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Form 990-PF

Return of Private Foundation

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

OMB No 1545-0052

Open to Public Inspection

Department of the Treasury 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.

For calendar year 2015 or tax year beginning and ending Name of foundation A Employer identification number THE WOODS FAMILY FOUNDATION Number and street (or PO box number if mail is not delivered to street address) Room/suite 27-1767386 6307 WATERFORD BLVD B Telephone number (see instructions) 200 City or town State ZIP code **™OKLAHOMA CITY** Foreign country name OK 73118 (405) 842-1881 Foreign province/state/county Foreign postal code C If exemption application is pending, check here Check all that apply Initial return D 1. Foreign organizations, check here Initial return of a former public charity MAY Final return Amended return 2 Foreign organizations meeting the 85% test, Address change ☐ Name change check here and attach computation Check type of organization Section 501(c)(3) exempt private foundation E If private foundation status was terminated under section 507(b)(1)(A), check here Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation Fair market value of all assets at J Accounting method Cash F If the foundation is in a 60-month termination end of year (from Part II, col (c), Other (specify) under section 507(b)(1)(B), check here 539,149 (Part I, column (d) must be on cash basis) line 16) ▶ \$ Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily expenses per income income purposes books equal the amounts in column (a) (see instructions)) (cash basis only) Contributions, gifts, grants, etc., received (attach schedule) 26,000 CANNED 2 2014 Check ▶ ☐ If the foundation is **not** required to attach Sch. B. 3 Interest on savings and temporary cash investments 28 28 4 Dividends and interest from securities 10,222 10,222 Gross rents 9)/ORevenue Will Net rental income or (loss) Net gain or (loss) from sale of assets not on line 10 6a 742 Gross sales price for all assets on line 6a 159.552 7 Capital gain net income (from Part IV, line 2) 742 8 Net short-term capital gain 9 Income modifications OGNE 10a Gross sales less returns and allowances Less Cost of goods sold Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) 12 Total. Add lines 1 through 11 36,992 10,992 13 Compensation of officers, directors, trustees, etc. 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) 214 107 107 STMT 1 Accounting fees (attach schedule) 2,891 1,446 1,445 and Administrative STMT 1 С Other professional fees (attach schedule) 3,464 3,464 17 Interest 18 Taxes (attach schedule) (see instructions) STMT 1 1,721 21 19 Depreciation (attach schedule) and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 1 23 Other expenses (attach schedule) 20 20 Operating 24 Total operating and administrative expenses. Add lines 13 through 23 8.310 5.058 Ω 1,552 25 Contributions, gifts, grants paid 31,000 31,000 26 Total expenses and disbursements. Add lines 24 and 25 39,310 5,058 0 32,552 27 Subtract line 26 from line 12 Excess of revenue over expenses and disbursements -2,318 Net investment income (if negative, enter -0-) 5,934

For Paperwork Reduction Act Notice, see instructions.

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

Form **990-PF** (2015)

