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Department of the Treasury Internal Revenue Service

SCANNED JUN 0 2 2015

EXTENDED TO AUGUST 17, 2015 Return of Private Foundation or Section 4947(a)(1) Trust Treated as Private Foundation

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

01110 110 1070 0002	
2014	
Open to Public Inconsting	_

For	cale	ndar year 2014 or tax year beginning N	OV 30, 2014	, and ending	DEC 31, 2014	<u> </u>
Na	me o	f foundation	EVTENCIO	NI ATTACLIED	A Employer identification	n number
			EXTENSIO	N ATȚACHED		
		TMAN FAMILY FOUNDATION			47-1101519)
		and street (or P O box number if mail is not delivered to st	treet address)	Room/suite	B Telephone number	
		01 N. MIDWEST BLVD.			405-848-19	944
		own, state or province, country, and ZIP or foreignone, OND , OK 73013	gn postal code		C If exemption application is p	pending, check here
		x all that apply:	Initial return of a fo	ormer public charity	D 1. Foreign organization	s, check here
		Final return	Amended return	The second control of		
		Address change	Name change		Foreign organizations me check here and attach or	eeting the 85% test,
H (Check		B) exempt private foundation		E If private foundation sta	
] S€	ection 4947(a)(1) nonexempt charitable trust	Other taxable private founda	ation	under section 507(b)(1	
I Fa	ur ma	arket value of all assets at end of year J Accor	unting method: X Cash	Accrual	F If the foundation is in a	
(fi	om i	Part II, col. (c), line 16)	Other (specify)		under section 507(b)(1	
	\$		column (d) must be on cash l	basis.)		
Pa	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may no necessarily equal the amounts in column (a))	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts, grants, etc., received	179,063.	\$	N/A	(oddii badio omiy)
	2	Check fithe foundation is not required to attach Sch B		3		`
	3	Interest on savings and temporary cash investments				
	4	Dividends and interest from securities				
	5a	Gross rents				v
	b	Net rental income or (loss)				
ø.	6a	Net gain or (loss) from sale of assets not on line 10			×	
Ĕ	b	Gross sales price for all assets on line 6a			1 x	
Revenue	7	Capital gain net income (from Part IV, line 2)	*	0.		*
a	8	Net-short-term capital gain	*,	* ,		
	9	Income modifications Gross sales less returns	* , * ,	* ,	** **	1
	10a	and allowances	` ` ` `			4
		Less Cost of goods sold		* * * * * * * * * * * * * * * * * * *		
	1	Gross profit or (loss)				
	11	Other-income	170 062			· · · · · · · · · · · · · · · · · · ·
	12	Total. Add lines 1 through 11	179,063.	0.		
	13 14	Compensation of officers, directors, trustees, etc Other employee salaries and wages	0.	<u> </u>		0.
		Pension plans, employee benefits				
es	162	Legal fees STMT 1	4,063.	0.		0.
ens		Accounting fees	=,005.		7	0.
Expens	•	Other professional fees				
ě	17	Interest				
and Administrative	18	Taxes				
ııstı	19	Depreciation and depletion VED				
<u>Ē</u>	20					
Ą	21	Travel, conferences, and meetings				
and	22	Travel, conferences, and meetings Printing and publications 2015				
ng :	23	Other expenses				
rati	24	Total oberating and administrative		-		
Operating		expenses. Add lines 13 through 23	4,063.	0.		0.
O	25	Contributions, gifts, grants paid	0.			0.
	26	Total expenses and disbursements.				
	ļ	Add lines 24 and 25	4,063.	0.		0.
	27	Subtract line 26 from line 12:	455 000			
		Excess of revenue over expenses and disbursements	175,000.			
		Net investment income (if negative, enter -0-)		0.	N/A	
	ı C	Adjusted net income (if negative, enter -0-)	i I		1 NI/A	I .

		and complete lines 24 through 26 and lines 30 and 31.
ces	24	Unrestricted
<u>a</u>	25	Temporarily restricted
Ва	26	Permanently restricted
ınd Bal		Foundations that do not follow SFAS 117, check here

Total liabilities (add lines 17 through 22)

Form 990-PF (2014)

