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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 2014

Department of the Treasury Internal Revenue Service

▶ 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.

Open to Public Inspection

		ndar year 2014 or tax year beginning	, 20	014, and	ending		, 20
Ni	ame of fo	pundation			A Employe	er identification numb	er
R	ussell	and Willene Dobson Foundation			46 -	3885187	
Nt	umber ar	nd street (or P O box number if mail is not delivered to street address)	Ro	om/suite	B Telepho	ne number (see instruct	ions)
13	3900 N	I Portland Ave	ļ	200	405	- 242-0335	
Cı	ty or tow	n, state or province, country, and ZIP or foreign postal code			C If ayama	tion application in poor	lan abask base D
		na City, OK 73142			C il exemp	tion application is pend	ling, cneck nere ►
		<u>_</u>	of a formar pub	lia oboriti	1		
u	Cileci		n of a former pub	iic charity	1. Foreig	n organizations, check	here ►
		☐ Final return ☐ Amended				n organizations meetin	
		Address change Name change				here and attach computed foundation status was	
Н		k type of organization.  Section 501(c)(3) exempt p				607(b)(1)(A), check here	
Щ		on 4947(a)(1) nonexempt charitable trust					
ı		narket value of all assets at   J Accounting method	. ☑ Cash ∐	Accrual		ndation is in a 60-mont	
		f year (from Part II, col. (c),			under se	ction 507(b)(1)(B), chec	k here ►
		6) ► \$ 987,920 (Part I, column (d) must be	on cash basis )		İ	,	
P	art I	Analysis of Revenue and Expenses (The total of	(a) Revenue and	(b) No	atmost	(a) Advisted ant	(d) Disbursements
		amounts in columns (b), (c), and (d) may not necessarily equal	expenses per books		investment ncome	(c) Adjusted net income	for charitable purposes
_		the amounts in column (a) (see instructions) ) Schedule 1	DOOKS				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule)	404,40	0			
	2	Check ► ☐ if the foundation is <b>not</b> required to attach Sch. B					
	3	Interest on savings and temporary cash investments	4	5	45		
	4	Dividends and interest from securities .	21,63	2	21,634		
	5a	Gross rents					-
Revenue	b	Net rental income or (loss)				······································	
	6a	Net gain or (loss) from sale of assets not อักโกียี 46 2	9.97	1			
	b	Gross sales price for all assets on line 6a 289,246					
Š	7	Capital gain net income (from Part IV, line 2) .			9,971		
æ	8	Net short-term capital gain			3,57,	· · · · · · · · · · · · · · · · · · ·	
_	9	Income modifications					
	10a	Gross sales less returns and allowances				· · · · · · · · · · · · · · · · · · ·	
	b	Less: Cost of goods sold .	·				
	C	Gross profit or (loss) (attach schedule)		<del></del>			<del> </del>
	11						<del></del>
	12	Other income (attach schedule)	436,04	0	31,650	0	
_			430,04	0	31,030	0	0
S	13	Compensation of officers, directors, trustees, etc.		<u> </u>		0	
Š	14	Other employee salaries and wages			<del></del>		
Expenses	استثليه	Pensionholers employee benefits  Uded (and (attached benefits)  Schedule 3	F 0.4	<del>_</del>	F 040	<del></del>	<del></del>
		Cobodulo 2	5,91	3	5,913		<del></del>
e,	"كاسن	Accounting gees lettach schedule) Schedule 3 Schedule 3		<del>_</del>	0.500		<u> </u>
(윤)	12°	Accounting (sees lattach schedule)  Other prefessional trees (attach schedule)  Schedule 3  Other prefessional trees (attach schedule)  Schedule 4	2,59	<u> </u>	2,590	<del>-</del>	
Operating and Adminustrati	17 1				445		<del></del>
<i>\</i> ≅	118	Taxee (attach schedule) (see instructions)	91	9	419		<del></del>
E.	190	(Cap enalish (attach schedule) and depletion					<del></del>
βď	,20	Occupancy		<del> </del> -			
þ	21	Travel, conferences, and meetings					
an	22	Printing and publications					<del></del>
βĹ	23	Cirici experieds (ditadir correddio)	6	5			
ij	24	Total operating and administrative expenses.					
ers		Add lines 13 through 23	9,48		8,922	0	0
ď	25	Contributions, gifts, grants paid Schedule 6	59,90	0			59,900
_	26	Total expenses and disbursements. Add lines 24 and 25	69,38	6	8,922	0	59,900
	27	Subtract line 26 from line 12:					
	a	Excess of revenue over expenses and disbursements	366,66	3			
	b	Net investment income (if negative, enter -0-) .			22,728		
_	<u> </u>	Adjusted net income (if negative, enter -0-)			<del></del>	0	
For	Papen	work Reduction Act Notice, see instructions.	Cat	No 11289X		Fo	m 990-PF (2014)

