

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCAMMER SEP 09

▶ Do not enter social security numbers on this form as it may be made public.
 ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

For	calend	lar year 2014 or tax year beginning , a	ind ending			<u> </u>	
Na	ame of fou	ndation			A Emplo	yer identification number	
_		5 GI 5 50000 5 5000				0.607000	
		E GIFT FOUNDATION street (or PO box number if mail is not delivered to street address)	27-2627902 B Telephone number (see instructions)				
		5 E 55TH PLACE	om/suite	B Teleph	one number (see insuddions)		
		state or province, country, and ZIP or foreign postal code			I		
T	ULS	A OK 74146			C If exen	aption application is pending, c	_
G	Check a	all that apply Initial return Initial return	n of a former public cha	arity	D 1 Fo	reign organizations, check here	, ▶ [
		Final return Amended	return		2 Fo	reign organizations meeting the	
		Address change Name cha	nge			% test, check here and attach	
Н	Check t	ype of organization X Section 501(c)(3) exempt private	foundation		E If priva	ite foundation status was termi	nated under
$\ddot{\Box}$			e private foundation		1 '	507(b)(1)(A), check here	>
l F		ket value of all assets at J Accounting method	X Cash Acc	rual	F If the f	oundation is in a 60-month terr	nination
		ear (from Part II, col. (c), Other (specify)			under	section 507(b)(1)(B), check he	re 🕨 📘
	ne 16) I		e on cash basis)				
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) Net inv	estment	(c) Adjusted net	(d) Disbursements for chantable
		amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))	expenses per books	(b) Net inco		income	purposes
	1.4		247,147				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	247,147				
	2	Check Inf the foundation is not required to attach Sch. B					
	3	Interest on savings and temporary cash investments Dividends and interest from securities		_			······································
	4	Gross rents	· · · · · · · · · · · · · · · · · · ·				
Revenue	5a b	Net rental income or (loss)					
	6a	Net gain or (loss) from sale of assets not on line 10					
	b	Gross sales price for all assets on line 6a					
è	7	Capital gain net income (from Part IV, line 2)			0		
Ľ.	8	Net short-term capital gain				0	
	9	Income modifications					
	10a	Gross sales less returns and allowances				_	
	Ь р	Less Cost of goods sold					
	C	Gross profit or (loss) (attach schedule)					
	11	Other income (attach schedule) STMT 1	46,426			46,426	
	12	Total. Add lines 1 through 11	293,573		0	46,426	
S	13	Compensation of officers, directors, trustees, etc	0				
ses	14	Other employee salaries and wages					
ense	15	Pension plans, employee benefits					
Q.X		Legal fees (attach schedule) SEE STMT 2	1,484	i .			
Operating and Administrative Ex	b	Accounting fees (attach schedule) STMT 3	3,305			RECEIVE	<u>}</u>
Ě	С	Other professional fees (attach schedule)		ļ		A A COLOR DA LACE	
tra	17	Interest			12	C(1) (N) 204	
Jis	18	Taxes (attach schedule) (see instructions)			33,	SEP 0 1 201	P 7
Ē	19	Depreciation (attach schedule) and depletion	27.055	ļ	<u> </u>		121
Þ	20	Occupancy	37,255		V D	OGDEN, U	
þ	21	Travel, conferences, and meetings	789	 			<u> </u>
a	22	Printing and publications Other expenses (att sch.) STMT 4	29,071 171,965				
0	23	. , , , ,	1/1,965	 			
äŧi	24	Total operating and administrative expenses.	243,869	1	0	0	
Ser	25	Add lines 13 through 23	104,500			<u> </u>	104,500
ŏ	25	Contributions, gifts, grants paid	348,369		0	0	
_	26	Total expenses and disbursements. Add lines 24 and 25 Subtract line 26 from line 12	340,309	<u> </u>	<u>U</u>		103,500
		Excess of revenue over expenses and disbursements	-54,796	1			Ī
	a	Net investment income (if negative, enter -0-)	37,790		0		
	b	Adjusted net income (if negative, enter -0-)		1		46.426	

