 or in a current notice regar | | | | | |
| | Organizations relying on a current notice regarding disas | | | | \square | |
| | If the answer is "Yes" to question 5a(4), does the | | | | | |
| С | • | | • | | . | |
| | because it maintained expenditure responsibility for the | | | 140 | | 1 |
| _ | If "Yes," attach the statement required by Regulations see | • • | | | | |
| 6a | Did the foundation, during the year, receive any fur | - | | 1S Yes X No | | |
| | on a personal benefit contract? | | | . — — | ́ вь | X |
| b | Did the foundation, during the year, pay premiums, dire | ectly of indirectly, on a | personal benefit contra | Gl',,,,,,,,,, | 60 | - ^ - |
| _ | If "Yes" to 6b, file Form 8870 | | | Yes X No | | |
| | At any time during the tax year, was the foundation a p | | | | | l x |
| | If "Yes," did the foundation receive any proceeds or har Information About Officers, Directo | | | | | |
| Pa | and Contractors | <u> </u> | | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| 1 | List all officers, directors, trustees, foundation r | | | | | |
| | (a) Name and address | (b) Title, and average hours per week | (c) Compensation (If not paid, | (d) Contributions to employee benefit plans | (e) Expens | e account, owances |
| | | devoted to position | enter -0-) | and deferred compensation | otner all | Owances |
| | | devoted to position | enter -0-) | | other all | |
| ATC | | devoted to position | enter -0-) | | other all | 0 |
| | | devoted to position | enter -0-) | | other all | |
| | Н 5 | devoted to position | enter -0-) | | other all | |
| | Н 5 | devoted to position | enter -0-) | | other all | |
| | H 5 | devoted to position | enter -0-) | | other all | |
| | H 5 | devoted to position | enter -0-) | | other all | |
| | H 5 | devoted to position | enter -0-) O | and deferred compensation | | 0 |
| | H 5 | devoted to position | enter -0-) O | and deferred compensation O | | 0 |
| 2 | H 5 Compensation of five highest-paid employees | devoted to position | enter -0-) O | and deferred compensation | ons). If n | 0 |
| 2 | H 5 Compensation of five highest-paid employees "NONE." | (other than those hours per week | enter -0-) | and deferred compensation C 1 - see instruction (d) Contributions to employee benefit plans and deferred | ons). If n | one, enter |
| 2 | H 5 Compensation of five highest-paid employees "NONE." | (other than those hours per week | enter -0-) | and deferred compensation C 1 - see instruction (d) Contributions to employee benefit plans and deferred | ons). If n | one, enter |
| 2 | Compensation of five highest-paid employees "NONE." | (other than those hours per week | enter -0-) | and deferred compensation C 1 - see instruction (d) Contributions to employee benefit plans and deferred | ons). If n | one, enter |
| 2 | Compensation of five highest-paid employees "NONE." | (other than those hours per week | enter -0-) | and deferred compensation C 1 - see instruction (d) Contributions to employee benefit plans and deferred | ons). If n | one, enter |
| 2 | Compensation of five highest-paid employees "NONE." | (other than those hours per week | enter -0-) | and deferred compensation C 1 - see instruction (d) Contributions to employee benefit plans and deferred | ons). If n | one, enter |
| 2 | Compensation of five highest-paid employees "NONE." | (other than those hours per week | enter -0-) | and deferred compensation C 1 - see instruction (d) Contributions to employee benefit plans and deferred | ons). If n | one, enter |
| 2 | Compensation of five highest-paid employees "NONE." | (other than those hours per week | enter -0-) | and deferred compensation C 1 - see instruction (d) Contributions to employee benefit plans and deferred | ons). If n | one, enter |
| 2 | Compensation of five highest-paid employees "NONE." | (other than those hours per week | enter -0-) | and deferred compensation C 1 - see instruction (d) Contributions to employee benefit plans and deferred | ons). If n | one, enter |
| 2 | Compensation of five highest-paid employees "NONE." | (other than those hours per week | enter -0-) | and deferred compensation C 1 - see instruction (d) Contributions to employee benefit plans and deferred | ons). If n | one, enter |
| 2 | Compensation of five highest-paid employees "NONE." | (other than those hours per week | enter -0-) | and deferred compensation C 1 - see instruction (d) Contributions to employee benefit plans and deferred | ons). If n | one, enter |