1 Cash - non-interest-bearing

3 Accounts receivable ►

4 Pledges receivable ►

disqualified persons

7 Other notes and loans receivable

8 Inventories for sale or use

13 Investments - other

18 Grants payable19 Deferred revenue

Less accumulated depreciation

15 Other assets (describe

b Investments - corporate stock
c Investments - corporate bonds

11 Investments - land, buildings, and equipment basis
Less accumulated depreciation

12 Investments - mortgage loans

5 Grants receivable

2 Savings and temporary cash investments

Less; allowance for doubtful accounts

Less: allowance for doubtful accounts ▶

Less: allowance for doubtful accounts

9 Prepaid expenses and deferred charges

14 Land, buildings, and equipment basis

instructions. Also, see page 1, item l)17 Accounts payable and accrued expenses

21 Mortgages and other notes payable22 Other liabilities (describe ►

16 Total assets (to be completed by all filers - see the

20 Loans from officers, directors, trustees, and other disqualified persons

10a Investments - U.S. and state government obligations

Part II Balance Sheets Attached schedules and amounts in the description

6 Receivables due from officers, directors, trustees, and other

Permanently restricted

Foundations that do not follow SFAS 117, check here
and complete lines 27 through 31.

Capital stock, trust principal, or current funds
Paid-in or capital surplus, or land, bldg., and equipment fund
Retained earnings, accumulated income, endowment, or other funds
Total net assets or fund balances

Permanently restricted

X

0

0

175,000

| 31 Total liabilities and net assets/fund balances
| Part III | Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30		
(must agree with end-of-year figure reported on prior year's return)	1	0
2 Enter amount from Part I, line 27a	2	175,000
3 Other increases not included in line 2 (itemize)	3	0
4 Add lines 1, 2, and 3	4	175,000
5 Decreases not included in line 2 (itemize) ▶	5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column	n (b), line 30	175,000

	ribe the kind(s) of property sold (e arehouse; or common stock, 200 s			(b) D	How acquired - Purchase - Donation	(c)	Date acquired no., day, yr.)	(d) Date sold (mo., day, yr.)
<u> 1a</u>				<u> </u>				
b NC	NE			+				
<u>C</u>				-				
<u>d</u>						-		
<u>e</u>	1	1		1	.	٠		<u></u>
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale				(h) Gain or (loss e) plus (f) minus (
a		ļ.						
<u>b</u>								
<u>C</u>								
<u>d</u>								
Complete only for coasts show	as source column (h) and surred by	u the foundation	n nn 10/01/00					
Complete only for assets snowl	ng gain in column (h) and owned by						ıns (Col. (h) gain , but not less thaı	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		ccess of col. (i) col. (j), if any			Lo	sses (from col. (h))
a]				
b								
<u>C</u>								
d								
e					1			
Capital gain net income or (net ca	aprital loss) { If gain, also ent If (loss), enter -	er in Part I, line 0- in Part I, line	-7 -7	}[2			
Net short-term capital gain or (lo	ss) as defined in sections 1222(5) a			[]				
If gain, also enter in Part I, line 8,] [
If (loss), enter -0- in Part I, line 8				للِ	3			
Part V ∣ Qualification L	Inder Section 4940(e) fo	r Reduced	Tax on Net	t Inv	estment	Incon	ne	
For optional use by domestic privat	e foundations subject to the section	1 4940(a) tax or	ı net investment ii	ncome	1.)			N/A
f section 4940(d)(2) applies, leave t	his part blank.							
	tion 4942 tax on the distributable a		•	riody				Yes N
	Iffy under section 4940(e). Do not c each column for each year; see the			ontriac				
(a)		IIISU UCUOTIS DE	TOTE MAKING ANY C			Т		(d)
Base periód vears	(b) Adjusted qualifying d	ıstributions	Net value of no	(c) onchar	rtable-use ass	sets	Distrib	(d) ution ratio ided by col. (c))
Calendar year (or tax year beginn	(ing iii)		7101 14140 07110			-	(cor. (b) aiv	ided by col. (c))
2013								
2012 2011								
2010								
2010								
2009			l				· r	· · · · · · · · · · · · · · · · · · ·
Tatal of line 1 column (d)							,	
Total of line 1, column (d)	5-year base period - divide the tota	l on line 2 by E	or by the number	r of wo	200	-	2	
Average distribution ratio for the the foundation has been in existe	-	i on line 2 by 5,	or by the number	i Oi yea	ais		3	
the loundation has been in existe	ilice ii iess tilali 5 years					-	3	
Enter the net value of noncharital	ole-use assets for 2014 from Part X	K, line 5					4	
5 Multiply line 4 by line 3							5	
6 Enter 1% of net investment income (1% of Part I, line 27b)							6	
	, , , , , , , , , , , , , , , , , , , ,					·		
Add lines 5 and 6							7	
Enter qualifying distributions from	n Part XII, line 4						8	
If line 8 is equal to or greater that See the Part VI instructions.	n line 7, check the box in Part VI, lin	ne 1b, and comp	olete that part usir	ng a 19	% tax rate.			