***	Balance Sheets Attached schedules and amounts in the description column		Beginning of year	End of year			
===	*********	should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value		
	1	Cash – non-interest-bearing	18,719	3,966	3,966		
	2	Savings and temporary cash investments					
	3	Accounts receivable ▶					
		Less allowance for doubtful accounts ▶					
	4	Pledges receivable ▶					
		Less allowance for doubtful accounts ▶					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other					
		disqualified persons (attach schedule) (see					
		instructions)					
	7	Other notes and loans receivable (att. schedule)					
		Less allowance for doubtful accounts ▶ 0					
S	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
As	10a	Investments – U.S. and state government obligations (attach schedule)					
	ь	Investments – corporate stock (attach schedule)					
	С	Investments – corporate bonds (attach schedule)					
	11	Investments – land, buildings, and equipment basis					
		Less accumulated depreciation (attach sch.)					
	12	Investments – mortgage loans					
	13	Investments – other (attach schedule)					
	14	Land, buildings, and equipment basis					
		Less accumulated depreciation (attach sch.) ▶	3,359				
	15	Other assets (describe ▶)					
	16	Total assets (to be completed by all filers – see the					
_		instructions. Also, see page 1, item I)	22,078	3,966	3,966		
	17	Accounts payable and accrued expenses					
	18	Grants payable					
Ë	19	Deferred revenue					
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
<u>.</u>	21	Mortgages and other notes payable (attach schedule)					
_	22	Other liabilities (describe ► SEE STATEMENT 5)	5,000				
_	23	Total liabilities (add lines 17 through 22)	5,000	46,542			
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.					
ces			17 070	-42,576			
		Unrestricted	17,078	-42,576			
Sal	25	Temporarily restricted					
ᅙ	26	Permanently restricted					
Net Assets or Fund Balan		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.					
6	27	Capital stock, trust principal, or current funds					
ţ	27	Paid-in or capital surplus, or land, bldg , and equipment fund					
SSE	29	Retained earnings, accumulated income, endowment, or other funds					
Ä	30	Total net assets or fund balances (see instructions)	17,078	-42,576			
Š	31	Total liabilities and net assets/fund balances (see	11,070	12/3/0			
	"	instructions)	22,078	3,966			
**	e en			37300			
		I net assets or fund balances at beginning of year – Part II, column (a), line 30 (must	agree with				
		of-year figure reported on prior year's return)	=	1_1_	17,078		
2		r amount from Part I, line 27a		2	-54,796		
		er increases not included in line 2 (itemize)		3			
		lines 1, 2, and 3		4	-37,718		
5		reases not included in line 2 (itemize) SEE STATEMENT 6		5	4,858		
_6		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b),	line 30	6	-42,576		
					- 000 DE		

Part IV Capital Gains a	nd Losses for Tax on Investme	nt Income					
	cribe the kind(s) of property sold (e.g., real estate, arehouse, or common stock, 200 shs. MLC Co.)			(b) How acquired P – Purchase O – Donation		ate acquired o , day, yr)	(d) Date sold (mo , day, yr)
1a N/A							
<u>b</u>							
_с							
d							
е							
(e) Gross sales price	(f) Depreciation allowed (or allowable)			other basis nse of sale			n or (loss) (f) minus (g)
_a	• • • • •	···					.
b							
<u>c</u>							
d		 -			ļ		
Complete only for geneta showing	gain in column (h) and owned by the four	dation on 12/21	1/60				
Complete only for assets snowing							ol (h) gain minus ot less than -0-) or
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69			s of col (i) (j), if any			from col (h))
а					<u> </u>		
b							
<u>c</u>					 		
	If gain, also enter in If (loss), enter -0- in If (loss), enter -0- in If (loss), enter (6) column (c) (see instructions) If (loss), enter (loss), enter (loss)	Part I, line 7	}		2		
Part V Qualification U	nder Section 4940(e) for Reduc	<u> </u>			3		
If "Yes," the foundation does not quali	ion 4942 tax on the distributable amount of under section 4940(e) Do not complete	this part					Yes X No
	each column for each year, see the instruc	tions before ma	king	any entries			4.0
(a) Base period years Calendar year (or tax year beginning in			et value	(c) e of noncharitable-use asset			(d) stribution ratio) divided by col. (c))
2013	87	,250		114,			0.761251
2012		,500		128,			0.749224
2011		,330			340		0.535797
2010	25	,000		36,	949		0.676608
2009							0.700000
2 Total of line 1, column (d)					}	_2	2.722880
▼	5-year base period – divide the total on lin as been in existence if less than 5 years	e 2 by 5, or by th	ne			3	0.680720
4 Enter the net value of noncharital	ole-use assets for 2014 from Part X, line 5					4	43,848
5 Multiply line 4 by line 3						5	29,848
6 Enter 1% of net investment incon	ne (1% of Part I, line 27b)				Į	6	
7 Add lines 5 and 6						7	29,848
8 Enter qualifying distributions from	Part XII, line 4					8	104,500
	n line 7, check the box in Part VI, line 1b, a	and complete that	at par	t using a 1% tax rate	See th	е	