	art II	Ralance Shoots Attached schedules and amounts in the description column	Beginning of year	End o	f year
Li		Balance Sheets Attached schedules and amounts in the description column 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	1,750	19,549	19,549
	2	Savings and temporary cash investments	232,644	5,579	5,579
	3	Accounts receivable ▶			
	1	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			· <del></del>
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)			
		Less: allowance for doubtful accounts ▶			
ţ	8	Inventories for sale or use			
Assets	9	Prepaid expenses and deferred charges			
Ą	10a	Investments—U S. and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)  Schedule 7 Schedule 7	286,726	562,625	574,798
	С	Investments—corporate bonds (attach schedule)	87,856	291,637	294,588
	11	Investments—land, buildings, and equipment basis ▶			
		Less accumulated depreciation (attach schedule)			
	12	Investments mortgage loans			
	13	Investments—other (attach schedule) . Schedule 8 .		96,250	93,406
	14	Land, buildings, and equipment basis			
		Less: accumulated depreciation (attach schedule) ▶			
	15	Other assets (describe ► Schedule )			
	16	Total assets (to be completed by all filers—see the			
_	-	ınstructions. Also, see page 1, item I)	608,976	975,639	987,920
	17	Accounts payable and accrued expenses			
es	18	Grants payable			
Liabilities	19	Deferred revenue			
ide	20 21	Mortgages and other notes payable (attach schedule)			
Ë	22				
	23	Other liabilities (describe ►)  Total liabilities (add lines 17 through 22)	0		
		Foundations that follow SFAS 117, check here			
nd Balances		and complete lines 24 through 26 and lines 30 and 31.			
2	24	Unrestricted			
aga	25	Temporarily restricted			
8	26	Permanently restricted			
틸		Foundations that do not follow SFAS 117, check here ▶ ☑			
Fun		and complete lines 27 through 31.			
ō	27	Capital stock, trust principal, or current funds			
ets	28	Paid-ın or capital surplus, or land, bldg., and equipment fund			
SS	29	Retained earnings, accumulated income, endowment, or other funds	608,976	975,639	
tΑ	30	Total net assets or fund balances (see instructions)	608,976	975,639	
Net Assets or	31	Total liabilities and net assets/fund balances (see			
		instructions)	608,976	975,639	
ĽĚ	rt III	Analysis of Changes in Net Assets or Fund Balances I net assets or fund balances at beginning of year—Part II, column	mn (a) line 30 (mus	t agree with	<u></u> -
1		of-year figure reported on prior year's return)			608.976
_				<del></del>	
2		r amount from Part I, line 27a			366,663
3	V44	er increases not included in line 2 (itemize) Schedule lines 1, 2, and 3		4	975,639
4 5		and a distribution of the search by Cohodula			370,009
6	Total	reases not included in line 2 (itemize) Schedule  I net assets or fund balances at end of year (line 4 minus line 5)—I	Part II, column (b). lir	ne 30 . 6	975,639

Part	(a) List and describe the	Losses for Tax on Investne kind(s) of property sold (e.g., real estates, or common stock, 200 shs. MLC Co	e,	(b) How acquired P—Purchase	(c) Date ac		(d) Date sold (mo , day, yr)
	<u> </u>	55, 51 551111511 515511, 255 513 11125 55	<del></del>	D-Donation P	(iiio , day	, ,,	(mo, day, yr )
	See STMT DB		<del></del>	<u> </u>			<del></del>
	Capital gain distributions						
<u>c</u>					<del></del>	- 1	
<u>u</u>	<del></del>			-			
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis			or (loss) ) minus (g)
а	282,525			279,275			3,250
b	6,721						6,721
С							
d							
е							
	Complete only for assets show	wing gain in column (h) and owned	by the foundation	on 12/31/69			(h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any			less than -0-) or om col (h))
<u>a</u>							3,250
b							6,721
<u>C</u>							
d							
<u>е</u>		( 16	-las autonio De	+1 l 7			
2	Capital gain net income or		also enter ın Pa , enter -0- in Par		2		9,971
3		or (loss) as defined in sections I, line 8, column (c) (see instructions			3		
Part		er Section 4940(e) for Redu		et Investment			
		ate foundations subject to the				ne.)	
Was t		e this part blank. section 4942 tax on the distribut qualify under section 4940(e) D			oase period	17	☐ Yes ☐ No
1	Enter the appropriate amo	unt in each column for each yea	ar; see the instru	ictions before m	akıng any e	ntries	
Cale	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	s Net value of	(c) f noncharitable-use as	ssets		(d) abution ratio avided by col (c))
	2013			602	,372		.00%
	2012						
	2011						
	2010						
	2009	<u> </u>					
2	Total of line 1, column (d)	or the 5-year base period—divi			. 2		
3		ation has been in existence if le			, ,		
4	Enter the net value of nonc	charitable-use assets for 2014 fi	rom Part X, line	5	4		942,055
5	Multiply line 4 by line 3 .				. 5		0
6	Enter 1% of net investmen	t income (1% of Part I, line 27b)	)		. 6		227
7	Add lines 5 and 6				. 7		227
8	If line 8 is equal to or great	ns from Part XII, line 4 ter than line 7, check the box in			8 hat part us	ing a 19	<b>59,900</b> % tax rate. See the
	Part VI instructions		_				