	4 11	Attached schedules and amounts in the description column	Beginning of year	⊨nd	of year
Pa	art II	Balance Sheets 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	16,255	46	9 469
	2	Savings and temporary cash investments	56,275		
	3	Accounts receivable •			ASSES TOP
		Less allowance for doubtful accounts ▶			
	4	Pledges receivable ▶	22/		V (22.25 M) 1 1 1 1 1 1
	'	Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)		\$200 M 5 /4 1 2 1 4	1 89977 181 / 31 / 31 / 31 / 31
	'	Less allowance for doubtful accounts		The state of the s	de la constitución de la constit
s	8	Inventories for sale or use	+		1
Assets	9	Prepaid expenses and deferred charges			
SS	_	· · · · · · · · · · · · · · · · · · ·			
•	10a	Investments—U S and state government obligations (attach schedule)	400.05.4	400.00	7 500,000
	b	Investments—corporate stock (attach schedule) . STMT 1	420,954	490,69	7 538,680
	L C	Investments—corporate bonds (attach schedule)			. V. 2 32 32 48 48 48 88 34 44
	11	Investments—land, buildings, and equipment basis	_		
		Less accumulated depreciation (attach schedule)			
	12	Investments—mortgage loans			
	13	Investments—other (attach schedule)	. A 5 7 £-7010 35.0 2000 0000 15		
	14	Land, buildings, and equipment basis			
	l	Less accumulated depreciation (attach schedule)			
	15	Other assets (describe)			_
	16	Total assets (to be completed by all filers—see the			
		instructions Also, see page 1, item I)	493,484	491,16	6 539,149
	17	Accounts payable and accrued expenses			
Ś	18	Grants payable			
ij	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
<u>.</u>	21	Mortgages and other notes payable (attach schedule)			
_	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0		의 ※※※ ※ 🎄
S		Foundations that follow SFAS 117, check here			
alances		and complete lines 24 through 26 and lines 30 and 31.			
a	24	Unrestricted			
	25	Temporarily restricted			
ᇴ	26	Permanently restricted			
Fund B		Foundations that do not follow SFAS 117, check here			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Ŧ.		and complete lines 27 through 31.			
9	27	Capital stock, trust principal, or current funds			」 ` * * * *
9	28	Paid-in or capital surplus, or land, bldg, and equipment fund	<u> </u>		
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	493,484	491,16	6
t A	30	Total net assets or fund balances (see instructions)	493,484	491,16	<u>6</u>
ž	31	Total liabilities and net assets/fund balances (see			
		instructions)	493,484	491,16	6
	irt III	Analysis of Changes in Net Assets or Fund Balances			
1		net assets or fund balances at beginning of year—Part II, column (a)	, line 30 (must agree	with	
		of-year figure reported on prior year's return)		_1	493,484
2	Enter	amount from Part I, line 27a		2	-2,318
3	Other	r increases not included in line 2 (itemize)		3	
4		ines 1, 2, and 3		4	491,166
5		eases not included in line 2 (itemize)		5	
6	Total	net assets or fund balances at end of year (line 4 minus line 5)-Par	t II, column (b), line 3	6	491.166

Part	V Capital Gains an	d Losses for Tax on Investme	ent Income			
		he kind(s) of property sold (e.g., real estate, ouse, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1a	PUBLICLY TRADED SEC	URITIES-ST		Р	1/2/201	12/31/2015
b	PUBLICLY TRADED SEC	URITIES-LT		Р	1/1/201	12/31/2014
<u>C</u>						
<u>d</u>						
е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		Sain or (loss) s (f) minus (g)
<u>a</u>	63,371			71,538		-8,167
<u> </u>	96,181			87,272		8,909
<u>c</u> d						
<u>u</u>						
	Complete only for assets sh	nowing gain in column (h) and owned b	ov the foundation	on 12/31/69		
_	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exces	s of col (ı) (j), ıf any	col (k), but	Col (h) gain minus not less than -0-) or s (from col (h))
а						-8,167
b						8,909
C						
<u>d</u>		· · · · · · · · · · · · · · · · · · ·				
<u>e</u>		f	laa antar in Dar	+1 line 7		
2	Capital gain net income or	(net capital loss) { If (loss),	lso enter in Par enter -0- in Par	· > 1	2	742
3	Net short-term capital gair If gain, also enter in Part I,					
Part	Part I, line 8	der Section 4940(e) for Reduc		J	3	742
Was t		e this part blank section 4942 tax on the distributabl qualify under section 4940(e) Do n			period?	☐ Yes ☒ No
1		unt in each column for each year, s	see the instruct	ions before makin	g any entries	
Cal	(a) Base period years endar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value o	(c) of noncharitable-use as		(d) Distribution ratio b) divided by col. (c))
	2014	26,	276	549	,442	0 047823
	2013	23,			,209	0 048085
	2012		000		,353	0 048303
	2011	20,	000	373	,443	0 053556
	2010					0 000000
2	Total of line 1, column (d)				2	0 197767
3		or the 5-year base period—divide t	he total on line	2 by 5, or by the	 	
		ation has been in existence if less			3	0 049442
4	Enter the net value of none	charitable-use assets for 2015 from	Part X, line 5		4	587,149
5	Multiply line 4 by line 3	5	29,030			
6	Enter 1% of net investmen	it income (1% of Part I, line 27b)			6	59
7	Add lines 5 and 6				7	29,089
8	Enter qualifying distribution				8	32,552
	Part VI instructions	ter than line 7, check the box in Pai	rt vi, ilne 16, ar	ia complete that p	eaπ using a 1% t	ax rate. See the

