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Form 990-PF

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

▶ 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.

Internal Revenue Service For calendar year 2014 or tax year beginning , and ending Name of foundation Employer identification number JOE & SUE ESCO CHARITABLE TRUST C/O FOUNDATIONS MANAGEMENT 27-6688776 Telephone number (see instructions) Number and street (or P O box number if mail is not delivered to street address) Room/suite 2932 NW 122ND ST 405-936-3923 City or town, state or province, country, and ZIP or foreign postal code if exemption application is pending, check here OKLAHOMA CITY OK 73120 G Check all that apply Initial return Initial return of a former public charity 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the Address change 85% test, check here and attach computation Name change Check type of organization X Section 501(c)(3) exempt private foundation If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at J Accounting method X Cash If the foundation is in a 60-month termination end of year (from Part II, col (c), Other (specify) under section 507(b)(1)(B), check here 552,711 line 16) ▶ \$ (Part I, column (d) must be on cash basis (d) Disbursements Part I Analysis of Revenue and Expenses (The total of (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per purposes books the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) Check ► X if the foundation is **not** required to attach Sch B 2 3 Interest on savings and temporary cash investments 4 Dividends and interest from securities 13,255 13,255 5a Gross rents b Net rental income or (loss) Revenue STMT 1 29,849 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 489,478 204 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold C Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 43,104 13,459 0 Total. Add lines 1 through 11 13 Compensation of officers, directors, trustees, etc. Operating and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 1,165 STMT 2 Accounting fees (attach schedule) STMT 3 4,008 ٤, Other professional fees (attach schedule) 17 STMT 4 502 502 5 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 325 23 Other expenses (att sch) 24 Total operating and administrative expenses. 6,000 502 0 Add lines 13 through 23 25 Contributions, gifts, grants paid 0 6,000 502 ٥ 26 Total expenses and disbursements. Add lines 24 and 25 27 Subtract line 26 from line 12

a Excess of revenue over expenses and disbursen

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

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

For Paperwork Reduction Act Notice, see Instructions. 37,104 Excess of revenue over expenses and disbursements 12,957 Net investment income (if negative, enter -0-) 0

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3 908 4 518,182 5 368 6 517,814

2

37,104

2 Enter amount from Part I, line 27a

4 Add lines 1, 2, and 3

3 Other increases not included in line 2 (itemize) ▶ SEE STATEMENT 9

5 Decreases not included in line 2 (itemize) ▶ SEE STATEMENT 10

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the

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Part VI instructions

For	m 990-PF (2014) JOE & SUE ESCO CHARITABLE TRUST 27-6688776				1	Page 4
<u>P</u>	art VI 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)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check	1	J			259
	here ▶ ☐ and enter 1% of Part I, line 27b					
C	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of					
	Part I, line 12, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				
3	Add lines 1 and 2	3				259
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	5				259
6	Credits/Payments					
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6a					
b	Exempt foreign organizations – tax withheld at source					
С	Tax paid with application for extension of time to file (Form 8868)					
d	Backup withholding erroneously withheld 6d 6d					
7	Total credits and payments. Add lines 6a through 6d	7				
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	<u> </u>			259
10	Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
11	Enter the amount of line 10 to be Credited to 2015 estimated tax ▶ Refunded ▶	11				
	art VII-A Statements Regarding Activities				-	
	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		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see				_	
	Instructions for the definition)?			1b	}	x
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials					
	published or distributed by the foundation in connection with the activities					
c	Did the foundation file Form 1120-POL for this year?			1c		x
d				'`		
•	(1) On the foundation > \$ (2) On foundation managers > \$					
6	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		x
-	If "Yes," attach a detailed description of the activities			-		-
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of					
•	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		x
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		-
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		-17	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	x	Ì
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	VV.		7	X	
, 8а	Enter the states to which the foundation reports or with which it is registered (see instructions)	~~				 -
oa	NONE					
h						
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General			o_	x	
n	(or designate) of each state as required by General Instruction G? If "No," attach explanation			8b		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or			İ		
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes,"			ا ر		v
^	complete Part XIV			9		X
0	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	1				v
	names and addresses STMT 1	<u>- T</u>		10		X
			Fo	om 99	U-PF	(2014)