Form	n 990-PF (2014) WHITMAN FAMILY FOUNDATION			<u> 11015</u>			Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940	0(b), 4940(e), or	4948 -	see in	stru	ctio	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 i	instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🛄 and e	enter 1%	1	- -			0.
	of Part I, line 27b						
¢	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, lin	e 12, col. (b).					
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0)-)	2				0.
	Add lines 1 and 2		3				0.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -	0-)	4				<u>0.</u>
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		5				0.
	Credits/Payments:		1 1				
	2014 estimated tax payments and 2013 overpayment credited to 2014		4				
	Exempt foreign organizations - tax withheld at source		-				
	E Tax paid with application for extension of time to file (Form 8868)		1				
	I Backup withholding erroneously withheld		4				_
	Total credits and payments. Add lines 6a through 6d		7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	_	8				
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		9		····		0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	l	10				
	Enter the amount of line 10 to be: Credited to 2015 estimated tax art VII-A Statements Regarding Activities	Refunded -	<u> 11 </u>				
		rt narticipata ar interior				Yes	No
ıa	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did	it participate of interven	e III	-	4-	163	X
	any political campaign? Did it cound more than \$100 during the year (author directly or indirectly) for political purposes (see instr	ructions for the definition	n\2	-	1a 1b		X
U	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instruction of the activities and copies of			-	טו		
	distributed by the foundation in connection with the activities.	arry materials publish	ieu oi			}	
	Did the foundation file Form 1120-POL for this year?				1c		x
	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				-		
u	(1) On the foundation. ► \$ \$ \$ \$	0.					
۵	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impo		_				
·	managers. > \$ 0.	ood on loundation					
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, a	rticles of incorporation,	or				
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	• •		1	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?				4a		X
b	o 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?				5		X
	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 t	that conflict with the stat	te law				
	remain in the governing instrument?	-			6	X	
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 X	V	L	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ► OK			—			
h	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Gene	ral (or designate)					
-	of each state as required by General Instruction G? If "No," attach explanation				8b	x	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j))(3) or 4942(ı)(5) for cal	endar		-		
-	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Pa				9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their n				10		X
					000	DE	2014)

Total. Add lines 1 through 3

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	ee instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	100,000.
C	e and the second of all other accords	1c	
d	Total (add lines 1a, b, and c)	1d	100,000.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	100,000.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,500.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	98,500.
6	Minimum investment return. Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD	6	432.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here in and do not complete this part.)	ıd certain	
1	Minimum investment return from Part X, line 6	1	432.
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	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	432.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	432.
6	Deduction from distributable amount (see instructions)	.6	<u> </u>
7_	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	432.
P	Qualifying Distributions (see instructions)	1	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		_
а	1	1a	0.
b		1b	0.
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:		
a		3a	. .
b	, , , , , , , , , , , , , , , , , , , ,	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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	qualifies for t	the section

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI.		····		
line 7				432.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	1
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009				
b From 2010				
c From 2011				
d From 2012				
e From 2013				
f Total of lines 3a through e	0.			,
4 Qualifying distributions for 2014 from				
Part XII, line 4: ► \$ 0 .				·
a Applied to 2013, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				0.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2014 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a)) 6 Enter the net total of each column as indicated below:				
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years'		•		
undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable		-		
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				432.
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)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015.				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:	·		····	
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014				
123581				Form 900 - DE (2014)

3 Grants and Contributions Paid During the Y	ear or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	status of recipient	CONTIDUTION	Amount
a Paid during the year				
NONE				
			·	
		i		
				-
Total			▶ 3a	0.
b Approved for future payment				
NONE				
			İ	
Total			<u>▶ 3b</u>	0.

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Part XVI-A Analysis of Income-Produc	cing Activ	ities			
Enter gross amounts unless otherwise indicated.	Unrelat	ed business income	Exclude	ed by section 512, 513, or 514	(e)
	(a) Business	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue: a	code		- Code		
a			1 1		
c					· · · · · · · · · · · · · · · · · · ·
d					
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property				-	
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a	-				
b					
C					
d e					
12 Subtotal. Add columns (b), (d), and (e)		0	.	0.	. 0
13 Total. Add line 12, columns (b), (d), and (e)	<u> </u>	<u></u>	, • 1		0
(See worksheet in line 13 instructions to verify calculations.)		-			
Part XVI-B Relationship of Activities t	to the Acc	omplishment of I	Exempt	Purposes	
Line No. Explain below how each activity for which inco	me is reported	ın column (e) of Part XVI	I-A contribu	ted importantly to the acco	mplishment of
▼ the foundation's exempt purposes (other than	by providing fu	unds for such purposes).			
		···			
					