Form 990-PF (2014) EAGLE GIFT FOUNDATION

Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) 1a Exempt operating foundations described in section 4940(d)(2), check here ▶ and enter "N/A" on line 1 Date of ruling or determination letter (attach copy of letter if necessary—see instructions) Domestic foundations that meet the section 4940(e) requirements in Part V, check 1 here X and enter 1% of Part I, line 27b All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 3 Add lines 1 and 2 3 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-Credits/Payments а 2014 estimated tax payments and 2013 overpayment credited to 2014 6a ь Exempt foreign organizations - tax withheld at source 6b C Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 6d 7 Total credits and payments Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached 8 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 Enter the amount of line 10 to be Credited to 2015 estimated tax Refunded Statements Regarding Activities During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it Yes No Χ participate or intervene in any political campaign? 1a Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)? 1h 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 N/A Did the foundation file Form 1120-POL for this year? 1c Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ▶ \$ (2) On foundation managers ▶ \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ \$ Χ 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 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 Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a 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 the year? If "Yes," attach the statement required by General Instruction T Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either . By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that X conflict with the state law remain in the governing instrument? X 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 Enter the states to which the foundation reports or with which it is registered (see instructions) OK If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General Х (or designate) of each state as required by General Instruction G? If "No," attach explanation 8b 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," Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their STMT 7 10 Form 990-PF (2014) Form 990-PF (2014) EAGLE GIFT FOUNDATION 27-2627902 Page 5 **Statements Regarding Activities (continued)** 11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions) 11 12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes." attach statement (see instructions) 13 13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ▶ WWW.EAGLEGIFTFOUNDATION.ORG EAGLE GIFT FOUNDATION Telephone no ▶ 14 The books are in care of 10105 E 55TH PLACE 74146 Located at ▶ TULSA Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here 15 15 and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority Yes No 16 16 over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If "Yes," enter the name of the foreign country Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required No Yes File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 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? No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes No No Yes (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available for No 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 Yes X No termination of government service, if terminating within 90 days) If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations N/Asection 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 Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that X 1c were not corrected before the first day of the tax year beginning in 2014? 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)) At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and X No 6e, Part XIII) for tax year(s) beginning before 2014? , 20 If "Yes," list the years ▶ 20 . 20 , 20 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 N/A 2b all years listed, answer "No" and attach statement - see instructions) If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here . 20 Did the foundation hold more than a 2% direct or indirect interest in any business enterprise X No at any time during the year? If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the N/A 3b foundation had excess business holdings in 2014) Χ Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4a 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?

Form 990-PF (2014)

Form	990-PF (2014) EAGLE GIFT FOUNDATION	27-2	627902		Page 6
	Statements Regarding Activities for Which Form 4	720 May Be Re	quired (contin	nued)	
5a	During the year did the foundation pay or incur any amount to.				
	(1) Carry on propaganda, or otherwise attempt to influence legislation (section 494	5(e))?	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	′es 🏻 No	
	(2) Influence the outcome of any specific public election (see section 4955), or to d	arry on,			
	directly or indirectly, any voter registration drive?		\	′es 🛚 No	
	(3) Provide a grant to an individual for travel, study, or other similar purposes?		□ \(\bar{\pi} \)	′es 🛛 No	
	(4) Provide a grant to an organization other than a charitable, etc., organization de-	scribed in	_		
	section 4945(d)(4)(A)? (see instructions)		_ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	′es 🏻 No	
	(5) Provide for any purpose other than religious, charitable, scientific, literary, or ed	lucational	_		
	purposes, or for the prevention of cruelty to children or animals?		\	′es 🗓 No	
b	If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under t	he exceptions desc	ribed in	_	
	Regulations section 53 4945 or in a current notice regarding disaster assistance (se	ee instructions)?		N/A	5b
	Organizations relying on a current notice regarding disaster assistance check here			▶ 🗍	
С	If the answer is "Yes" to question 5a(4), does the foundation claim exemption from	the tax			
	because it maintained expenditure responsibility for the grant?		N/A 🗌 Y	res No	
	If "Yes," attach the statement required by Regulations section 53 4945-5(d)				
6a	Did the foundation, during the year, receive any funds, directly or indirectly, to pay p	remiums			
	on a personal benefit contract?			res X No	
ь	Did the foundation, during the year, pay premiums, directly or indirectly, on a person	nal benefit contract	,	J	6b X
	If "Yes" to 6b, file Form 8870				
7a	At any time during the tax year, was the foundation a party to a prohibited tax shelter	er transaction?		res X No	
b	If "Yes," did the foundation receive any proceeds or have any net income attributab		12	N/A	7b
	Information About Officers, Directors, Trustees, Fou			Paid Employe	es,
*********	and Contractors			• •	•
1	ist all officers, directors, trustees, foundation managers and their compensa-	tion (see instruction	ons).		
		(b) Title, and average	(c) Compensation	(d) Contributions to	_
	(a) Name and address	hours per week	(If not paid,	employee benefit plans and deferred	(e) Expense account, other allowances
		devoted to position	enter -0-)	compensation	
ŞE	E STATEMENT 8	l			
					<u> </u>
2	Compensation of five highest-paid employees (other than those included on	line 1 – see instr	uctions). If none,	enter	
	"NONE."				
		(b) Title, and average		(d) Contributions to	(-) Europea passuat
	(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense account, other allowances
		devoted to position		compensation	
NO	NE	,			
					<u> </u>
		1			
					
				1	
					ļ
					1
Tota	I number of other employees paid over \$50,000				<u>▶</u> 0
				Į	Form 990-PF (2014)