Page 7

| Part _e VIII | Information About Officers, Directors, Trustees, Foundation Mai and Contractors (continued) | nagers, Highly Paid Employ | /ees, |
|------------------------|---|-------------------------------------|------------------|
| 3 Five | highest-paid independent contractors for professional services (see inst | ructions). If none, enter "NONE | 11 |
| | (a) Name and address of each person paid more than \$50,000 | (b) Type of service | (c) Compensation |
| | | | |
| NONE | | | |
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| otal numb | er of others receiving over \$50,000 for professional services | ▶ } | |
| Part IX-A | Summary of Direct Charitable Activities | | |
| | | | |
| | Indation's four largest direct charitable activities during the tax year. Include relevant statistical ins and other beneficianes served, conferences convened, research papers produced, etc. | I information such as the number of | Expenses |
| 1 NONE | ··a | | |
| • | | | |
| | | | |
| 2 | | | |
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| 3 | | | |
| | | | |
| 4 | | | |
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| | | | |
| Part IX-B | Summary of Program-Related Investments (see instructions) | | |
| | he two largest program-related investments made by the foundation during the tax year on lines 1 | and 2 | Amount |
| 1 NONE | ' | | |
| | | | |
| 2 | | | |
| | | | |
| | | | |
| All other p | rogram-related investments. See instructions | | |
| 3 NONE | | | |
| | | | |
| | | | |
| Total. Add | lines 1 through 3 | | |

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| Page o | Page | 8 |
|--------|------|---|
|--------|------|---|

| Par | Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.) | gn found | ations, |
|--------|--|--------------|-----------------------|
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes | | |
| а | Average monthly fair market value of securities | 1a | 1,685,987. |
| b | Average of monthly cash balances | 1b | 132,343. |
| С | Fair market value of all other assets (see instructions) | 1c | . |
| d | Total (add lines 1a, b, and c) | 1d | 1,818,330. |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) | | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | |
| 3 | | 3_ | 1,818,330. |
| 4 | Subtract line 2 from line 1d Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see | | |
| | instructions) | 4 | 27,275. |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 1,791,055. |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 89,553. |
| Par | Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating found and certain foreign organizations check here ▶ and do not complete this part) | dations | |
| 1 | Minimum investment return from Part X, line 6 | 1 | 89,553. |
| 2 a | Tax on investment income for 2014 from Part VI, line 5 | | |
| b | Income tax for 2014 (This does not include the tax from Part VI). | 1 1 | |
| С | Add lines 2a and 2b | 2c | 1,165. |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 88,388. |
| 4 | Recoveries of amounts treated as qualifying distributions | | |
| 5 | Add lines 3 and 4 | 5 | 88,388. |
| 6 | Deduction from distributable amount (see instructions) | 6 | |
| 7 | Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, | | |
| | line 1 | 7 | 88,388. |
| | Qualifying Distributions (see instructions) | T T | Ne - 11 |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes Expenses, contributions, gifts, etc total from Part I, column (d), line 26 | 1a | 68,000. |
| a b | | 1b | |
| | Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., | | |
| 2 | | 2 | |
| • | purposes | | |
| 3 | | 3a | |
| a | Suitability test (prior IRS approval required) | 3b | |
| ь 4 | Cash distribution test (attach the required schedule) Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 68,000. |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income | | |
| 9 | Enter 1% of Part I, line 27b (see instructions) | 5 | 0 |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 68,000. |
| U | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when column (b). | | |
| | qualifies for the section 4940(e) reduction of tax in those years | Jaiodiatii ţ | ,ctioi the roundation |