Part \	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions	<u>) </u>		
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)		٠	, , ,
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		59	ا
	here ► X and enter 1% of Part I, line 27b		,	, ,
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)	· · · · · · · · · ·	<u>*</u>	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		0	
3	Add lines 1 and 2		59	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		59	
6	Credits/Payments 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		3 2 /*	"
а	2015 estimated tax payments and 2014 overpayment credited to 2015 6a 1,225	v i Janaari K		7-15
b	Exempt foreign organizations—tax withheld at source 6b		***	
С	Tax paid with application for extension of time to file (Form 8868) 6c		<i>*</i>	,
d	Backup withholding erroneously withheld 6d 6d		N. A.	
7	Total credits and payments Add lines 6a through 6d 7		1,225	
8	Enter any penalty for underpayment of estimated tax. Check here. If Form 2220 is attached.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9		0	
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1,166	
11	Enter the amount of line 10 to be Credited to 2016 estimated tax ► 1,166 Refunded ► 11		0	
Part \	/II-A Statements Regarding Activities			
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	\$~.	Yes	No
	participate or intervene in any political campaign?	1a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see			
	Instructions for the definition)?	1b	2000	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials		18.8	7
	published or distributed by the foundation in connection with the activities		<u>~~~</u> }	الشحا
C	Did the foundation file Form 1120-POL for this year?	<u>1c</u>		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	,		
_	(1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$	-		72
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers > \$,	£ 1 & 1	<i>\$</i>
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			1
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		<u>^</u>	
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T	5		×
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		1	
	By language in the governing instrument, or			,
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that 			
	conflict with the state law remain in the governing instrument?	6	Х	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	Х	ļ
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
ь	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	-		
U	(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)	90		
•	or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If			
	"Yes," complete Part XIV	9		x
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			 ^-
	names and addresses	10		X

Part	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)	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified	1		
40	person had advisory privileges? If "Yes," attach statement (see instructions)	12	- -	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address N/A	13	X	1
14	The books are in care of ► ASSET MANAGEMENT ADVISORS LLC Telephone no ► (405) 84	2-188	 1	
• •	Located at ► 6307 WATERFORD BLVD, STE 200 OKLAHOMA CITY OK ZIP+4 ► 73118		··	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here			▶ [
40	and enter the amount of tax-exempt interest received or accrued during the year 15		· ·	1
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority	46	Yes	No
	over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114 If	16		X
	"Yes," enter the name of the foreign country			32
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required		<u> </u>	92235 V
ı aıı	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	# V.	Yes	No
10	During the year did the foundation (either directly or indirectly)		103	2.10
1a		* * * * * * * * * * * * * * * * * * *	٠,٠	1
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No.	,	ξω) L	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No	gerry's Looker s	in the second	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		\$ \$70 2 5 a 9	Tame 1
	(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)?		200	1, 2, 1
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the		43.	in in
	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 fail to qualify under the exceptions described in	×2 2 (
_	Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here	48.3.1	7	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	22	1.700 i	
	were not corrected before the first day of the tax year beginning in 2015?	1c	***************************************	X
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))	(M		
а	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and		100	
	6e, Part XIII) for tax year(s) beginning before 2015?			
	If "Yes," list the years 20, 20, 20, 20	鳞、		
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		2004 ·	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to	2	<u> </u>	ACT.
	all years listed, answer "No" and attach statement—see instructions)	2b	N/A	ļ
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here		. 4 >	× 4
_	▶ 20, 20, 20	*,3		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
	at any time during the year? Yes X No			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or			
	disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10, 15, or 30 year first phase holding period? (Use Schodule C. Form 4730, to determine if the			
	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 2015)	24	N/A	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	3b 4a	IN/A	X
ча b	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	- a		 ^
~	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		X
		•	•	