Part		nstru	ıctio	ns)				
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	b Domestic foundations that meet the section 4940(e) requirements in Part V, check							
С	, and the same of							
2	Part I, line 12, col. (b).  Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		0					
3	Add lines 1 and 2		227	<b></b>				
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		227					
6	Credits/Payments:							
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6a							
b	Exempt foreign organizations—tax withheld at source 6b							
C	Tax paid with application for extension of time to file (Form 8868)  Backup withholding erroneously withheld  6c 1,000 6d							
d 7		4	000					
8	Total credits and payments. Add lines 6a through 6d		,000					
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0					
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10		773					
11	Enter the amount of line 10 to be. Credited to 2015 estimated tax ▶ 773 Refunded ▶ 11		0					
Part			V	Ma				
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	4.0	Yes	No ✓				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	1a						
	Instructions for the definition)?	1b		1				
	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.							
С	Did the foundation file Form 1120-POL for this year?	1c		✓_				
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.  (1) On the foundation ▶ \$ (2) On foundation managers. ▶ \$			i				
е	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		✓				
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	- :	1				
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		✓				
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N	Α				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<b>✓</b>				
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either							
	<ul> <li>By language in the governing instrument, or</li> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that</li> </ul>							
	conflict with the state law remain in the governing instrument?	6	7					
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	7					
8а	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶							
	Oklahoma							
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	1						
	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	<b>√</b>	<u> </u>				
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						
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	٠		<del>  •</del>				
	names and addresses	10		1				
			~ ~=					

	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 meaning of section 512(b)(13)? If "Yes." attach schedule (see instructions)			١.
		11		✓
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	1		
	person had advisory privileges? If "Yes," attach statement (see instructions)	12		✓
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	<b>√</b>	
	Website address ▶			
14	The books are in care of ▶ Phillip Giachino Telephone no. ▶ 405	.242.	0335	
		73,14		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			<b>&gt;</b> []
	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		1
	See the instructions for exceptions and filling requirements for FinCEN Form 114, (formerly TD F 90-22.1). If	10		<u> </u>
	"Yes," enter the name of the foreign country ▶			
Date				L
Part			Yes	No
4	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		162	NO
1a	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  No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			į
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   Yes  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			
	termination of government service, if terminating within 90 days.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fall to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	N,	Α
	Organizations relying on a current notice regarding disaster assistance check here ▶□			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that		_	_
	were not corrected before the first day of the tax year beginning in 2014?	1c		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5)):			
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 ▶ 20, 20, 20, 20			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)	1		
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to			
	all years listed, answer "No" and attach statement—see instructions.)	2b	N,	Α
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	▶ 20 , 20 , 20 , 20, 20			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year?			
b	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or			Ī
	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		_	
	foundation had excess business holdings in 2014.)	3b	N	Α
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<b>V</b>
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		✓