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Form 990-PF (2014) Page 9 Part XIII Undistributed Income (see instructions) (a) (b) Years prior to 2013 2013 Corpus 2014 Distributable amount for 2014 from Part XI, 88,388. Undistributed income, if any, as of the end of 2014 Enter amount for 2013 only 42,616. Total for pnor years 20 12 ,20 11 ,20 10 Excess distributions carryover, if any, to 2014 a From 2009 From 2010 c From 2011 **d** From 2012 From 2013 f Total of lines 3a through e Qualifying distributions for 2014 from Part XII, 68,000. line 4 ▶ \$ 42,616. a Applied to 2013, 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) 25,384. d Applied to 2014 distributable amount Remaining amount distributed out of corpus . . . Excess distributions carryover applied to 2014 (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: Corpus Add lines 3f, 4c, and 4e Subtract line 5 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
Undistributed income for 2013 Subtract line 4a from line 2a Taxable amount - see f Undistributed income for 2014 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2015 63,004. 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 2009 not applied on line 5 or line 7 (see instructions) . . . Excess distributions carryover to 2015. 0 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2010 . . . b Excess from 2011 . . . c Excess from 2012 . . .

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d Excess from 2013 . . . e Excess from 2014 . . .

| Рa | rt XIV Private Ope | erating Foundations | (see instructions ar | nd Part VII-A, questi | on 9) | NOT APPLICABLE |
|-----|--|---|------------------------|--|---------------------------|-------------------------|
| 1 a | If the foundation has | _ | | - | ating | |
| h | foundation, and the ruling Check box to indicate v | | | | section 4942(j |)(3) or 4942(j)(5) |
| • | | Tax year | o a private operating | Prior 3 years | | |
| 2 a | Enter the lesser of the ad- justed net income from Part | (a) 2014 | (b) 2013 | (c) 2012 | (d) 2011 | (e) Total |
| | I or the minimum investment return from Part X for each year listed | | | | | |
| b | 85% of line 2a | | | | | |
| С | Qualifying distributions from Part | | | | | |
| d | XII, line 4 for each year listed . Amounts included in line 2c not | | | | | |
| | used directly for active conduct of exempt activities | | - | | | |
| е | Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c | | | | | |
| 3 | Complete 3a, b, or c for the | | | | - | |
| a | alternative test relied upon "Assets" alternative test - enter | | | | | |
| | (1) Value of all assets(2) Value of assets qualifying under section | | | | | |
| b | 4942(j)(3)(B)(i) "Endowment" alternative test- | | | | | |
| _ | enter 2/3 of minimum invest- | | | | | |
| | ment 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 secunties loans (section 512(a)(5)), | | | | | |
| | or royalties) | | | | | |
| | public and 5 or more exempt organizations as provided in section 4942 | , | | | | |
| | (j)(3)(B)(m) | | | | - | |
| | organization | | | | | |
| Pa | rt XV Suppleme | ntary Information (e during the year -s | | t only if the found | dation had \$5,000 | or more in assets |
| 1 | Information Regardin | | | | | |
| | List any managers of | the foundation who I | nave contributed mor | e than 2% of the tot | al contributions received | ived by the foundation |
| | | - | iey nave contributed i | more than \$5,000) (S | see section 507 (d)(2) | • |
| b | NIETA M. PI List any managers of | | own 10% or more o | f the stock of a corp | poration (or an equal | ly large portion of the |
| | ownership of a partne | rship or other entity) of | f which the foundation | n has a 10% or greate | r interest | |
| | NONE | | | | | |
| 2 | Information Regardin | - | | | . 4 - 1-1 | |
| | unsolicited requests f | the foundation only or funds. If the found plete items 2a, b, c, an | ation makes gifts, gr | to preselected char ants, etc. (see instruc | ctions) to individuals | or organizations unde |
| a | The name, address, a | | | the person to whom a | oplications should be a | ddressed |
| | ATCH 6 | <u> </u> | | | | |
| b | The form in which app | lications should be su | bmitted and informati | on and materials they | should include | |
| | | | DESCRIPTION OF | ORGANIZATION AN | D USE OF FUNDS | |
| C | : Any submission dead | ines | | | | |
| | NONE | | | | | |
| C | Any restrictions or I factors | imitations on awards | , such as by geogr | aphical areas, charit | able fields, kinds of | institutions, or other |
| | ATCH 7 | | | | | |