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Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of

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

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)

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X

X

3b

4a

4b

N/A

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Part VII-B Statements Rega	arding Activities for Which Fo	orm 4720 May Be F	Required (con	tinued)		
5a During the year did the foundation pa	ay or incur any amount to					
(1) Carry on propaganda, or otherwi	se attempt to influence legislation (se	ction 4945(e))?	[_] ,	Yes X No		
(2) Influence the outcome of any spe	ecific public election (see section 495	5), or to carry on,				
directly or indirectly, any voter re	gistration drive?		<u> </u>	Yes X No		
(3) Provide a grant to an individual f	or travel, study, or other similar purpo	ses?	∐ ,	Yes 🗓 No		
(4) Provide a grant to an organization	n other than a charitable, etc , organiz	zation described in	_			
section 4945(d)(4)(A)? (see instr	uctions)		□ ,	Yes X No		
(5) Provide for any purpose other the	an religious, charitable, scientific, liter	ary, or educational				
purposes, or for the prevention of	f cruelty to children or animals?		□ ,	Yes X No		
b If any answer is "Yes" to 5a(1)–(5), d	id any of the transactions fail to qualif	fy under the exceptions of	lescribed in			
Regulations section 53.4945 or in a	current notice regarding disaster assis	stance (see instructions)	?	N/A	5b	_
Organizations relying on a current no	otice regarding disaster assistance che	eck here		▶ ∐		
c If the answer is "Yes" to question 5a((4), does the foundation claim exempt	ion from the tax				
because it maintained expenditure re	sponsibility for the grant?		N/A 🔲 🔻	res 🔲 No		
If "Yes," attach the statement require	d by Regulations section 53 4945–5(c	t)				
6a Did the foundation, during the year, r	eceive any funds, directly or indirectly	, to pay premiums				
on a personal benefit contract?				res 🗓 No		
b Did the foundation, during the year, p	ay premiums, directly or indirectly, or	n a personal benefit conti	ract?		6b	X
If "Yes" to 6b, file Form 8870				(500)		
7a At any time during the tax year, was			L 	res X No		
bIf "Yes," did the foundation receive a	ny proceeds or have any net income a	attributable to the transac	ction?	N/A	7b	L
	Officers, Directors, Trustees	s, Foundation Man	agers, Highly	Paid Employ	ees,	
and Contractors						
1 List all officers, directors, trustees, t	oundation managers and their com	pensation (see instruc	tions).			
		(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit	(e) Expr	ense account,
(a) Name a	and address	hours per week devoted to position	(If not paid, enter -0-)	plans and deferred		allowances
				compensation	├──	
STEVEN J. ESCO	OKLAHOMA CITY	TRUSTER				
12009 QUAIL CREEK RD	OK 73120	0.00	0	<u>_</u>		0
SUSAN L ESCO	OKLAHOMA CITY	TRUSTEE				•
2932 NW 122ND, STE. D,	OK 73120	0.00			 	0
KYLIE ESCO	ORLAHOMA CITY	TRUSTEE				^
2932 NW 122ND, STE. D	OK 73120	0.00		<u>_</u>	 	0
2 Compensation of five highest-paid	l ampleyees (ather then those inclu	dod on line 1 – see ins	tructions) If non	e enter	Щ.	
"NONE."	employees (other than those inclu-	ded on line 1 - see his	uucuons). Ii non	e, enter		
NONE.				(d) Contributions to		
(a) Name and address of each emplo	vee paid more than \$50,000	(b) Title, and average hours per week	(c) Compensation	employee benefit		ense account,
(a) Name and address of cach emplo	yoo pala more alah 400,000	devoted to position	(-,	plans and deferred compensation	other	allowances
NONE						
HONE						
					<u> </u>	
					İ	
					\vdash	
				·		
				1	ĺ	
						
					1	
Total number of other employees paid over	r \$50,000				•	0
					001	DE

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Part VIII	Information About Officers, Directors, Trustees, Foundaring and Contractors (continued)	ation Managers, Highly Paid E	mployees,
3 Five highe	est-paid independent contractors for professional services (see instruc	ctions). If none, enter "NONE."	
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
			