Page <b>6</b>	
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Part	t VII-B	Statements Regarding Activities	s for V	Vhich Form	4720	May Be F	Require	ed (continu	ed)		
5a		he year did the foundation pay or incur a									
		y on propaganda, or otherwise attempt							∑ No	. [	
		ence the outcome of any specific publictly or indirectly, any voter registration di		-			-		71		
									∬ No	1 1	
		ride a grant to an individual for travel, stuifie a grant to an organization other that							_ No		
		ion 4945(d)(4)(A)? (see instructions)							) No		
		ride for any purpose other than religious							_, 140	-	
		oses, or for the prevention of cruelty to							) No		
b	If any ar	nswer is "Yes" to 5a(1)-(5), did any of the	e transa	actions fail to	qualify	under the	excepti	ons describe	ed in		
		ons section 53.4945 or in a current notice	_	-			uctions)	)?		5b	NA
		ations relying on a current notice regardi						)	<b>►</b> □		
С		nswer is "Yes" to question 5a(4), does to							٦		
		e it maintained expenditure responsibility		_				_ Yes _	_) No		
6a		attach the statement required by Regula foundation, during the year, receive any					emiums				
-		sonal benefit contract?							) No		]
b	Did the	foundation, during the year, pay premiun	ns, dire	ctly or indire	ctly, on	a personal	benefit	contract?	-	6b	N/A
		to 6b, file Form 8870.									
		ne during the tax year, was the foundation						☐ Yes 🔽			
	If "Yes,"	did the foundation receive any proceeds Information About Officers, Direct								7b	N/A
LEUL	ALL L	and Contractors	tors, i	rusiees, r	vunua	LIOII MIAIL	ayers,	nigiliy rai	u E	прюу	ees,
1	List all	officers, directors, trustees, foundation	n mana	gers and th	eir con	npensation	ı (see iı	nstructions)			·
		(a) Name and address	(b) Title	e, and average rs per week	(c) Co	mpensation not paid,	(d) (	Contributions to	15	(e) Exper	nse account,
				ed to position		ter -0-)		erred compensa		other a	llowances
	ett R. Do		Presid	ent, 1		0			0		0
		ss Way, OKC, OK 73134									<del></del>
	hen T. D	ss Way, OKC, OK 73134	Vice P	resident, 1		0			0		0
142.0	1 Willele.	33 Way, ONO, ON 10104									
	Compo	nsation of five highest-paid employed	o (oth	or than tha	o incl	udod on li	no 1 -	eoo inetruo	tion	c) If no	no ontor
2	"NONE.		35 (OU)	er man mo	56 11101	udeu on n	iie i — :	see msnuc	lions	<i>), 11 11</i> 0	one, enter
				(b) Title, and a				(d) Contribution			
(	(a) Name an	d address of each employee paid more than \$50,00	0	hours per v	veek	(c) Compe	nsation	employee ber plans and defe	rred	(e) Exper	nse account, illowances
				devoted to p				compensation	on		
NON	E						0		0		0
			<del></del>						$\dashv$		
						l	0		0		0
		<del></del>			·				0		
							0		0		0
							0		0		0
						-		<u></u>			
							0		0		0
Total	number o	f other employees paid over \$50,000 .					•		<b>&gt;</b>		0
			<u> </u>	<u> </u>			-	•		QQ(	7-PF (2014)

3 Five highest-paid independent contractors for professional services (see instructions). 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 . ▶ 0  Part IX-A Summary of Direct Charitable Activities  Let the foundation's four largest circle charitable activities  Let the foundation's four largest circle charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc  1 N/A  2  3  4  Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments indee 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  All other program-related investments See instructions  3	Par	t VIII Information About Officers, Directors, Trustees, Foundation Managers, Hig and Contractors (continued)	hly Paid Employees,
Total number of others receiving over \$50,000 for professional services     Total number of others receiving over \$50,000 for professional services	3		, enter "NONE."
Total number of others receiving over \$50,000 for professional services     Part IX-A   Summary of Direct Charitable Activities		(a) Name and address of each person paid more than \$50,000 (b) Type of sen	vice (c) Compensation
Total number of others receiving over \$50,000 for professional services • 0  Part IX-A Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1	NO	NE	0
Total number of others receiving over \$50,000 for professional services > 0  Part IX-A Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1			
Total number of others receiving over \$50,000 for professional services .   Deart IX-A Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.  1 N/A  2			O
Total number of others receiving over \$50,000 for professional services > 0  Part IX-A Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc  1 N/A  2			0
Total number of others receiving over \$50,000 for professional services   Part IX-A Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc  1 N/A  2			0
Part IX-A Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc  1 N/A  2			0
Part IX-B Summary of Direct Charitable Activities  List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc  1 N/A  2	Total	number of others receiving over \$50,000 for professional services	▶ 0
List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.  1			
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  All other program-related investments See instructions  Total. Add lines 1 through 3	Par	Summary of Direct Charitable Activities	
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  Total. Add lines 1 through 3			the number of Expenses
2  3  4  Part IX-B Summary of Program-Related Investments (see instructions)  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  Total. Add lines 1 through 3	1	N/A	
Amount  All other program-related investments See instructions  All other program-related investments See instructions  Total. Add lines 1 through 3			0
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  3  Total. Add lines 1 through 3	_		
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  Total. Add lines 1 through 3	2		
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Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  Total. Add lines 1 through 3			0
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  Total. Add lines 1 through 3			
Part IX-B Summary of Program-Related Investments (see instructions)  Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  All other program-related investments See instructions  3  Total. Add lines 1 through 3	4		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  2  All other program-related investments See instructions 3  Total. Add lines 1 through 3			
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2  Amount  2  All other program-related investments See instructions 3  Total. Add lines 1 through 3	Pari	IX-B Summary of Program-Related Investments (see instructions)	
All other program-related investments. See instructions  3  Total. Add lines 1 through 3			Amount
All other program-related investments. See instructions  3  Total. Add lines 1 through 3	1	N/A	
All other program-related investments. See instructions  3  Total. Add lines 1 through 3			0
All other program-related investments. See instructions  3  Total. Add lines 1 through 3			
All other program-related investments. See instructions  3  Total. Add lines 1 through 3	2		·
3			
Total. Add lines 1 through 3	All	other program-related investments. See instructions	
	3		
	<del></del>	Add the distance O	
	ıotal	. Add lines I through 3	Form <b>990-PF</b> (2014