Part VIII Information About Officers, Directors, Trustees, Foundation	Managers, Highly Paid Emp	loyees,
and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see instructions)	If none optor "NONE "	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(b) type of delived	(b) companies
otal number of others receiving over \$50,000 for professional services		•
Part IX-A Summary of Direct Charitable Activities		<u> </u>
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the organizations and other beneficiaries served, conferences convened, research papers produced, etc.	number of	Expenses
1 JOHN 3:16		
2 DOWNS SYNDROME OF TULSA		35,000
2 DOWNS SYNDROME OF TULSA		40.000
3 COMMUNITY FOOD BANK OF EASTERN OKLAHOMA		19,000
		15,000
4 A NEW LEAF		
		15,000
Part IX-B Summary of Program-Related Investments (see instructions	s)	
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A		
2		
All other program-related investments. See instructions		
3		
otal Add lines 1 through 3		

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

	Minimum Investment Return (All domestic foundations must complete this part. Fore	eign foundation	ons,
	see instructions.)		
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	0
b	Average of monthly cash balances	1b	44,516
C	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	44,516
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)	0	
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	44,516
4	Cash deemed held for charitable activities Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	668
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	43,848
6	Minimum Investment return. Enter 5% of line 5	6	2,192
	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	ig foundation	s
	and certain foreign organizations check here ▶ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	2,192
2a	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)		
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1	3	2,192
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	2,192
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	2,192
	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1a	104,500
b	Program-related investments – total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	104,500
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
	Enter 1% of Part I, line 27b (see instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	104,500
	Note The amount or line 6 will be used in Part V column (b) in subsequent years when calculating whether the found	<u> </u>	

Form 990-PF (2014)

Pa	rt XIII Undistributed Income (see instructions)				
		(a)	(b)	(c)	(d)
1	Distributable amount for 2014 from Part XI,	Corpus	Years prior to 2013	2013	2014
	line 7				2,192
2	Undistributed income, if any, as of the end of 2014.				
а	Enter amount for 2013 only				
b	Total for prior years. 20 , 20 , 20				
3	Excess distributions carryover, if any, to 2014				
а	From 2009				
b	From 2010 23, 811				
С	From 2011 29, 313				
d	From 2012 90, 060				
е	From 2013 81, 519				
f	Total of lines 3a through e	224,703			
4	Qualifying distributions for 2014 from Part XII,				
	line 4 ▶ \$ 104,500				
а	Applied to 2013, but not more than line 2a			······	
b	Applied to undistributed income of prior years				
	(Election required – see instructions)				
С	Treated as distributions out of corpus (Election				
	required – see instructions)				
d	Applied to 2014 distributable amount				2,192
е	Remaining amount distributed out of corpus	102,308			
5	Excess distributions carryover applied to 2014				
	(If an amount appears in column (d), the same				
	amount must be shown in column (a))				
6	Enter the net total of each column as				
	indicated below:				1
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	327,011			
b	Prior years' undistributed income Subtract	=			
	line 4b from line 2b				
C	Enter the amount of prior years' undistributed				1
	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				Ī
	amount – see instructions				
е	Undistributed income for 2013 Subtract line				
	4a from line 2a Taxable amount – see				
	instructions				
f	Undistributed income for 2014 Subtract lines				
	4d and 5 from line 1 This amount must be				1
	distributed in 2015				0
7	Amounts treated as distributions out of corpus				•
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2009 not		E		
	applied on line 5 or line 7 (see instructions)				<u></u>
9	Excess distributions carryover to 2015.				
	Subtract lines 7 and 8 from line 6a	327,011			!
10	Analysis of line 9				1
а	Excess from 2010 23, 811		I .		1
b	Excess from 2011 29,313		I		
С	Excess from 2012 90,060		•		
d	Excess from 2013 81,519		Į.		!
е	Excess from 2014 102, 308		<u> </u>		1

Pa	rt XIV Private Operating Fou	ndations (see ins	structions and Part	VII-A, question 9)		
1a	If the foundation has received a ruling or d	etermination letter that	it is a private operating	-]		
	foundation, and the ruling is effective for 2	014, enter the date of t	the ruling	•		
b	Check box to indicate whether the foundat	ion is a private operati	ng foundation describer	d in section 49)42(j)(3) or 49	42(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	investment return from Part X for					
	each year listed					
b	85% of line 2a	<u> </u>	·			
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	•				
3	alternative test relied upon					
_	'					
а	"Assets" alternative test – enter					
	(1) Value of all assets					+
	(2) Value of assets qualifying under		'			
	section 4942(j)(3)(B)(i)					-
b	"Endowment" alternative test – enter 2/3					
	of minimum investment return shown in					
	Part X, line 6 for each year listed					
С	"Support" alternative test – enter					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royalties)	1				
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income					
Pε	ert XV Supplementary Inforn	nation (Complete	this part only if t	he foundation ha	d \$5,000 or more	e in assets at
	any time during the ye	ear – see instruc	tions.)			
1	Information Regarding Foundation Ma	nagers:				
а	List any managers of the foundation who	have contributed more	than 2% of the total co	ntributions received by	the foundation	
	before the close of any tax year (but only	f they have contributed	d more than \$5,000) (S	ee section 507(d)(2))		
	WILLIAM SOLOMON					\$41,000
b	List any managers of the foundation who	own 10% or more of th	e stock of a corporation	n (or an equally large po	rtion of the	
	ownership of a partnership or other entity)	of which the foundation	on has a 10% or greater	nterest		
	N/A					
2	Information Regarding Contribution, G	rant, Gift, Loan, Sch	olarship, etc., Prograi	ns:		
	Check here ▶ ☐ If the foundation only	makes contributions t	o preselected charitable	e organizations and doe	s not accept	
	unsolicited requests for funds If the found	lation makes gifts, grai	nts, etc. (see instruction	s) to individuals or orga	inizations under	
	other conditions, complete items 2a, b, c,	and d				
а	The name, address, and telephone numb	er or e-mail address of	the person to whom ap	plications should be ac	ldressed	
	N/A		·	•		
	•					
	The form in which applications should be	submitted and informa	tion and materials they	should include		
	N/A		materials tricy			
	Any submission deadlines.		, , , , , , , , , , , , , , , , , , , 			
Ü	N/A					
	Any restrictions or limitations on awards,	such as by geographic	al areas, charitable field	ls kinds of institutions	or other	
u		such as by geographic	ar areas, criantable liet	io, airus oi iristitutions,	or onior	
	factors N/A					
DAA	F4\ \(7\)					Form 990-PF (201
DAA						