Page **11**

| Part XV Supplementary Information | (continued) | | inture Daymant | |
|-------------------------------------|--|----------------------|-------------------------------------|--------------|
| 3 Grants and Contributions Paid Dur | Ing the Year or Appl | Equadation | | |
| Recipient (hama as hamana) | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | | |
| a Paid during the year | | | | |
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| | | | | |
| Total | | | | 68,000 |
| b Approved for future payment | | | | |
| b /ipprovod for rataro paymont | | | | |
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| Total <u></u> | | | > 3b | · I |

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| er gross amounts unless otherwise indicated | | ated business income | | section 512, 513, or 514 | (e) Related or exempt |
|---|-------------------------|----------------------|--|--------------------------------|---------------------------------------|
| Program service revenue | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | function income (See instructions) |
| a | | | | | (CCC IIIOII GCIOIIO) |
| b | | | | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| · | | | | | |
| 9 Fees and contracts from government agencies | | | | | |
| Membership dues and assessments | | | | | |
| Interest on savings and temporary cash investments | | | 14 | 8,403. | |
| Dividends and interest from securities | | | 14 | 7,462. | <u></u> |
| Net rental income or (loss) from real estate. | | | | | |
| Debt-financed property | | | | | |
| Not debt-financed property | | | | | |
| Net rental income or (loss) from personal property . | | | | | · |
| Other investment income | | | 10 | 50.750 | |
| Gain or (loss) from sales of assets other than inventor | | | 18 | 50,756. | |
| Net income or (loss) from special events | | | +- | | |
| Gross profit or (loss) from sales of inventory | | | | | |
| Other revenue a | | | - | 79,332. | |
| · ————— | | | | 19,332. | |
| | | | + | _ | |
| d | | - | | - | |
| | | | | | |
| | | | | 145 953 | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) | | | | 145,953. | 145,9 |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify cal Int XVI-B Relationship of Activitie | culations) s to the Ac | ccomplishment of E | xempt Purp | oses | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activitie | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activitie ne No. Explain below how each activ | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activitie ne No. Explain below how each activ | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activitie ne No. Explain below how each activ | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activitie ne No. Explain below how each activ | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activitie ne No. Explain below how each activ | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activitie Explain below how each activ | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activitie le No. Explain below how each activ | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activitie le No. Explain below how each activ | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activitie Explain below how each activ | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activitie le No. Explain below how each activ | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activitie le No. Explain below how each activ | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activitie ne No. Explain below how each activ | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activitie ne No. Explain below how each activ | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activitie ne No. Explain below how each activ | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activitie ne No. Explain below how each activ | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activitie ne No. Explain below how each activ | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify cal art XVI-B Relationship of Activities ne No. Explain below how each activities are not reconstructed in the No. | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify cal rt XVI-B Relationship of Activitie ne No. Explain below how each activ | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |
| Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify cal art XVI-B Relationship of Activities ne No. Explain below how each activities are not reconstructed in the No. | culations) s to the Ac | ccomplishment of E | xempt Purp | oses e) of Part XVI-A contribu | ted importantly to |

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|-----------------|--|------------|----------------------------|-------------------------|---------|
| Part XVII | Information Regarding Exempt Organizations | | and Transactions and Relat | ionships With Noncharit | able |