Form **990-PF** (2014)

423621 11-24-14

Par	t XVII	Information Re Exempt Organ	egarding Tran	nsfers To	and Transactions	and Relations	hips With Noncha	ritable	е	
1	Did the o			of the following	ng with any other organizat	on described in secti	ion 501(c) of	T	Yes	No
Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										
a Transfers from the reporting foundation to a noncharitable exempt organization of:										
(1) Cash										x
(2) Other assets										X
	-	nsactions:						1a(2)		
(1) Sale	s of assets to a noncharita	ble exempt organiza	ation				1b(1)		Х
	-	chases of assets from a no						1b(2)		X
		tal of facilities, equipment,	=	-				1b(3)		Х
	(4) Reimbursement arrangements									X
((5) Loar	ns or loan guarantees				•		1b(4) 1b(5)		X
(6) Perf	ormance of services or me	mbership or fundra	ising solicitatio	ons			1b(6)		X
c S	Sharing (of facilities, equipment, ma	iling lists, other ass	ets, or paid em	ployees			1c		Х
d I	f the ans	wer to any of the above is	"Yes," complete the	following sche	edule. Column (b) should a	lways show the fair n	narket value of the goods, (other as	sets,	
(or servic	es given by the reporting fo	oundation. If the fou	ındatıon receiv	ed less than fair market val	lue in any transaction	or sharing arrangement, s	how in		
	column (d) the value of the goods,								
(a) Lin	e no	(b) Amount involved	(c) Name o		e exempt organization	(d) Description	of transfers, transactions, and	sharing ar	rangeme	nts
				N/A	····					
					,- , 					
										
									-	
							10.1			
			 							
							40			
		-1			· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·			
							· -			
										
20 1	e the for	indation directly or indirect	the affiliated with or	related to one	or more tax-exempt organ	uzations described				
		n 501(c) of the Code (other	-			nzations described	Г	Yes	X	1 No
		complete the following sch	•	7,(0)) 01 111 3001	uon 027 ·			163	L43.) NO
	, , , , ,	(a) Name of org			(b) Type of organization		c) Description of relations	מור		
		N/A			1,7,3,					
			· · · · · · · · · · · · · · · · · · ·							
		· · · · · ·								
	بالصحما	r penalties of perjury, I declare t	that I have examined th	is return, includi r	ng accompanying schedules and	d statements, and to the	. May	the IRS	discuss t	his
Sig	'' 📐	peller, it is true, correct, and cor	ippeta Lierustation of pi	reparer (ether tha	n Expayer) is based on all inform	mation of which preparer	nas any knowledge retu	rn with th wn below	e prepare	эr
Her	e	KINU	UM		3/20/15	PRESID		Yes	`	Νο
	Sıg	nature of officer or trustee			Date	Title				
		Print/Type preparer's na	ıme	Preparer's s	ignature	Date	Check ff PTIN			
				Mach		S 12.	self- employed			
Paid		MATTHEW J.		NOOK	uly	5-19-15		<u> </u>		
	parer	Firm's name ► SMI	TH, CARNE	Y & CO	., P.C.		Firm's EIN ► 73-12	2256	15	
USE	Only									
		II.			, SUITE 1000)				
		⊥ OK	LAHOMA CI	TY, OK	73112-3627		Phone no. (405)			
							Fo	rm 99 0)-PF (2014)

Schedule B (Form 990, 990-EZ,

or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization

Employer identification number

W	HITMAN FAMILY FOUNDATION	47-1101519						
Organization type (check one):								
Filers of:	Section:							
Form 990 or 990-EZ	501(c)() (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private_foundation							
	527 political organization							
Form 990-PF	X 501(c)(3) exempt private foundation							
	4947(a)(1) nonexempt charitable trust treated as a private foundation							
	501(c)(3) taxable private foundation							
	is covered by the General Rule or a Special Rule .	ule See instructions.						
General Rule								
•	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributo	• • • • • • • • • • • • • • • • • • • •						
Special Rules								
sections 509(a)(1) any one contribut	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a for, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount, line 1 Complete Parts I and II	a, or 16b, and that received from						
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, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III.								
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.								
but it must answer "No" or	that is not covered by the General Rule and/or the Special Rules does not file Schedule in Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its F et the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	•						

Name of organization

Employer identification number

WHITMAN FAMILY FOUNDATION

47-1101519

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	Il space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	R. KIRK WHITMAN 13901 N. MIDWEST BLVD. EDMOND, OK 73013	\$179,063.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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 Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	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 Occupate Part II for noncash contributions.)