Part	VII-B Statement	s Regarding Activities	for W	hich Form	4720 N	May Be Re	quire	d (contin	ued)			
5a		foundation pay or incur and da, or otherwise attempt to			section	4945(e))?		☐ Yes	X No		,	
	(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?					X No						
						Yes	X No					
	(4) Provide a grant to a	in organization other than a A)? (see instructions)		- '	-		l ın	☐ Yes	_		,	
		pose other than religious, c prevention of cruelty to ch			terary, o	or education	nal	☐ Yes	X No		3	
b	If any answer is "Yes" t	o 5a(1)–(5), did any of the 4945 or in a current notice	transact	tions fail to qu	•		•		d in	5b	N/A	
	-	n a current notice regarding	-	•		•	dollone	,, .	▶ □	35	/ /	53
С	If the answer is "Yes" to because it maintained of	o question 5a(4), does the fexpenditure responsibility for	oundati or the gi	on claim exen rant?	nption f			☐ Yes	□ No		,	
6a		ement required by Regulations the voor received										30
va	on a personal benefit c	ing the year, receive any fu ontract?	nus, un	ectly of maire	City, to	pay premiur	IIS	☐ Yes	X No			*70
b	Did the foundation, dur	ing the year, pay premiums	, directly	y or indirectly,	on a p	ersonal ber	efit cor	ntract?		6b		X
_	If "Yes" to 6b, file Form							_		1	î Şel	* 3
7a b		year, was the foundation a pation receive any proceeds of					e tranc	Yes	X No	7b	N/A	
		About Officers, Direct							aid Em			
	and Contrac		,				, , -	,		F, -	,	
1	List all officers, direct	ors, trustees, foundation	manag	ers and their	compe	ensation (s	ee inst	ructions)				
	(a) Name and	address	hou	e, and average irs per week ted to position	`´(If ı	mpensation not paid, nter -0-)	empl	Contribution oyee benefit erred compe	plans	(e) Expe	nse aco allowan	
See A	ttached Statement											
			ļ	00		0						
	· · · · · · · · · · · · · · · · · · ·			00		0						
				00		0						
				00		0						
2	Compensation of five "NONE."	highest-paid employees (other t	han those in	cluded	on line 1—	see in:	structions	s). If no	ne, ent	er	
	(a) Name and address of each	employee paid more than \$50,000)	(b) Title, and a hours per w devoted to po	eek	(c) Comper	isation	(d) Contrib employee plans and compens	benefit deferred	(e) Expe	nse acc allowan	
NONE	·										_	
				 								

Pa	Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Er and Contractors (continued)	nployees,
3	Five highest-paid independent contractors for professional services (see instructions). If none, enter "NON	<u></u> 1Е."
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NOI	VE	
Tota	I number of others receiving over \$50,000 for professional services	
Pa	art IX-A Summary of Direct Charitable Activities	
	st the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1		
		_
2		
3		
4		
Pa	Int IX-B Summary of Program-Related Investments (see instructions)	<u> </u>
	escribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1		1 11/12
2		
All	other program-related investments. See instructions	
3		
Tota	IL Add lines 1 through 3	

Form **990-PF** (2015)

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore	ign foundation	ons,
	see instructions)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	<u>5</u> 79,787
b	Average of monthly cash balances	1b	16,303
С	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	596,090
е	Reduction claimed for blockage or other factors reported on lines 1a and	2,000	
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	596,090
4	Cash deemed held for charitable activities Enter 1 ½ % of line 3 (for greater amount, see		
	instructions)	4	8,941
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	587,149
6	Minimum investment return. Enter 5% of line 5	6	29,357
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ■ □ and do not complete this part)	-
1	Minimum investment return from Part X, line 6	<u>,</u>	29,357
2a		59	29,331
b	Income tax for 2015 (This does not include the tax from Part VI)	33	
c	Add lines 2a and 2b	2c	59
3	Distributable amount before adjustments Subtract line 2c from line 1	3	29,298
4	Recoveries of amounts treated as qualifying distributions	4	29,290
5	Add lines 3 and 4	5	29,298
6	Deduction from distributable amount (see instructions)	6	25,250
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
-	line 1	7	29,298
D 4			20,200
Part	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	32,552
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	200	
a	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	32,552
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	59
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	32,493
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating when qualifies for the section 4940(e) reduction of tax in those years	nether the four	dation