| 1 | Did the | organization directl | y or indirectly e | engage in any of the fo | ollowing with | any other organizati | on described | Υ | es | No_ |
|-------|----------|--------------------------------|------------------------|--|------------------|-------------------------------|------------------------|----------|-----------|-------|
| _ | ın secti | ion 501(c) of the Co | de (other than s | section 501(c)(3) organ | nizations) or in | section 527, relatin | g to political | | | |
| • | organiz | rations? | | | | | | | | |
| а | Transfe | ers from the reporting | g foundation to | a noncharitable exemp | t organization | of | | | | |
| | (1) Cas | sh | <i></i> | | | | 1 | a(1) | | X |
| | | | | | | | | a(2) | | X |
| b | | ransactions. | | | | | | | | |
| | (1) Sale | es of assets to a nor | ncharitable exer | npt organization | | | 1 | b(1) | | X |
| | | | | ble exempt organization | | | | | | X |
| | | | | assets | | | | | | X |
| | | | | | | | | b(4) | | Х |
| | | | | | | | | b(5) | | Х |
| | | | | ip or fundraising solicita | | | | | | Х |
| С | | | | s, other assets, or paid | | | | | | X |
| | | | _ | s," complete the follow | | | | | r ma | rket |
| | | | | ces given by the repor | | | | | | |
| | value ii | n any transaction or | sharing arrang | ement, show in colum | in (d) the valu | ue of the goods, othe | er assets, or sei | vices i | ecer | ved |
| (a) L | ne no | (b) Amount involved | (c) Name of n | oncharitable exempt organiza | tion (d) [| Description of transfers, tra | nsactions, and shann | g arrang | ement | s |
| | | N/A | | | N/A | <i>H</i> | • | | | |
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| 2a | is the | foundation directly | or indirectly aff | iliated with, or related | to, one or m | nore tax-exempt orga | anizations | | | |
| | | | | ther than section 501(c | | | | Yes | X | No |
| b | | ," complete the follow | | | | | | | | |
| | | (a) Name of organization | n | (b) Type of organ | ization | (c) Des | cription of relationsh | ip | | |
| | | | | | | | | | | |
| | | - | | | | | | | | |
| | | | | | | <u> </u> | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | ned this return, including accommandation appayer) is based on all information | | | est of my knowledge | and beli | ef, it is | true, |
| Sigi | | a Janu complete Declaration of | preparer (other main o | | | as ally knowledge | May the IRS | decues | this r | otum |
| _ | | V Nusta K | nkerton | 5-7-1 | 5 | | with the prep | | | elow |
| Her | e Sign | nature of officer or trustee | | Date | Title | | (see instructions) | 7 X Y | 'es 🗌 | No |
| | | | | | | | | | | |
| | | Print/Type preparer's na | me | Preparer's signature | 7 | Date | Check if P1 | אר | | |
| Paid | | JERALD L ISAA | cs | | 111 | - 4.29.18 | self-employed P | 00369 | 5496 | 5 |
| Pre | parer | Firm's name ► BK | D, LLP | | 00 | Firm's | EIN ► 44-01 | 60260 |) | |
| Use | Only | | 20 S. YALE | , #1400 | | | | | | |
| | | | ILSA, OK | | | 74136-4223 Phon | | | | |
| | | | | | | | Fom | 990- | PF (| 2014) |

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

Name of estate or trust

Capital Gains and Losses

► Attach to Form 1041, Form 5227, or Form 990-T.

▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10.

▶ Information about Schedule D and its separate instructions is at www.irs.gov/form1041.

OMB No 1545-0092

Employer identification number

| Н | AGLER PINKERTON FOUNDATION | | | 20-18543 | 12 | |
|----------------|--|----------------------------------|---------------------------------|--|---------------|---|
| Note | : Form 5227 filers need to complete only Parts I and II | | | | | |
| Par | Short-Term Capital Gains and Losses - Ass | ets Held One Year | or Less | | | |
| the li This | nstructions for how to figure the amounts to enter on nes below form may be easier to complete if you round off cents note dollars | (d) Proceeds (sales price) | (e) Cost (or other basis) | (g) Adjustments to gain or loss f Form(s) 8949, P line 2, column | rom art I, | (h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g) |
| | Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b. | | | | | |
| | Totals for all transactions reported on Form(s) 8949 with Box A checked | 13,938. | 14,365. | | | -427. |
| | Totals for all transactions reported on Form(s) 8949 with Box B checked | | | | | |
| 3 | Totals for all transactions reported on Form(s) 8949 with Box C checked | | | | | |
| 4 | Short-term capital gain or (loss) from Forms 4684, 62 | 252, 6781, and 8824 | | | 4 | |
| 5 6 | Net short-term gain or (loss) from partnerships, S cor Short-term capital loss carryover Enter the amoun Carryover Worksheet | nt, if any, from line | | | 5 6 | () |
| 7 | Net short-term capital gain or (loss). Combine line 17, column (3) on the back | | <u> </u> | | 7 | -427. |
| Par | t II Long-Term Capital Gains and Losses - Ass | ets Held More Tha | an One Year | | | |
| the li | instructions for how to figure the amounts to enter on nes below | (d) Proceeds | (e) Cost | (g) Adjustments to gain or loss i | rom | (h) Gain or (loss) Subtract column (e) from column (d) and |
| | form may be easier to complete if you round off cents note dollars | (sales pnce) | (or other basis) | Form(s) 8949, P line 2, column | | combine the result with column (g) |
| | Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b. | | | | | |
| 8b | Totals for all transactions reported on Form(s) 8949 with Box D checked | | | | | |
| 9 | Totals for all transactions reported on Form(s) 8949 with Box E checked | 198,434. | 147,355. | | | 51,079. |
| 10 | Totals for all transactions reported on Form(s) 8949 with Box F checked | | | | | |
| 11 | Long-term capital gain or (loss) from Forms 2439, 46 | 884, 6252, 6781, and | d 8824 | | 11 | |
| 12 | Net long-term gain or (loss) from partnerships, S corp | porations, and other e | estates or trusts | | 12 | |
| 13 | Capital gain distributions | | | | 13 | 104. |
| 14 15 | Gain from Form 4797, Part I | | | | 14 | 1 |
| 16 | Carryover Worksheet | | | | 15 | (|
| | line 18a, column (3) on the back | | | | 16 | 51,183. |