Form 990-PF (2014) EAGLE GIFT FOUNDATION
Part XV Supplementary Information (continue) Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Recipient	If recipient is an individual, show any relationship to any foundation manager	Foundation status of recipient	Purpose of grant or contribution	Amount			
Name and address (home or business)	or substantial contributor						
a Paid during the year COMMUNITY FOOD BANK OF EAST	ERN OK						
		ORGANIZATION	SUPPORT	15,000			
JOHN 3:16		ORGANIZATION	SUPPORT	35,000			
EMPOWERING ADULTS PROTECTIN	G CHILDR	ONGANIZATION	50110101	33,000			
		ORGANIZATION	SUPPORT	7,500			
TULSA ENGINEERING FOUNDATION	n, inc.						
A NEW LEAF		ORGANIZATION	SUPPORT	3,000			
Y NEM PEWE		ORGANIZATION	SUPPORT	15,000			
TULSA BOY'S HOME							
		ORGANIZATION	SUPPORT	10,000			
DOWNS SYNDROME OF TULSA		ORGANIZATION	SUPPORT	19,000			
Total	<u> </u>		▶ 3a	104,500			
b Approved for future payment N/A							
Total			3 b				

	Analysis of Income-Producing Acounts unless otherwise indicated		ed business income	Exclude	d by section 512, 513, or 514	(a)
1 Program se	rvice revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See instructions)
J						
		_				
		- 				
				 		
		_		1.		
f		_	*******			
	d contracts from government agencies	_		İ		
_	dues and assessments			<u> </u>		
	savings and temporary cash investments					
	nd interest from securities					-
	come or (loss) from real estate					
	anced property					
	t-financed property					
	come or (loss) from personal property					
7 Other invest		-		1		
	s) from sales of assets other than inventory					
	or (loss) from special events					
	or (loss) from sales of inventory	-				· · · · · ·
II Other reven						
	A PIPELINE EXPO	-		7	46,426	
		_		<u> </u>	10,120	
				 		
u		-		1		
12 Subtotal Ac	d columns (b), (d), and (e)	_	(46,426	0
	ine 12, columns (b), (d), and (e)	***************************************			13	46,426
	in line 13 instructions to verify calculations)				_	
Part XVI-6		Accomplishm	ent of Exempt Pu	ırpose	s	
Line No.	Explain below how each activity for which incom					
▼	accomplishment of the foundation's exempt purp					s)
N/A						
		-				
				-		
		·				
	l .					
		· · · · · · · · · · · · · · · · · · ·				
					-	
				-		

27-2627902

Part X		nformation Rega Exempt Organiza		nsfers To and	Transaction	s and Relationships W	ith Noncharitable			
1 Did				in any of the follow	ing with any other	er organization described			Yes	No
	-	-		•	-	on 527, relating to political		ŀ		
	anizations		man section	30 I(C)(3) Organiza	dons) or in section	57 527, relating to political			1	
_				-h					I	
		m the reporting founda	tion to a none	cnaritable exempt o	organization of			4-(4)	İ	v
	Cash							1a(1)		<u>X</u>
	Other as							1a(2)		X
b Oth	er transa	ctions							Ī	
(1)	Sales of	assets to a nonchantal	ble exempt or	rganization				1b(1)		<u>X</u>
(2)	Purchase	es of assets from a nor	ncharitable ex	cempt organization				1b(2)		<u>X</u>
(3)	Rental of	facilities, equipment, o	or other asset	ts				1b(3)		<u>X</u>
(4)	Reimbur	sement arrangements						1b(4)		<u>X</u>
(5)	Loans or	loan guarantees						1b(5)		X
(6)	Performa	ance of services or mei	mbership or f	undraising solicitat	ions			1b(6)		Χ_
c Sha	inng of fa	cilities, equipment, mai	iling lists, othe	er assets, or paid e	mployees			1c		Χ
d If th	e answer	to any of the above is	"Yes," compl	ete the following so	hedule Column	(b) should always show the far	r market			
		•				foundation received less than				
	-					e goods, other assets, or service				
(a) Lin		(b) Amount involved		e of nonchantable exemp			s, transactions, and sharing arm	ingemen	ts	
N/A		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				· · · · · · · · · · · · · · · · · · ·				
11/11										
	—— 			·····						
							·····			
							····			
										