Total number of	others receiving over \$50,000 for professional services		>
Part IX-A	Summary of Direct Charitable Activities		<u> </u>
	four largest direct charitable activities during the tax year. Include relevant statistical information such ther beneficiaries served, conferences convened, research papers produced, etc.	ch as the number of	Expenses
1 N/A			
2			
3			
4			
•			
Part IX-B	Summary of Program-Related Investments (see instruct	lions)	
Describe the two larg	gest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 N/A			
2			
All other program-rel	ated investments. See instructions		

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Total. Add lines 1 through 3

	n 990-PF (2014) JUE & SUE ESCO CHARITABLE TRUST 27-66887/6		Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign	ın founda	tions,
	see instructions.)	<u> </u>	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
_	purposes	1 .]	534,198
a	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets (see instructions)	1c	534,198
d	Total (add lines 1a, b, and c)	1d	334,190
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 1e 0		
2		1 i	0
2	Acquisition indebtedness applicable to line 1 assets	2 -	534,198
3	Subtract line 2 from line 1d	3	334,130
4	Cash deemed held for charitable activities Enter 1½% of line 3 (for greater amount, see] ,	8,013
_	instructions)	4 -	526,185
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	26,309
6	Minimum investment return, Enter 5% of line 5	6	
Pá	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	roundatio	ns
	and certain foreign organizations check here ▶ and do not complete this part.)		26 200
1	Minimum investment return from Part X, line 6	1 -	26,309
2a	Tax on investment income for 2014 from Part VI, line 5		
Ь	Income tax for 2014 (This does not include the tax from Part VI)		250
C	Add lines 2a and 2b	2c	259
3	Distributable amount before adjustments Subtract line 2c from line 1	3	26,050
4	Recoveries of amounts treated as qualifying distributions	4	06.050
5	Add lines 3 and 4	5	26,050
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,		06 050
	line 1	7	26,050
Pa	Pt XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	0
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	0
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	
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	tion	
	qualifies for the section 4940(e) reduction of tax in those years	_	

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Excess from 2012 Excess from 2013 Excess from 2014

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For	m 990-PF (2014) JOE & SUE ES	SCO CHARITA	BLE TRUST	27-6688	776	Page *
P	art XIV Private Operating Fo	undations (see ir	nstructions and Pa	art VII-A, question	9)	
1a	If the foundation has received a ruling or	determination letter t	hat it is a private opera	ating		
	foundation, and the ruling is effective for	2014, enter the date	of the ruling	•		
b	Check box to indicate whether the found	ation is a private oper	ating foundation desci	ribed in section	4942(j)(3) or 494	42(j)(5)
2 a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(a) Total
	income from Part I or the minimum	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
	investment return from Part X for			7		
	each year listed					
b	85% of line 2a			Ţ		
С	Qualifying distributions from Part XII,			T		
	line 4 for each year listed			1		}
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities			1		
е	Qualifying distributions made directly	-				
	for active conduct of exempt activities		1	1		
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon					
а	"Assets" alternative test – enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(i)(3)(B)(i)					
ь	"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,		j]	,
	dividends, rents, payments on					
	securities loans (section				Į	
	512(a)(5)), or royalties)		 	 	 	<u> </u>
	(2) Support from general public and 5 or more exempt				1	
	organizations as provided in					ļ
	section 4942(j)(3)(B)(iii)		}		}]
	(3) Largest amount of support from					
	an exempt organization				<u> </u>	
	(4) Gross investment income					
Pi	art XV Supplementary Inform	nation (Complete	this part only if	the foundation h	ad \$5,000 or more	e in assets at
	any time during the ye	<u>ear – see instruc</u>	tions.)			
1	Information Regarding Foundation Ma	nagers:				
а	List any managers of the foundation who	have contributed mor	e than 2% of the total	contributions received	by the foundation	
	before the close of any tax year (but only	if they have contribute	ed more than \$5,000)	(See section 507(d)(2	2))	
	N/A					· - · · - · - · - · - · - · · - · · - ·
b	List any managers of the foundation who	own 10% or more of	the stock of a corporat	ion (or an equally larg	e portion of the	
	ownership of a partnership or other entity) of which the foundat	ion has a 10% or grea	iter interest		
	N/A					
2	Information Regarding Contribution, G	irant, Gift, Loan, Sch	olarship, etc., Progr	ams:		
	Check here ▶ X if the foundation only	makes contributions	to preselected charital	ble organizations and	does not accept	
	unsolicited requests for funds. If the found	dation makes gifts, gr	ants, etc (see instruct	tions) to individuals or	organizations under	
	other conditions, complete items 2a, b, c,	and d			<u> </u>	
а	The name, address, and telephone numb	er or e-mail address o	of the person to whom	applications should be	e addressed	
	N/A					
		. <u> </u>				
b	The form in which applications should be	submitted and inform	ation and materials the	ey should include:		
	N/A	·				
C	Any submission deadlines			_		
	N/A					
d	Any restrictions or limitations on awards,	such as by geographi	cal areas, charitable fi	elds, kınds of ınstitutio	ons, or other	
	factors					
	N/A					
DAA						Form 990-PF (201-