45

G, line 1a (or Form 990-T, line 36)

Figure the tax on the amount on line 21 Use the 2014 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)....

Tax on all taxable income. Enter the smaller of line 43 or line 44 here and on Form 1041. Schedule

Sales and Other Dispositions of Capital Assets

▶ Information about Form 8949 and its separate instructions is at www.irs.gov/form8949.

Attachment Sequence No 12A

OMB No 1545-0074

Department of the Treasury Internal Revenue Service

Name(s) shown on return

HAGLER PINKERTON FOUNDATION

▶ File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Social security number or taxpayer identification number

20-1854312

Before you check Box A, B, or C below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS

Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments your bought in 2014 or later). Short-Term. Transactions involving capital assets you held 1 year or less are short-term. For long-term transactions, see page 2.

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a, you are not required to report these transactions on Form 8949 (see instructions).

You must check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

(A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)

| \vdash | (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS (C) Short-term transactions not reported to you on Form 1099-B | | | | | | | | |
|----------|--|---------------------------------------|-----------------------------------|-------------------------------------|--|-------------------------------------|--|---|--|
| 1 | (a) Description of property | (b) Date acquired | (c) Date sold or | (d) Proceeds | (e) Cost or other basis See the Note below and | If you enter an a enter a coo | Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f) See the separate instructions. | | |
| | (Example 100 sh XYZ Co) | (Mo, day, yr) | disposed (Mo , day, yr) | (sales price) (see instructions) | see Column (e) in the separate instructions | (f) Code(s) from instructions | (g) Amount of adjustment | Subtract column (e) from column (d) and combine the result with column (g) | |
| TC | AMERITRADE | VARIOUS | 12/31/2014 | 13,938. | 14,365. | | | -427. | |
| | | | | | | | | | |
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| | | | | | | | | | |
| | Totals. Add the amounts in colu act negative amounts) Enter e your Schedule D, line 1b (if Box Box B above is checked), or line | ach total here an A above is check | nd include on ked), line 2 (if | 13,938. | 14,365. | | | -427. | |

Note. If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

Form 8949 (2014)

Attachment Sequence No 12A

| Name(s) shown on return. Name and SSN or taxpayer identification no not required if shown on other side. | Social security number or taxpayer identification number |
|--|--|
| HAGLER PINKERTON FOUNDATION | 20-1854312 |

Before you check Box D, E, or F below, see whether you received any Form(s) 1099-B or substitute statement(s) from your broker A substitute statement will have the same information as Form 1099-B. Either may show your basis (usually your cost) even if your broker did not report it to the IRS. Brokers must report basis to the IRS for most stock you bought in 2011 or later (and for certain debt instruments you bought in 2014 or later)

Long-Term. Transactions involving capital assets you held more than 1 year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a; you are not required to report these transactions on Form 8949 (see instructions).