				·						
_										
										
2a Isti	he founda	ition directly or indirect	lv affiliated w	th, or related to, or	e or more tax-ex	cempt organizations				
		section 501(c) of the C						Ye	s X	No
		plete the following sch			o,, c coo				_	,
D 11		i) Name of organization	coulc	(b) Type of o	rnantzation	(c) De	scription of relationship			
N/A		Trans or organization		(=) (),,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	·	,-,-				
14 / 1	<u> </u>			-					-	
										
				_						
1	Under se-	alties of periors I dealers the	t I have evamin	ed this return including	accompaniana sched	lules and statements, and to the best of	my knowledge and helief it is	true		
	correct, an	d complete Declaration of p	reparer (other th	an taxpayer) is based or	n all information of w	hich preparer has any knowledge				
							May the IRS disci			
Sign		1. .	000				(see instructions)		Yes	No No
Here	,	11 Lin.	XXX		. 0	.21-15 DI	<u> </u>			
	_	William	1 100 VE	mo	8	DI:	RECTOR			
	Signa	ture of officer or trustee	<i></i>		Date	Title				
	Print/Tyr	pe preparer's name			Preparer's signatur		Date		Check	☐ if
D-1.1						2010 DN	10-1			ployed
Paid	ERIC	M. KUNKEL, CH	PA/ABV C	VA		AND AND	08/1	}/15		
Preparer	Firm's n	0000	TRATEC		;		PTIN PO	1015	874	1
Use Only	/——	ddress ▶ 8811		AVE STE				152		
	1 11115 21	TULSA		74137-355				-49		
	1	101101	-1 01	, , , , , , , , , , , , , , , ,				Form 99		

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

▶ Information about Schedule B (Form 990, 990-EZ, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Employer Identification number

2014

EAGLE GIFT FOU	UNDATION	27-2627902
Organization type (check one	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	
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	
Note. Only a section 501(c)(7), instructions General Rule	overed by the General Rule or a Special Rule . (8), or (10) organization can check boxes for both the General Rule and a Special Rule on (10) organization can check boxes for both the General Rule and a Special Rule on (10) organization can check boxes for both the General Rule and a Special Rule on (10) organization can check boxes for both the General Rule and a Special Rule on (10) organization can check boxes for both the General Rule and a Special Rule on (10) organization can check boxes for both the General Rule and a Special Rule on (10) organization can check boxes for both the General Rule and a Special Rule on (10) organization can check boxes for both the General Rule and a Special Rule on (10) organization can check boxes for both the General Rule and a Special Rule on (10) organization can check boxes for both the General Rule and a Special Rule on (10) organization can check boxes for both the General Rule and a Special Rule on (10) organization can check boxes for both the General Rule and a Special Rule on (10) organization can check boxes for both the General Rule on (10) organization can check boxes for both the General Rule on (10) organization can check boxes for both the General Rule on (10) organization can check boxes for both the General Rule on (10) organization can check boxes for both the General Rule on (10) organization can check boxes for both the General Rule on (10) organization can check boxes for both the General Rule on (10) organization can check boxes for both the General Rule on (10) organization can check boxes for both the General Rule on (10) organization can check boxes for both the General Rule on (10) organization can check boxes for both the General Rule on (10) organization can check boxes for both the General Rule on (10) organization can check boxes for both the General Rule on (10) organization can check boxes for both the General Rule on (10) organization can check boxes for both the General Rule on (10) organization can check box	
-	property) from any one contributor. Complete Parts I and II. See instructions for determin	
Special Rules		
regulations under secti 13, 16a, or 16b, and th	escribed in section $501(c)(3)$ filing Form 990 or 990-EZ that met the $33^1/3$ % support test ions $509(a)(1)$ and $170(b)(1)(A)(vi)$, that checked Schedule A (Form 990 or 990-EZ), Paratriceived from any one contributor, during the year, total contributions of the greater of amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I	rt II, line of (1)
contributor, during the	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from an year, total contributions of more than \$1,000 exclusively for religious, charitable, scientif purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, an	īic,
contributor, during the contributions totaled m	escribed in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from an year, contributions exclusively for religious, charitable, etc., purposes, but no such nore than \$1,000. If this box is checked, enter here the total contributions that were receivexclusively religious, charitable, etc., purpose. Do not complete any of the parts unless to this organization because it received nonexclusively religious, charitable, etc., contribe during the year.	rved he
990-EZ, or 990-PF), but it mus	is not covered by the General Rule and/or the Special Rules does not file Schedule B (F st answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or	990-EZ or on its

PAGE 1 OF 1 Page 2

Name of organization EAGLE GIFT FOUNDATION Employer identification number 27-2627902

Contributors (see instructions). Use duplicate copies of Part Lif additional space is needed.