Part		gn found	ations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		0.40.000
a	Average monthly fair market value of securities	1a	946,689
b	Average of monthly cash balances	1b	9,711
C	Fair market value of all other assets (see instructions)	1c	050 404
d	Total (add lines 1a, b, and c)	1d	956,401
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	Subtract line 2 from line 1d	3	956,401
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	14,346
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	942,055
6	Minimum investment return. Enter 5% of line 5	6	47,103
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for and certain foreign organizations check here ► ☐ and do not complete this part.)	oundation	18
1	Minimum investment return from Part X, line 6	1	47,103
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.) 2b	]	
c	Add lines 2a and 2b	2c	227
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	46,876
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	46,876
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	46,876
Part	XII 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	59,900
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	59,900
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	227
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	59,673
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	g whether	the foundation
	qualifies for the section 4940(e) reduction of tax in those years.		
		For	m <b>990-PF</b> (2014)

Part	XIII Undistributed Income (see instruction	ons)			
1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
	line 7				46,876
2	Undistributed income, if any, as of the end of 2014.				
а	Enter amount for 2013 only			29,619	······
b	Total for prior years: 20_20,20,20				
3	Excess distributions carryover, if any, to 2014:				
a	From 2009				
b	From 2010				
C	From 2011				
d e	From 2012	-			
f	Total of lines 3a through e		]		
4	Qualifying distributions for 2014 from Part XII, line 4. ► \$ 59,900				
а	Applied to 2013, but not more than line 2a .			29,619	
	Applied to undistributed income of prior years				<del> </del>
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election required—see instructions)				
ď	Applied to 2014 distributable amount				30,281
е	Remaining amount distributed out of corpus				
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:				
а	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	0			
b	Prior years' undistributed income. Subtract line 4b from line 2b		0		
С	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		0		
е	Undistributed income for 2013. Subtract line 4a from line 2a. Taxable amount—see instructions			0	
f	Undistributed income for 2014. Subtract lines				
	4d and 5 from line 1. This amount must be distributed in 2015				16,595
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 applied on line 5 or line 7 (see instructions).				
9	Excess distributions carryover to 2015.				
	Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9:				
а	Excess from 2010		ļ		
b	Excess from 2011				
C	Excess from 2012				
d e	Excess from 2013 Excess from 2014			]	