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Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient Purpose of grant or show any relationship to status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor a Paid during the year N/A 3a b Approved for future payment N/A **▶** 3b Total

Part XVI-A	Analysis of Income-Producing Act	ivities				
	ounts unless otherwise indicated		ed business income	Exclude	d by section 512, 513, or 514	(-)
	•	(a) Business code	(b) Amount	(c) Exclusion	(d) Amount	(e) Related or exempt function income
1 Program se	ervice revenue			code		(See instructions)
a		<u></u>				
			<u> </u>			
d						
е						
f						
g Fees ar	nd contracts from government agencies					
	p dues and assessments					
	savings and temporary cash investments	<u> </u>				
	nd interest from securities			14	13,255	
	ncome or (loss) from real estate					
	anced property			ļ		
	et-financed property					
	ncome or (loss) from personal property					
7 Other inves				-		20.040
	s) from sales of assets other than inventory	<u> </u>				29,849
	or (loss) from special events				 _	
	or (loss) from sales of inventory					
11 Other reven	ue. a	ļ				
		 				
<u> </u>						
2 Subtotal Ac	ld columns (b), (d), and (e)		0		13,255	29,849
	ine 12, columns (b), (d), and (e)	<u> </u>		1	13	
	in line 13 instructions to verify calculations)					
Part XVI-B		complishm	ent of Exempt Pu	ırpose		
Line No. ▼	Explain below how each activity for which income is accomplishment of the foundation's exempt purpose	s reported in co	olumn (e) of Part XVI-	A contrib	uted importantly to the	ons)
N/A		<u> </u>			, , , , , , , , , , , , , , , , , , , ,	
						
		···				
						
	<u> </u>					
						
	<u> </u>					
		 				

405-843-9371 Form 990-PF (2014)