(a)	`	(b) (c)			
No.	Name, addres	•	Total contribution	(d) s Type of contribution	
1	VACUWORX INTERNAT 10105 E 55TH PL TULSA	IONAL, INC OK 74146	s 19,	Person X Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	(b) Name, address, and ZIP + 4		(c) Total contribution	(d) s Type of contribution	
2	CHALLENGER SERVIC 4530 S JACKSON AV TULSA		s 6,	Person X Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.	Name, addres	b) s, and ZIP + 4	(c) Total contribution	(d) s Type of contribution	
3	WILLIAM SOLOMON 3605 E. 66TH STRE	ET OK 74136	\$ 41,	Person X Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.		b) ss, and ZIP + 4	(c) Total contribution	(d) Type of contribution	
4	PIPELINERS LOCAL 4823 S 83RD E AVE TULSA	UNION 798		Person X Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.		(b) ss, and ZIP + 4	(c) Total contribution	(d) Type of contribution	
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)	
(a) No.		(b) ss, and ZIP + 4	(c) Total contribution	(d) Type of contribution	
			\$	Person Payroll Noncash (Complete Part II for noncash contributions)	

EAG12F01 EAGLE GIFT FOUNDATION 27-2627902 FYE: 12/31/2014	Federal Statements	ements		8/19/2015 10:57 AM
Statement 1	- For	m 990-PF, Part I, Line 11 - Other Income	Income	•
Description	L	Revenue per Books	Net Investment Income	Adjusted Net Income
TULSA PIPELINE EXPO TOTAL	w w	46,426	\$ \$	\$ 46,426
Statement 2	- Form 990-PF,	Part I, Line 16a - Legal Fees	il Fees	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
INDIRECT LEGAL FEES TOTAL	\$ 1,484 \$	0	\$ \$	\$ \$
Statement	3 - Form 990-PF,	Part I, Line 16b - Accounting Fees	ting Fees	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
ACCOUNTING FEES TOTAL	\$ 3,305 \$	0	\$	\$
				1-3

	-			·_·
8/19/2015 10:57 AM	•	Charitable Purpose	v.	4
	Expenses	Adjusted Net	w w	
Federal Statements	990-PF, Part I, Line 23 - Other Expenses	Net Investment	\$	
Federal	- Form	Total	\$ 206 6,674 799 26 10,470 9,479 9,971 134,340	
EAG12F01 EAGLE GIFT FOUNDATION 27-2627902 FYE: 12/31/2014	Statement 4	Description	EXPENSES BANK FEES CREDIT CARD FEES MEMBERSHS AND DUES SUPPLIES FACILITIES AND EQUIPMENT EXPO ADVERTISING IT-WEBSITE TULSA PIPELINE EXPO EXPENSES TOTAL	

8/19/2015 10:57 AM

EAG12F01 ÉAGLE GIFT FOUNDATION

27-2627902

Federal Statements

FYE: 12/31/2014

Statement 5 - Form 990-PF, Part II, Line 22 - Other Liabilities

Description	Be	 End of Year		
OTHER LIABILITY	\$	5,000	\$ 46,542	
TOTAL	\$	5,000	\$ 46,542	

Statement 6 - Form 990-PF, Part III, Line 5 - Other Decreases

Description	Amount
OTHER DECREASE PRIOR PERIOD ADJUSTMENT	\$ 1,500 3,358
TOTAL	\$ 4,858

0 8/19/2015 10:57 AM 0 0 Expenses 7-8 0 0 Statement 8 - Form 990-PF, Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc. Benefits City, State, Zip Statement 7 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors 0 0 0 Compensation 0 EDMOND OK 73013 **TULSA OK 74116 TULSA OK 74146 TULSA OK 74146** TULSA OK 74146 TULSA OK 74107 TULSA OK 74157 TULSA OK 74107 **Federal Statements** Average Hours 3.00 3.00 3.00 3.00 Title DIRECTOR DIRECTOR DIRECTOR DIRECTOR ഹ Address 2505 S 33RD WEST AVE 1600 E 19TH ST BLDG 12321 E PINE STREET 4344 S MAYBELLE AVE 10105 E 55TH PLACE 4530 S JACKSON AVE EAG12F01 EAGLE GIFT FOUNDATION Q K TULSA, OK TULSA, Name and KIRBY-SMITH MACHINERY, Address Name DANIELLE E. SOLOMON 3605 E. 66TH STREET MATHEY DEARMAN, INC WILLIAM SOLOMON 3605 E. 66TH STREET TULSA OK 74136 CHRISTY SOLOMON 3605 E. 66TH STREET TULSA OK 74136 MICHELLE N. NACE 3605 E. 66TH STREET TULSA OK 74136 CHALLENGER SERVICES ALLAN EDWARDS, INC CURTIS RICHARDSON WILLIAM SOLOMON FYE: 12/31/2014 TEEMCO, LLC 27-2627902 VACUWORX