<b>Part</b>	XIV Private Operating Founda	tions (see instru	ctions and Part \	/II-A, question 9	)	<del> </del>
1a	If the foundation has received a ruling foundation, and the ruling is effective fo					· · · · · · · · · · · · · · · · · · ·
b	Check box to indicate whether the four				ction	3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	operating roundar	Prior 3 years	Clion 4942(),(	3) 01 🔲 4342()(3)
	income from Part I or the minimum	(a) 2014	<b>(b)</b> 2013	(c) 2012	(d) 2011	(e) Total
	investment return from Part X for each year listed	N/A	N/A	N/A	N/A	N/A
b	85% of line 2a	N/A	N/A	N/A	N/A	N/A
c	Qualifying distributions from Part XII,	14/24	1077	1074		
	line 4 for each year listed	N/A	N/A	N/A	N/A	N/A
d	Amounts included in line 2c not used directly for active conduct of exempt activities			14,77		N/A
е	Qualifying distributions made directly					- IVA
Ū	for active conduct of exempt activities.					
	Subtract line 2d from line 2c	N/A	N/A	N/A	N/A	N/A
3	Complete 3a, b, or c for the alternative test relied upon:					
а	"Assets" alternative test—enter					
	(1) Value of all assets					N/A
	(2) Value of assets qualifying under	-				
	section 4942(j)(3)(B)(i)					N/A
þ	"Endowment" alternative test—enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed	N/A	N/A	N/A	N/A	N/A
С	"Support" alternative test - enter:					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section					N/A
	512(a)(5)), or royalties)					N/A
	(2) Support from general public and 5 or more exempt					
	organizations as provided in section 4942(j)(3)(B)(iii)		ļ			N/A
	(3) Largest amount of support from					
	an exempt organization			j		N/A
	(4) Gross investment income .					N/A
Part	XV Supplementary Information	n (Complete th	is part only if th	e foundation ha	ad \$5,000 or mo	ore in assets at
	any time during the year-		s.)			
1	Information Regarding Foundation I					
а	List any managers of the foundation v	who have contribut	ted more than 2%	of the total contri	butions received I	by the foundation
Mille	before the close of any tax year (but o	nly if they have co	ntributed more tha	n \$5,000). (See se	ection 507(a)(2).)	
	List any managers of the foundation	who own 1004 or	more of the steel	of a corporation	(or an equally lar	rge portion of the
D	ownership of a partnership or other er	wild dwill 10% or stity) of which the f	oundation has a 1	0% or greater inte	rest.	ge portion or the
None		inty) or willow the t	ouridation nad a n	o you or grouter mite		
2	Information Regarding Contribution	Grant Gift Loai	Scholarshin, et	c Programs:		
~	Check here ► ☐ if the foundation				roanizations and	does not accept
	unsolicited requests for funds. If the fo					
	other conditions, complete items 2a, t					
а	The name, address, and telephone nu	mber or e-mail add	dress of the persor	n to whom applica	tions should be a	ddressed:
Ever	ett R. Dobson, Roni@dobsonpartner	ship.net				
b	The form in which applications should	be submitted and	information and m	naterials they shou	ıld include:	
Writt	en applications for funds should be	submitted by mai	il to the Foundatio	on.		
С	Any submission deadlines:					
None						
d	Any restrictions or limitations on aw	ards, such as by	geographical are	as, charitable field	lds, kinds of inst	itutions, or other

art XV Supplementary Information (conti	inuad\			Page
3 Grants and Contributions Paid During t		ed for Fu	ture Payment	<del></del>
Recipient	If recipient is an individual,			
Name and address (home or business)	show any relationship to any foundation manager	status of recipient	Purpose of grant or contribution	Amount
a Paid during the year	or substantial contributor	recipient		<u> </u>
- •				
First Southern Baptist Church of Scottsdale Scottsda		509 a 1	General Fund	24,0
Rio Vista Center Phoenix, AZ 85040		509 a 1	General Fund	8,0
ity Care, Inc. Oklahoma City, OK 73107		509 a 1	General Fund	4,8
earts and Hands International Edmond OK 73083		509 a 1	General Fund	18,0
merican Heart Association Oklahoma City, OK 7317		509 a 1	General Fund	2,0
alvation Army Oklahoma City, OK		509 a 1	General Fund	1,1
ity Rescue Mission Oklahoma City, OK 73106		509 a 1	General Fund	2,0
				! 
		j		
Total	· · · · ·		▶ _ 3a	59,
Approved for future payment				
Total			▶ 3k	o]

Pa	rt XV	I-A Analysis of Income-Producing Ac	,				
Ente	r gros	ss amounts unless otherwise indicated	Unrelated bu	siness income	Excluded by section	on 512, 513, or 514	(e)
			(a)	(b)	(c)	(d)	Related or exempt
	_		Business code	Amount	Exclusion code	Amount	(See instructions.)
1	_	gram service revenue:			<u> </u>		
	a L						
	b _						
	С 						
	d _			<del> </del>			
	e _						
	f -						
	-	ees and contracts from government agencies					 
_		nbership dues and assessments					
3		est on savings and temporary cash investments			14	45	
4		dends and interest from securities			14	21,632	
5		rental income or (loss) from real estate.					
		Debt-financed property					-
		Not debt-financed property					
6		rental income or (loss) from personal property					
7		er investment income					
8		or (loss) from sales of assets other than inventory			18	9,971	· · · · · - · - · - · - · - · - · - · -
9		income or (loss) from special events					
10		ss profit or (loss) from sales of inventory					
11	_	er revenue: a	- 1				
	b _						
	°. –			<del></del>			
	d		f I		1 1		
	_						
40	e _	(a) (d) and (a)				24.040	-
	e Subt	total Add columns (b), (d), and (e)		0		31,649	0
13	e Subt	II. Add line 12, columns (b), (d), and (e)	(c)			31,649 13	0 31,649
<b>13</b> See	e Subt Tota work	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	s.)		t Purnoses		
13 See Par	e Subt Tota work	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
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13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649
13 See Par Lin	e Subt Tota work t XV	al. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculation  Relationship of Activities to the A	s.) .ccomplishm	ent of Exemp	·	13	31,649