1 Distributable amount for 2015 from Part XI, line 7 2 Undistributed income, if any, as of the end of 2015 a Enter amount for 2014 only b Total for prior years 20 20 20 20 20 3 Excess distributions carryover, if any, to 2015 a From 2010 b From 2011 c From 2012 d From 2013 e From 2013 e From 2014 4 Qualifying distributions for 2015 from Part XII, line 4 ** \$3 2,552 a Applied to 2014, but not more than line 2a Applied to undistributed income of prior years (Election required—see instructions) c Treated as distributions out of corpus (Election required—see instructions) d Applied to 2016 distributable amount Remaining amount distributed out of corpus 5 Excess distributions carryover applied to 2015 fif an amount appears in column (a) he same amount must be shown in column (a) he same amount must be shown in column (a) he same amount must be shown in column (b) to the same amount must be shown in column (b) to the same amount must be distributed income for 2014 Subtract line 5 b Prior years' undistributed income for 2014 Subtract line 4 from line 2 Taxable amount—see instructions f Undistributed income for 2014 Subtract line 4 from line 2 a Taxable amount—see instructions f Undistributed income for 2015 Subtract line 4 from line 2 a Taxable amount—see instructions f Undistributed income for 2015 Subtract line 4 from line 2 a Taxable amount—see instructions g Undistributed income for 2015 Subtract line 4 from line 2 a Taxable amount—see instructions g Undistributed income for 2015 Subtract line 4 from line 2 a Taxable amount—see instructions g Excess distributions carryover to 2010. Subtract line 5 from line 1 This amount must be distributions carryover to 2016. Subtract line 8 from line 6 a Subtract line 8 from line 6 a Subtract l	Part	XIII Undistributed Income ((see instructions	<u>;)</u>			- Fage 3
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a Excess from 2011 535 b Excess from 2012 c Excess from 2013	10			3,793			
b Excess from 2012 c Excess from 2013		•	505				
c Excess from 2013	d	—	535				
	0	} -					
a Eyress from 2014 I Al I I I	ر م	Excess from 2014					
e Excess from 2015 3,254	u A	-	3 254				

Form 990-PF (2015)

Part	XIV Private Operating Foundat	ions (see instru	ictions and Part \	VII-A, question 9)	ı	N/A
1a	If the foundation has received a ruling of	r determination le	tter that it is a priva	ite operating		
	foundation, and the ruling is effective fo	r 2015, enter the	date of the ruling	•		
b	Check box to indicate whether the foundation	on is a private opera	ating foundation desc	ribed in section	4942(j)(3) or 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year	T	Prior 3 years		
	income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
	investment return from Part X for each year listed	(4) 2010	(5) 2014	(6) 2010	(4) 2012	0
b	85% of line 2a					
				<u> </u>		0
С	Qualifying distributions from Part XII,					_
	line 4 for each year listed					0
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0
е	Qualifying distributions made directly					
_	for active conduct of exempt activities Subtract line 2d from line 2c					0
3	Complete 3a, b, or c for the					
•	alternative test relied upon					
а	"Assets" alternative test—enter					
-	(1) Value of all assets					0
	• •			 		U
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					0
b	"Endowment" alternative test—enter 2/3					
	of minimum investment return shown in Part X, line 6 for each year listed					0
С	"Support" alternative test—enter					
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on					
	securities loans (section 512(a)(5)), or royalties)					0
	(2) Support from general public					
	and 5 or more exempt					
	organizations as provided in					•
	section 4942(j)(3)(B)(iii)		+			0
	(3) Largest amount of support from					_
	an exempt organization					0
	(4) Gross investment income	(2 1 1 1				0
Part		•	•	e foundation ha	d \$5,000 or moi	re in assets at
	any time during the year—		<u>1S.)</u>		-	
1	Information Regarding Foundation M					
а	List any managers of the foundation wh					foundation
	before the close of any tax year (but only	y if they have con	itributed more than	\$5,000) (See secti	on 507(d)(2))	
MARG	GOLYN W ANDREWS TARYN W	BURT	MATTHEW	T WOODS	ADAM H WOO	DDS
b	List any managers of the foundation wh	o own 10% or mo	re of the stock of a	corporation (or an	equally large portio	n of the
	ownership of a partnership or other entit	ty) of which the fo	undation has a 10%	% or greater interest	İ	
NONE						
2	Information Regarding Contribution,	Grant, Gift, Loan	, Scholarship, etc.	., Programs:		
	Check here ▶ ☐ If the foundation on				ations and does no	ot accept
	unsolicited requests for funds If the fou	ndation makes gif	its, grants, etc (see	e instructions) to ind	ividuals or organiza	ations
	under other conditions, complete items	2a, b, c, and d				
a	The name, address, and telephone num	ber or e-mail add	ress of the person	to whom application	s should be addre	ssed
-	The state of the s					-
MARC	GOLYN W ANDREWS 6307 WATERFOR	D BLVD STE 200	OKI AHOMA CITY	Y OK 73118 (405) 9	R42-1881	
	The form in which applications should b				•	
O	THE TOTAL IT WHICH APPROAROUS SHOULD D	e submilleu and i	monnation and mat	teriais triey sriouid l	IGUUE	
WRIT	TEN REQUEST					
	Any submission deadlines					
NONE	-					
	Any restrictions or limitations on awards	s such as by geor	raphical areas cha	aritable fields kinds	of institutions or o	other
-	factors		,			· =:
ORGA	NIZATIONS WHICH ADHERE TO THE	FOUNDATION'S	MISSION TO FURT	THER GOD'S WOR	K	