P00883013

73-1078673

PTIN

Firm's EIN ▶

Phone no

Check _____ if

Paid

Preparer

Use Only

Signature of officer or trustee

MICAH B. STEELMAN

Firm's name

Firm's address

PETERS & CHANDLER,

OKLAHOMA CITY, OK

P.C

73112-7209

2601 NW EXPRESSWAY ST STE 600E

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	Net Gain / Loss	\$ 5,000	3,095	Charitable	0	Charitable	Purpose	0		1-3
	Depreciation	w	w	S justed Net	1 1 1		Net	· νν· "		!
iale of Assets	Expense	w		ccounting Fee	w w	r Professional	φ.	·ν.		
art I, Line 6a - S	– Cost	22,054	227,686 197,929 459,629	ti, Line 16b - A	w w	Line 16c - Othe	Investment	W		
	Sale Price	PURCHASE 27,054 \$ PURCHASE 14,450 PURCHASE	230,781 PURCHASE 216,989 489,274 \$	rm 990-PF, Par	715 450 1,165		Total 2,440 1,568	4,008		
Statement 1 - F	Date Sold	1/22/20 \$ 1/22/20 HED)	VARIOUS ED) VARIOUS ====================================	tatement 2 - Fo	 		φ.			
	Description Date Acquired				R, P.C.	State	ription			
	Whom		ARIOUS LONG TER TOTAL	Descr	ERS & CH		1 1 24	TOTAL		
	Statement 1 - Form 9	Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets How Received Date Date Sale Sale Cost Expense Depreciation	Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets	Description Pate Sale Cost Expense Date Sold Acquired Sold Acquired Sold Price Cost Expense Depreciation Gain / Nextrous 1/22/20 Purchase 22,054 Sold Acquired Sold Price Cost Expense Depreciation Gain / Sold Purchase 27,054 Sold Purchase 11,960 Purchase 11,960 Purchase Arrancia Statement 1 - Form 990-PF, Part I, Line 6a - Sale of Assets	Description	Pescription	Parameter Para	Procession Pro	Description Received How How How How Date Sale Sale Sale Cost Expense Depreciation Gain / Loss Sale Sale Sale Sale Cost Expense Depreciation Gain / Loss Sale Sale Sale Sale Cost Expense Depreciation Gain / Loss Sale Cost Sale Sale Cost Sale Sale Cost Sale Sale Cost Sale Sale Sale Cost Sale Sa	

5317 JOE & SUE ESCO CHARITABLE TRUST 27-6688776 FYE: 12/31/2014		ederal Statements		8/25/2015 3:06 PM
State	Statement 4 - Form 990-	- Form 990-PF, Part I, Line 18 - Taxes	Xes	
Description	Total	Net Investment	Adjusted Net	Charitable · Purpose
FEDERAL TAXES FOREIGN TAXES TOTAL	\$ 442 60 \$ 502	\$ 442 60 \$ 502	w w	w w
Statement 5	- For	m 990-PF, Part I, Line 23 - Other Expenses	xpenses	
Description	Total	Net Investment	Adjusted Net	Charitable Purpose
EXPENSES BANK OF OKLAHOMA TRUSTEE FEES				
10181	325		A	O
Statement 6 - For	rm 990-PF, Part II, L	Statement 6 - Form 990-PF, Part II, Line 10b - Corporate Stock Investments	ock Investments	
Description	Beginning of Year	End of Year	Basis of Valuation	Fair Market Value
BANK OF OKLAHOMA - COMMON STOCK SCHWAB - COMMON STOCK	71			\$ 473,541
TOTAL	\$ 71,198	8 \$ 435,925	10 II	\$ 473,541
Statement 7 - Fo	rm 990-PF, Part II, L	Statement 7 - Form 990-PF, Part II, Line 10c - Corporate Bond Investments	and Investments	
Description SCHWAB - FIXED INCOME- MUTUAL FUNDS	Beginning of Year	End of Year \$ 10,043	Basis of Valuation	Fair Market Value
TOTAL	w	0 \$ 10,043		\$ 10,010
				4-7

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JST	Federal Statements	
5317 JOE & SUE ESCO CHARITABLE TRUST	27-6688776	FYE: 12/31/2014

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Statement 8	- Form	8 - Form 990-PF, Part II, Line 13 - Other Investments	Line 13	- Other Invest	tments		•
Description	ш	Beginning of Year		End of Year	Basis of Valuation	я	Fair Market Value
BANK OF OKLAHOMA - FIXED INCOME BANK OF OKLAHOMA - MUTUAL FUNDS	w	128,476	w		COST	ស	
BANN OF ONLAHOWA - ALIEKWAIIVE INVES SCHWAB - MUTUAL FUNDS		//0'9/		31,881	COST		29,195
TOTAL	φ	376,968	w	31,881		w	29,195

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Federal Statements

FYE: 12/31/2014

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Statement 9 - Form 990-PF, Part III, Line 3 - Other Increases