]	• • • • • • • • • • • • • • • • • • • •		·	
8/19/2015 10:57 AM	•	Expenses	0	σ.
/8	, Trustees,	Benefits	0	
S	Part VIII, Line 1 - List of Officers, Directors, Trustees, Etc. (continued)	Compensation	0	
Federal Statements	Line 1 - List of (continued)	Average	3.00	
Federa		Title	DIRECTOR	
EAG12F01 EAGLE GIFT FOUNDATION 27-2627902 FYE: 12/31/2014	Statement 8 - Form 990-PF	Name and Address TULSA OK 74136	GRAYSON SOLOMON 3605 E. 66TH STREET TULSA OK 74136	

EAG12F01 ÉAGLE GIFT FOUNDATION

27-2627902 FYE: 12/31/2014 **Federal Statements**

8/19/2015 10:57 AM

Form 990-PF, Part XV, Line 1a - Managers Who Contributed Over 2% or \$5,000

Name of Manager	Amount
WILLIAM SOLOMON	\$\$41,000
TOTAL	\$ 41,000

Form 8868	(Rev. 1-2014)						Page 2
• If you a	re filing for an Additional (Not Automatic) 3-Month	Extension,	complete only Part II and ch	eck this box	ĸ		▶ X
Note. Only	complete Part II if you have already been granted ar	automatic :	3-month extension on a previou	usly filed Fo	m 8	868	
	re filing for an Automatic 3-Month Extension, com						
Part II	Additional (Not Automatic) 3-Month	<u>Extensio</u>					
					ntifyIng number, see instructions		
Type or	Name of exempt organization or other filer, see i	e instructions Employer id		dentification number (EIN) or			
print	EAGLE GIFT FOUNDATION		2	7-262	7 9 0	2	
	Number, street, and room or suite no. If a P.O. b	ny see inst				mber (SSN)	
File by the	10105 E 55TH PLACE	ox, see mst	Tuctions C	ocial sccul	ny ma	111001 (0014)	
due date for filing your	City, town or post office, state, and ZIP code Fo	r a foreign a	iddress, see instructions				· · · · · · · · · · · · · · · · · · ·
return See		J					
instructions							
	TULSA OK	74146	5				
							
Enter the R	Return code for the return that this application is for (fi	ile a separat	e application for each return)				04
		T	<u> </u>				
Applicati	ion	Return	Application				Return Code
Is For	or Form 990-EZ	Code 01	ls For			_	Code
Form 990		02	Form 1041-A				08
	20 (individual)	03	Form 4720 (other than indivi	dual)	•		09
Form 990		04	Form 5227			10	
Form 990-T (sec 401(a) or 408(a) trust)			Form 6069			11	
Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 Form 990-T (trust other than above) 06 Form 8870							12
	not complete Part II if you were not already grant EAGLE GIFT FOUNDATION 10105 F 55TH DIACE						
• The boo	10105 E 55TH PLACE ks are in the care of ▶TULSA					OK 7	1146
	one No	FAX No	•				
•	rganization does not have an office or place of busing	ess in the U	nited States, check this box				▶ 🗌
• If this is	s for a Group Return, enter the organization's four dig	git Group Ex	emption Number (GEN)	If this is			
	_	_	up, check this box	and atta	ch a		
list with the	names and EINs of all members the extension is for	<u>r. </u>	· · · · · · · · · · · · · · · · · · ·				
4 1	west an additional 2 month outonoism of time until 1	/15/15					
•	uest an additional 3-month extension of time unti 11 : alendar year 2014 , or other tax year beginnir		, and ending				
	tax year entered in line 5 is for less than 12 months,	_	— —	return			
	Change in accounting period						
7 State	e in detail why you need the extension						
	DITIONAL TIME IS REQUESTED	TO GA	ATHER INFORMATION	OT NC	PRI	EPARE A	COMPLETE
AN	D ACCURATE RETURN.						
0 - 16 45		0 == 6060 4	enter the tentative toy lose any			_	
	s application is for Form 990-BL, 990-PF, 990-T, 472 efundable credits. See instructions	U, UI 000 3 , E	siller trie teritative tax, less arry		8a	\$	0
	s application is for Form 990-PF, 990-T, 4720, or 606	9. enter any	refundable credits and			·	<u></u>
	nated tax payments made Include any prior year ove	_					
	unt paid previously with Form 8868	. ,			8b	\$	0
	nce due. Subtract line 8b from line 8a Include your	payment wit	h this form, if required, by using	g EFTPS			
(Elec	tronic Federal Tax Payment System) See instruction	ns			8c	\$	<u> </u>
	Signature and Verific	ation mu	st be completed for Pa	rt II only			
	alties of perjury, I declare that I have examined this for			nd statemer	nts, a	nd to the best	of my
knowledge	and belief, it is true, correct, and complete, and that	I am author	ized to prepare this form				
Signature >	(G(O) \(\mathcal{P}\)\(\mathcal{P}\)	т	tle >			Date ▶ (08/06/15
			-				868 (Rev 1-2014)