Supplementary Information (continued) Part XV Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Foundation Recipient show any relationship to Purpose of grant or status of Amount any foundation manager contribution recipient Name and address (home or business) or substantial contributor Paid during the year PC DAYSPRING VILLA WOMEN AND CHILDREN'S SHELTER SOCIAL WELFARE 11.000 PO BOX 1588 SAND SPRINGS, OK 74063 OPPORTUNITY INTERNATIONAL PC SOCIAL WELFARE 10,000 550 W VAN BUREN STREET, STE 200 CHICAGO, IL 60607 PC SOCIAL WELFARE WATER4 10,000 2405 NW 10TH STREET OKLAHOMA CITY, OK 73107 Total За 31,000 Approved for future payment **Total**

Pа	TXVI-A Analysis of Income-Producing Act	tivities				
Ente	er gross amounts unless otherwise indicated	Unrelated bus	iness income	Excluded by section	n 512, 513, or 514	(2)
		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	Program service revenue					(Occ manucaons)
	a}					
	b		· · · · · · · · · · · · · · · · · · ·			
	c					
	d					
	e					
	f					
_	g Fees and contracts from government agencies	-	 	 		
2	Membership dues and assessments			ļ	· -	
3	Interest on savings and temporary cash investments			14	28	
4	Dividends and interest from securities	:	· · · · · · · · · · · · · · · · · · ·	14	10,222	
5	Net rental income or (loss) from real estate	an in the	<u> </u>	43 44	, ^	
	a Debt-financed property				_	
_	b Not debt-financed property					
6	Net rental income or (loss) from personal property					-
7	Other investment income			10	7.40	
8	Gain or (loss) from sales of assets other than inventory			18	742	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory			-		
11	Other revenue a			1		
	b			-		
	<u> </u>					
	d					
12	Subtotal Add columns (b), (d), and (e)	y (. *9			10.002	
	1111	, 38° /	0	, i	10,992	0
	Total. Add line 12, columns (b), (d), and (e)	`			13	10,992
	worksheet in line 13 instructions to verify calculations t XVI-B Relationship of Activities to the Activities		nt of Evamp	t Durmagaa		· · · · ·
	EXPlain below how each activity for which income accomplishment of the foundation's exempt purpose.	e is reported in co oses (other than t	y providing fund	s for such purpose	mportantly to the es) (See instruction	ons)
						
						
						
			· · · · · · · · · · · · · · · · · · ·			
						
						
				-		
			·		<u> </u>	
	1					

Firm's address > 6408 N SANTA FE AVE, STE B, OKLAHOMA CITY, OK 73116

Form 99	0-PF (2	2015) THE WO	ODS FAMILY FOUN	IDATION						27-176738	6 р	age 13
Part	XVII	Information Exempt Org	Regarding Transganizations	sfers To	and Trans	saction	s and R	elationship	s With N	Noncharitat		
a b	rn se politic Trans (1) C (2) C Othe (1) S	he organization d ction 501(c) of the cal organizations' sfers from the rep tash other assets r transactions ales of assets to	lirectly or indirectly e e Code (other than s	a noncha	1(c)(3) organ intable exem	nizations	or in se	ction 527, rela		1a 1a 1b	(1) (2) (1) (2)	X X X
c d	(3) R (4) R (5) L (6) P Shart	ental of facilities, teimbursement ar oans or loan gual erformance of se ing of facilities, et answer to any of the	equipment, or other rangements	r assets ip or fundi its, other a mplete the	raising solici assets, or pa following sch	tations id emplo edule Co	lumn (b) :			1b 1b 1b 1b air market	(3) (4) (5) (6)	X X X X
(a) Line	value		or sharing arrangeme	ent, show I	n column (d)	the value	of the go	ods, other ass	ets, or serv			
2a b	desc	ribed in section 50	ttly or indirectly affilia 01(c) of the Code (of following schedule						nizations	☐ Ye	s X	No
		(a) Name of organ			(b) Type of org	janization			(c) Descript	tion of relationship		
Sign Here	соггес		lare that I trave examined this report of preparer (other man, taxpa						nowledge and b	wellef, it is true, May the IRS dis with the prepare (see instructions	shown be	low_
Paid Prepa Use O	rer	Print/Type preparer's GAIL E MELTZN Firm's name	s name	VOMACK,	er's signature 15. Aulty INC	mer Ct		Date 5/9/16			447551 68	