Description	<u>Ar</u>	nount
NONDIVIDEND DISTRIBUTIONS	\$	908
TOTAL	\$	908

Statement 10 - Form 990-PF, Part III, Line 5 - Other Decreases

Description	Amoun	Amount		
ADJUSTMENT TO AGREE NET ASSETS	\$	368		
TOTAL	\$	368		

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8/25/2015 3:06 PM 7 City, State, Zip Statement 11 - Form 990-PF, Part VII-A, Line 10 - Substantial Contributors TULSA OK 74101-1620 Federal Statements Address 5317 JOE & SUE ESCO CHARITABLE TRUST P.O. BOX 1620 Name FYE: 12/31/2014 27-6688776

Form **8868**

(Rev January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No 1545 1709

Form 8868 (Rev 1-2014)

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box						X	
• If you	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of	this form)			
Do not d	complete Part II unless you have already been granted a	an automa	atic 3 month extension on a previous	sly filed Fo	rm 8868		
	nic filing (e-file). You can electronically file Form 8868 if y			-		oration	
	to file Form 990-T), or an additional (not automatic) 3-mor			,	· · · · · · · · · · · · · · · · · · ·		
•	o file any of the forms listed in Part I or Part II with the exc		•		•		
	Il Benefit Contracts, which must be sent to the IRS in pap						
	w irs gov/efile and click on e-file for Charities & Nonprofits		, · · · · · · · · · · · · · · · · · · ·			,	
Part			submit original (no copies ne	eded)			
	ration required to file Form 990-T and requesting an auton						
Part I or	,				•		
	r corporations (including 1120-C filers), partnerships, REM	ICs. and t	rusts must use Form 7004 to reques	st an exten	sion of time	_	
	come tax returns				e <u>r's identifying</u> nun	nher	
Type or Name of exempt organization or other filer, see instructions			Employer identification number (EIN) or				
print	TOP : GUD EGGO GUADIMADI E MOUGE			Employer identification frameer (Env) or			
prant	C/O FOUNDATIONS MANAGEMENT		27-6688776				
File by the	e by the		tions	Social security number (SSN)			
filing your				Goolal Security Humber (GOIV)			
return See		reign add	ress see instructions	L			
11134 2011011	OKLAHOMA CITY, OK 73120	noigh add	ness, see mandenons				
	ORDINION CITY OR 75120				·· ··		
Entar th	e Return code for the return that this application is for (file	a cenara	te application for each return)			0 4	
Eufer m	e Retuint Code for the retuint that this application is for the	a separa	te application for each return)			014	
A l		Return	Annication			Data	
Application		i	Application			Return	
Is For		Code	Is For			Code 07	
			Form 990-T (corporation)				
		Form 1041-A		08			
		Form 4720 (other than individual)					
Form 990-PF		04	Form 5227			10	
Form 990-T (sec 401(a) or 408(a) trust)		05	Form 6069			11	
Form 990-T (trust other than above) 06 Form 8870 12							
	THE FOUNDATION	nm /	OU AUGUA CITUR OU	72120			
	books are in the care of \triangleright 2932 NW 122ND S	2.T (73120			
	hone No ► 405-936-3923		Fax No -	 -			
	organization does not have an office or place of business						
	is for a Group Return, enter the organization's four digit (1					
box 🕨	If it is for part of the group, check this box				ers the extension is	tor	
1 In	equest an automatic 3-month (6 months for a corporation						
_		t organiza	tion return for the organization name	ed above	The extension		
	for the organization's return for						
•	X calendar year 2014 or						
>	tax year beginning	, an	d ending				
2 lf 1	the tax year entered in line 1 is for less than 12 months, cl	heck reas	on Initial return	Final retur	n		
	Change in accounting period						
3a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any							
no	nrefundable credits. See instructions			3a	\$	0.	
b If	this application is for Forms 990-PF, 990-T, 4720, or 6069	, enter an	y refundable credits and				
es	timated tax payments made. Include any pnor year overp	ayment al	llowed as a credit	3b	\$	0.	
	alance due. Subtract line 3b from line 3a Include your pa						
by	using EFTPS (Electronic Federal Tax Payment System)	See instru	ctions	3с	\$	0.	
	. If you are going to make an electronic funds withdrawal			3453-EO ar	nd Form 8879-EO fo		
instructi			·			. •	

For Privacy Act and Paperwork Reduction Act Notice, see instructions.

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