Part	XVII		n Regarding Trar	sfers To and	Transac	ctions and	Relationsh	ips V	Vith I	Nonch	aritab		30 . 0
			rganizations	<del></del>									
1	ın se		directly or indirectly ne Code (other than									Yes	No
а	Tran	sfers from the re	porting foundation to	a noncharitable	e exempt	organization	n of:				İ		
	(1) C										1a(1)		✓
	(2) C	Other assets .									1a(2)		1
b	Othe	r transactions.											
	(1) S	ales of assets to	a noncharitable exe	mpt organization	n						1b(1)		1
			ets from a noncharita								1b(2)		<b>√</b>
			, equipment, or othe								1b(3)		1
	(4) R	Reimbursement a	rrangements								1b(4)		<b>√</b>
	(5) L	oans or loan gua	rantees								1b(5)		<b>√</b>
			ervices or membersh								1b(6)		✓
С	Shar	ıng of facilities, e	quipment, mailing lis	sts, other assets	, or paid	employees					1c		✓
			of the above is "Yes										
			ther assets, or servi										
			on or sharing arrang				·						
(a) Line	no l	(b) Amount involved	(c) Name of nonch	aritable exempt orga	anization	(d) Desc	cription of transfe	ers, tran	saction	s, and sh	aring arra	angeme	nts
	-												
				<del></del>			<del></del>						
	+												
					···								
						<del></del>							
						-							
											<del></del>		
											<del>.</del>		
	desci	ribed in section 5	ectly or indirectly aff 501(c) of the Code (o	iliated with, or r ther than section	elated to n 501(c)(3	o, one or mo B)) or in secti	ore tax-exem on 527? .	pt org	janiza 	tions	] Yes	1 🔽	No.
b	it "Ye	<del></del>	following schedule				<del></del>						
		(a) Name of organi	ization	(b) Type	of organizat	tion		(c) Des	cription	of relation	nship		
	-							-					
	Unde	r penalties of penury I	declare that I have examine	this return, including	accompany	ing schedules an	d statements, and	to the I	best of	ny knowle	dge and h	elief. it i	s true
Sign	corre	ct, and complete becla	aration of pregarer to ther tha	n taxpayer) is based o	n all informa	tion of which prep	parer has any kno	wledge	1				
Here		_ / _	100	18-3-	15	President				May the l			
. 1016		ature of officer or trus	stee	Date		Title			— <u> </u>	(see instru	ctions)? [	]Yes[	]No
De:-		Print/Type preparer		Preparer's signatur			Date		<u></u>		PTIN		
Paid									Check self-er	l lf nployed			
Prepa		Firm's name ►	N/A	<del></del>	<del></del>			Firm's	EIN ▶	. 7			
Use C	nily	Firm's address ▶	· · · · · · · · · · · · · · · · · · ·					Phone		-			

#### 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, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

**Employer identification number** 

Russell and Willene Dobso	46-3885187				
Organization type (check	one).				
Filers of:	Section:				
Form 990 or 990-EZ	☐ 501(c)( ) (enter number) organization	งก			
	4947(a)(1) nonexempt charitable trust not	treated as a private foundation			
	☐ 527 political organization				
Form 990-PF	✓ 501(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treat	ed as a private foundation			
	501(c)(3) taxable private foundation				
·	is covered by the <b>General Rule</b> or a <b>Special Rule</b> )(7), (8), or (10) organization can check boxes for b				
General Rule					
	on filing Form 990, 990-EZ, or 990-PF that received or property) from any one contributor. Complete contributions.				
Special Rules					
regulations under 13, 16a, or 16b, a	on described in section 501(c)(3) filing Form 990 or sections 509(a)(1) and 170(b)(1)(A)(vi), that checked that received from any one contributor, during to the amount on (i) Form 990, Part VIII, line 1h, or	d Schedule A (Form 990 or 990-EZ), Part II, line the year, total contributions of the greater of (1)			
contributor, during	n described in section 501(c)(7), (8), or (10) filing Fo the year, total contributions of more than \$1,000 on the purposes, or for the prevention of cruelty to cl	exclusively for religious, charitable, scientific,			
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year					
		Special Rules does not file Schedule B (Form 990, 0; or check the box on line H of its Form 990-EZ or on its			

Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization Employer identification number

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.							
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
1	Willene Dobson  13900 N Portland Ave, STE 200  Oklahoma City, OK 73134	\$ 399,000	Person  Payroll  Noncash  (Complete Part II for noncash contributions)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
2	Bruce and LaVerne Knooihuizen 7617 NW 135th St Oklahoma City, OK 73142	\$ 5000	Person Payroll Noncash (Complete Part II for noncash contributions)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
-		\$	Person					
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution					
		\$	Person					

Employer identification number

Part II	Noncash Property (see instructions). Use duplicate co	opies of Part II if additional spa	ce is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Name of organization Employer identification number Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ Use duplicate copies of Part III if additional space is needed. (a) No. (b) Purpose of gift from (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (d) Description of how gift is held (c) Use of gift (b) Purpose of gift from Part I (e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

# Form 8868

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

## Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► File a separate application for each return.
► Information about Form 8868 and its instructions is at www.irs.gov/form8868.

• If you	are filing for an Additional (Not Automatic) 3-Micromplete Part II unless you have already been g	onth Exter	nsion, complete onl	y Part II (on page 2 o	f this	form).		
a corpo 8868 to Return	ration required to file Form 990-T), or an addition request an extension of time to file any of the for Transfers Associated With Certain Persona ions). For more details on the electronic filing of the	al (not auto forms listed I Benefit C	omatic) 3-month ext d in Part I or Part II Contracts, which me	ension of time. You c with the exception o ust be sent to the li	an ele f Fori RS in	ectronica m 8870, n paper	ally file Form Information format (see	
_	Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).  A corporation required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete							
		_						
All other	r corporations (ıncluding 1120-C filers), partnersh	ips, REMIC	Cs, and trusts must i	use Form 7004 to req	uest .	an exten	sion of time	
	come tax returns							
				Enter filer's identifyin	g nun	nber, see	instructions	
Type or	Name of exempt organization or other filer, see in	structions		Employer identification	n number (EIN) or			
print	Russell and Willene Dobson Foundation			46-	38851	87		
File by the	Number, street, and room or suite no. If a P.O. bo	ox, see instri	uctions.	Social security number	(SSN	)		
due date f	for 13900 N Portland Ave, STE 200							
filing your return. See		r a foreign a	ddress, see instruction	s.				
instruction	011-1					_		
Enter the	e Return code for the return that this application i	s for (file a	separate application	for each return) .			0 4	
Applica	ation	Return	Application				Return	
Is For		Code	Is For				Code	
Form 9	90 or Form 990-EZ	01	Form 990-T (corpo	ration)			07	
Form 9	90-BL	02	Form 1041-A	08				
	720 (individual)	03	Form 4720 (other to	han individual)			09	
Form 9	90-PF	04	Form 5227				10	
Form 9	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069				11	
Form 9	90-T (trust other than above)	06	Form 8870	<u></u>			12	
Teleph If the control of the wallst with	ooks are in the care of ► Phil Giachino  none No. ► 405.242.0335  organization does not have an office or place of bis for a Group Return, enter the organization's four whole group, check this box ► If is the names and EINs of all members the extension request an automatic 3-month (6 months for a contraction).	usiness in t ir digit Grou it is for part on is for.	up Exemption Numb	er (GEN)	▶ [	If th		
until August 15 , 20 15 , to file the exempt organization return for the organization named above. The extension is for the organization's return for:  ▶ ☑ calendar year 20 14 or								
2 If	<ul> <li>▶ ☐ tax year beginning , 20 , and ending , 20 .</li> <li>2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return</li> <li>☐ Change in accounting period.</li> </ul>							
	this application is for Forms 990-BL, 990-PF, 99	0-T, 4720,	or 6069, enter the te	entative tax, less any			- <del></del>	
nonrefundable credits. See instructions.						\$	1000	
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.							0	
_	alance due. Subtract line 3b from line 3a. Includ				<u>                                    </u>	l		
E	EFTPS (Electronic Federal Tax Payment System). See instructions.  3c \$ 100							
Caution. I	If you are going to make an electronic funds withdrawa	l (dırect debi	t) with this Form 8868,	see Form 8453-EO and	Form	8879-EC	) for payment	