(405) 842-0212

Phone no

Schedule B

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

Schedule of Contributors

OMB No 1545-0047

Department of the Treasury

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. Internal Revenue Service Name of the organization **Employer identification number** THE WOODS FAMILY FOUNDATION 27-1767386 Organization type (check one) Filers of: Section: 501(c)(Form 990 or 990-EZ) (enter number) organization 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 treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions **General Rule** X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions **Special Rules**

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 331/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
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.

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, 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 organizationEmployer identification numberTHE WOODS FAMILY FOUNDATION27-1767386

THE WOO	DDS FAMILY FOUNDATION		27-1767386
Part I	Contributors (see instructions) Use duplicate copie	es of Part I if additional space is r	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MARGOLYN WOODS ANDREWS PO BOX 40 ELLSWORTH MI 49729 Foreign State or Province Foreign Country	\$ 26,000	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Occupation (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Occupate Part II for noncash contributions Part II for noncash contributions
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Occupate Part II for noncash contributions Payroll II for no
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province Foreign Country	\$	Person Payroll Oncash (Complete Part II for noncash contributions)

THE WOODS FAMILY FOUNDATION EIN 27-1767386 FORM 990-PF - STATEMENT 1 December 31, 2015

FORM 990-PF, Part I, Line 16(a) - Legal Fees	
Miscellaneous	\$ 214
FORM 990-PF, Part I, Line 16(b) - Accounting Fees	
Thom-Dobson-Womack, Inc Asset Management Advisors	\$ 1,175 1,716
	\$ 2,891
FORM 990-PF, Part I, Line 16(c) - Other Professional Fees	
Asset Management Advisors - Management Fees	\$ 3,464
FORM 990-PF, Part I, Line 18 - Taxes	
Federal Excise Tax Foreign Taxes	\$ 1,700 21
	\$ 1,721
FORM 990-PF, Part I, Line 23 - Other Expenses	
Miscellaneous	\$ 20
FORM 990-PF, Part II, Line 10b - Investments	
Publicly Traded Stocks and Bonds , valued at cost (FMV \$538,680)	\$ 490,697

Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

Foreign County Title Per Week Compensation President P								-	:		0	0
MI 49729 PRESIDIR 1 00 0 TX 77007 VP/DIR 0 00 0 TX 78703 VP/DIR 0 00 0 TX 75214 VP/DIR 0 00 0 OK 73118 SEC/TREAS 1 00 0		Sheck "X" Business	Street		State	Zip Code	Foreign Country		Avg Hrs Per Week	Compensation	Benefits	Expense Account
TX 77007 VP/DIR 0 000 TX 78703 VP/DIR 0 000 TX 75214 0 000 TX 75214 0 000	MARGOLYN WOODS ANDREWS			:	₹	49729		PRES/DIR	100	0		
TX 78703 VP/DIR 0 00 TX 75214 0 00 TX 75214 0 00 TX 75214 0 00												
TX 78703 VP/DIR 0 000 TX 75214 0 000 OK 73118 SEC/TREAS 1 00				HOUSTON	٢	70077		VP/DIR	000	0		
TX 78703 VP/DIR 0 00 TX 75214 VP/DIR 0 00 OK 73118 SEC/TREAS 1 00										-		
TX 75214 VP/DIR OK 73118 SEC/TREAS				AUSTIN		78703		VP/DIR	000	0		
TX 75214 VP/DIR OK 73118 SEC/TREAS												
OK 73118 SECITREAS 1				DALLAS		75214		VP/DIR	000	0		
OK 73118 SECITREAS 1												
			6307 WATERFORD BLVD, STE 200			73118		SEC/TREAS		0		