Employer identification number

WHITMAN FAMILY FOUNDATION

47-1101519

Part II	Noncash Property (see instructions). Use duplicate copies of Part	II if additional space 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
			000 F7 av 000 PF) (0014

Name of organization Employer identification number 47-1101519 WHITMAN FAMILY FOUNDATION 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 info once) Part III Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and 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 (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

423454 11-05-14

FORM 990-PF	LEGAL FEES		STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES	
LEGAL FEES	4,063.	0.		0.	
TO FM 990-PF, PG 1, LN 16A	4,063.	0.		0.	

Form **8868**

(Rev. January 2014)

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

► Information about Form 8868 and its instructions is at www.lrs.gov/form8868.

OMB No. 1545-1709

Department of the Treasury Internal Revenue Service

				1		
If you a	e filing for an Automatic 3-Month Extension, comple	te only Pa	art I and check this box		▶ X	
If you a	e filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II (on page 2 of	this form)		
Do not cor	nplete Part II unless you have already been granted a	an automa	atic 3-month extension on a previous	sly filed Form 88	368	
Electronic	filing (e-file). You can electronically file Form 8868 if y	you need a	a 3-month automatic extension of tir	ne to file (6 mor	ths for a corporation	
required to	ofile Form 990-T), or an additional (not automatic) 3-mo	nth extens	sion of time. You can electronically f	ile Form 8868 to	request an extension	
of time to	file any of the forms listed in Part I or Part II with the ex	ception of	Form 8870, Information Return for	Transfers Assoc	ciated With Certain	
Personal E	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions) For more details	on the electronic	c filing of this form,	
visit www.	rs.gov/efile and click on e-file for Charities & Nonprofits	S				
Part I	Automatic 3-Month Extension of Time	e. Only s	submit original (no copies ne	eded).		
A corporat Part I only	non required to file Form 990-T and requesting an autor	matic 6-mo	onth extension - check this box and	complete	▶ [_]	
,	orporations (including 1120-C filers), partnerships, REM	IICe and t	nusts must use Form 7004 to reques	et an evtension i	of time	
	me tax returns	nos, and t	rasis mast ase roim roo4 to reques			
Type or	Name of exempt organization or other filer, see instru	ctions			Enter filer's identifying number Employer identification number (EIN) of	
	Name of exempt organization of other mer, see mistra	ctions.		Limployer iden	uncation number (Life) (
print File by the	WHITMAN FAMILY FOUNDATION		47	47-1101519		
due date for			Social security	number (SSN)		
filing your return See	13901 N. MIDWEST BLVD.					
nstructions	City, town or post office, state, and ZIP code For a foreign address, see instructions. EDMOND. OK 73013					

Enter the F	Return code for the return that this application is for (file	e a separa	te application for each return)		0 4	
		•	,	-		
Application	on .	Return	Application		Return	
ls For		Code	Is For		Code	
Form 990 or Form 990-EZ		01	Form 990-T (corporation)		07	
Form 990-BL		02	Form 1041-A		08	
Form 4720) (individual)	03	Form 4720 (other than individual)		09	
Form 990-PF		04	Form 5227			
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	
	R. KIRK WHITMAI	N	-			
The bo	oks are in the care of \blacktriangleright 13901 N. MIDWES	ST BL	VD - EDMOND, OK 73	013		
Telepho	one No ▶ <u>405-848-1944</u>		Fax No. >			
If the or	ganization does not have an office or place of business	s in the Ur	nited States, check this box	_	▶ □	
If this is	for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN)	If this is for the \	whole group, check this	
box 🕨 🗌	. If it is for part of the group, check this box	and atta	ch a list with the names and EINs o	f all members th	ne extension is for	
1 I req	uest an automatic 3-month (6 months for a corporation	required	to file Form 990-T) extension of time	until		
	AUGUST 15, 2015 , to file the exemp	t organiza	tion return for the organization name	ed above The e	extension	
ıs fo	the organization's return for					
▶□	calendar year or					
▶□	X tax year beginning NOV 30, 2014	, an	d ending DEC 31, 2014			

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

balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,
by using EFTPS (Electronic Federal Tax Payment System). See instructions.

3c \$

Caution. If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-EO and Form 8879-EO for payment

Instructions.

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

If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any

If the tax year entered in line 1 is for less than 12 months, check reason:

Form 8868 (Rev. 1-2014)

Change in accounting period

nonrefundable credits See instructions.

X Initial return

Final return