You must check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box if you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above) (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
 - (F) Long-term transactions not reported to you on Form 1099-B

| 1 (a) Description of property | (b) Date acquired | (c) Date sold or | (d) Proceeds | (e) Cost or other basis See the | Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f) See the separate instructions. | | | |
|--|-----------------------|-----------------------------|-------------------------------------|---|--|--------------------------------|------------------------------------|--|
| (Example 100 sh XYZ Co) | (Mo , day, yr) | disposed (Mo , day, yr) | (sales price) (see instructions) | Note below and see Column (e) in the separate instructions | (f) Code(s) from instructions | (g) Amount of adjustment | combine the result with column (g) | |
| ID AMERITRADE | VARIOUS | 12/31/2014 | 198,434. | 147,355. | | | 51,079. | |
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| 2 Totals. Add the amounts in (subtract negative amounts) include on your Schedule D, | Enter each total | al here and D above is | | | | | | |
| checked), line 9 (if Box E ab | ove is checked), ► | or line 10 | 198,434. | 147,355 | . | | 51,079 | |

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment

FORM 990PF, PART I - OTHER INCOME

| | NET | INVESTMENT | INCOME | | 15,23 | |
|---------|-----|------------|-------------|--------------------|-----------|-----------------------|
| REVENUE | AND | EXPENSES | PER BOOKS | 57,770. | 15,232. | 6,330. |
| | | | | | | |
| | | | DESCRIPTION | PARTNERSHIP INCOME | ROYALTIES | NON TAXABLE DIVIDENDS |

15,232.

79,332.

TOTALS

15,232.

FORM 990PF, PART I - TAXES

REVENUE AND

EXPENSES PER BOOKS

<u>DESCRIPTION</u> <u>PER BO</u>

INCOME TAXES 302.

TOTALS _______302.

20-1854312

ATTACHMENT 3

| PEN | |
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| OTHER | |
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| AND | EXPENSES | PER BOOKS | SES 14,541 | ES 8,844 | |
|-----|----------|-------------|---------------------|------------|--|
| | | DESCRIPTION | INVESTMENT EXPENSES | PERATING E | |

| INVESTMENT | INCOME | 14,541. | 8,844. | 23,385. |
|------------|-----------|---------|--------|---------|
| EXPENSES | PER BOOKS | 14,541. | 8,844. | 23,385. |
| | | | | ALS |

TOTALS

NET

MARKETABLE SECURITIES

ENDING BOOK VALUE

ENDING FMV

1,170,530.

1,625,970.

TOTALS

1,170,530.

1,625,970.

| EXPENSE ACCT AND OTHER ALLOWANCES | 0 | 0 |
|---|--|--------------|
| CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS | 0 | 0 |
| COMPENSATION | 0 | 0 |
| TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION | 5.00 | GRAND TOTALS |
| NAME AND ADDRESS | NIETA M. PINKERTON 1502 S. BOULDER #21-F TULSA, OK 74119 | |

ATTACHMENT 5

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

NIETA M. PINKERTON 1722 S. BOSTON TULSA, OK 74119 918-582-1112

| | _ |
|------------|---------|
| ATTACHME | י חוואו |
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990PF, PART XV - RESTRICTIONS OR LIMITATIONS ON AWARDS

NINETY-FIVE PERCENT (95%) OF THE FOUNDATION DISTRIBUTIONS SHALL BE MADE TO OR AMONG CHARITABLE ORGANIZATIONS LOCATED IN TULSA, OKLAHOMA. FIVE PERCENT (5%) OF THE FOUNDATION'S DISTRIBUTIONS MAY BE TO CHARITABLE ORGANIZATIONS OUTSIDE OF TULSA, OKLAHOMA.

| | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND | | |
|---|---|----------------------------------|--------|
| RECIPIENT NAME AND ADDRESS | FOUNDATION STATUS OF RECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
| TULSA HABITAT FOR HUMANITY 6235 E. 13TH ST. TULSA, OK 74112 | NONE TAX-EXEMPT | GENERAL FUNDING | 5,000. |
| RIVER PARKS 175 E. 2ND ST. STE 885 TULSA, OK 74103 | NONE TAX-EXEMPT | GENERAL FUNDING | 3,000 |
| TULSA COMMUNITY FOOD BANK 1304 N KENOSHA AVENUE TULSA, OK 74106 | NONE TAX-EXEMPT | GENERAL FUNDING | 15,000 |
| MEALS ON WHEELS 12620 E. 31ST ST. TULSA, OK 74146 | NONE TAX-EXEMPT | GENERAL FUNDING | 5,000. |
| BOSTON AVE CHURCH 1301 S. BOSTON AVE. TULSA, OK 74119 | NONE TAX-EXEMPT | GENERAL FUNDING | 1,000 |
| PHILBROOK MUSEUM 2727 S ROCKFORD RD TULSA, OK 74114 | NONE TAX-EXEMPT | GENERAL FUNDING | 2,000. |

ATTACHMENT 8 (CONT.D)

| | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR | | |
|---|---|----------------------------------|--------|
| RECIPIENT NAME AND ADDRESS | FOUNDATION STATUS OF RECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION | AMOUNT |
| IRON GATE-TRINITY EPISCOPAL CHURCH 501 S. CINCINNATI AVE. TULSA, OK 74103 | NONE TAX-EXEMPT | GENERAL FUNDING | 1,000 |
| DOMESTIC VIOLENCE INTERVENTION SERVICE 4300 S. HARVARD AVE. TULSA, OK 74135 | NONE TAX-EXEMPT | GENERAL, FUNDING | 3,000 |
| GILCREASE MUSEUM 1400 GILCREASE MUSEUM ROAD TULSA, OK 74127 | NONE TAX-EXEMPT | GENERAL FUNDING | 2,000 |
| TULSA HISTORICAL SOCIETY 2445 S. PEORIA AVE. TULSA, OK 74114 | NONE TAX-EXEMPT | GENERAL FUNDING | 10,000 |
| OETA 7403 N. KELLEY AVE. OKLAHOMA CITY, OK 73111 | NONE TAX-EXEMPT | GENERAL FUNDING | 2,000. |
| THE NATURE CONSERVANCY 4245 N. FAIRFAX DR STE. 100 ARLINGTON, VA 22203 | NONE TAX-EXEMPT | GENERAL FUNDING | 3,000. |

ATTACHMENT 8 (CONT.D)

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| | RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR | | |
|---|---|------------------------------------|--------|
| RECIPIENT NAME AND ADDRESS | AND FOUNDATION STATUS OF RECIPIENT | PURPOSE OF GRANT OR CONTRIBUTION A | AMOUNT |
| PLANNED PARENTHOOD 434 W. 33RD ST. NEW YORK, NY 10001 | NONE TAX-EXEMPT | GENERAL FUNDING | 4,000. |
| GOODWILL INDUSTRIES OF TULSA 2800 SOUTHWEST BLVD. TULSA, OK 74107 | NONE TAX-EXEMPT | GENERAL FUNDING | 2,000 |
| THE CENTER 815 S. UTICA AVE TULSA, OK 74104 | NONE TAX-EXEMPT | GENERAL FUNDING | 2,000. |
| RETIRED SENIOR VOLUNTEER PROGRAM 5756 E. 31ST ST. TULSA, OK 74135 | NONE TAX-EXEMPT | GENERAL FUNDING | 3,000. |
| CYSTIC FIBROSIS 2642 E. 21ST ST STE 100 TULSA, OK 74114 | NONE TAX-EXEMPT | GENERAL FUNDING | 2,000 |
| LIFE SENIOR SERVICES 5950 E. 31ST ST. TULSA, OK 74135 | NONE TAX-EXEMPT | GENERAL FUNDING | 3,000. |

TOTAL CONTRIBUTIONS PAID

68,000

| RELATED OR EXEMPT FUNCTION INCOME | |
|--------------------------------------|--|
| AMOUNT | 15,232. 57,770. 6,330. |
| EXCLUSION CODE | 15 14 14 |
| AMOUNT | |
| BUSINESS | |
| DESCRIPTION | ROYALTIES PARTNERSHIP DISTRIBUTION NON TAXABLE DIVIDENDS |

79,332.

TOTALS

ATTACHMENT 9