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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

2015

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. For calendar year 2015 or tax year beginning , 2015, and ending 20 A Employer identification number Name of foundation The Credence Foundation 27-2931971 Number and street (or P.O. box number if mail is not delivered to street address) Room/surte B Telephone number (see instructions) (405) 823-7249 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ Edmond, OK 73083 G Check all that apply: ☐ Initial return Initial return of a former public charity D 1. Foreign organizations, check here . . . ▶ ☐ Amended return ☐ Final return 2. Foreign organizations meeting the 85% test. ☐ Address change □ Name change check here and attach computation . E If private foundation status was terminated under H Check type of organization: Section 501(c)(3) exempt private foundation 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 ☐ Accrual 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 line 16) ► \$ 1,181,610 (Part I, column (d) must be on cash basis.) Part I (d) Disbursements Analysis of Revenue and Expenses (The total of (a) Revenue and (c) Adjusted net (b) Net investment for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per books purposes (cash basis only) ıncome the amounts in column (a) (see instructions).) Contributions, gifts, grants, etc., received (attach schedule) 1 23,107 2 Check ► ☐ If the foundation is **not** required to attach Sch. B 3 Interest on savings and temporary cash investments 16 16 STMT 1 Dividends and interest from securities . . . . STMT 2 4 27,537 27,537 5a h Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 28,275 Gross sales price for all assets on line 6a 7 Capital gain net income (from Part IV, line 2) . . . 28,275 Net short-term capital gain . . . . . . . 8 9 Income modifications . . . . 10a Gross sales less returns and allowances Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule) . . . . c 11 Other income (attach schedule) . . . . . . 12 Total. Add lines 1 through 11 . . . 55,828 78.935 13 Compensation of officers, directors, trustees, etc. Other employee salaries and wages [] 14 SCHOOL OF AND CHICKEDS 15 Pension plans, employee benefits . . Legal fees (attacheschedule) 3 2016 . Accounting fees (attach schedule) . . 16a b 830 0 O Operating and Administrative Other professional fees (attach schedule) 0 127 0 Interest . . . . OGDEN, UI 17 18 Taxes (attach schedule) (see instructions) . . 1,883 0 0 19 Depreciation (attach schedule) and depletion . . . 20 21 Travel, conferences, and meetings . 22 Printing and publications . . . 23 Other expenses (attach schedule) 340 0 24 Total operating and administrative expenses. Add lines 13 through 23 . . . . . . . . . . 3,180 Contributions, gifts, grants paid . . . . . . 74,088 74,088 26 Total expenses and disbursements. Add lines 24 and 25 0 77,268 74,088 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements 1,667 **Net investment income** (if negative, enter -0-) . 55,828 Adjusted net income (if negative, enter -0-) N/A

For Paperwork Reduction Act Notice, see instructions.

Cat. No. 11289X

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Page 2

| Part II              |          | Ratance Shoots Attached schedules and amounts in the description column   | Beginning of year         | End o          | End of year               |  |  |
|----------------------|----------|---|---------------------------|----------------|---------------------------|--|--|
| F                    | سبي      | 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   |                           |                |                           |  |  |
|                      | 2        | Savings and temporary cash investments  | 104,714                   | 162,715        | 162,715                   |  |  |
|                      | 3        | Accounts receivable ►   |                           |                |                           |  |  |
|                      |          | Less: allowance for doubtful accounts ▶   |                           |                |                           |  |  |
|                      | 4        | Pledges receivable ▶  | : I                       |                |                           |  |  |
|                      |          | 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) ▶  |                           |                |                           |  |  |
|                      |          | Less: allowance for doubtful accounts ▶   |                           | ·              |                           |  |  |
| şţ                   | 8        | Inventories for sale or use   |                           |                |                           |  |  |
| Assets               | 9        | Prepaid expenses and deferred charges   |                           |                |                           |  |  |
| Ä                    | 10a      | Investments—U.S. and state government obligations (attach schedule)   |                           |                |                           |  |  |
|                      | b        | Investments—corporate stock (attach schedule) . STMT 7  |                           | 267,967        | 338,899                   |  |  |
|                      | С        | Investments—corporate bonds (attach schedule) STMT 8 .  |                           | 129,988        | 127,050                   |  |  |
|                      | 11       | Investments—land, buildings, and equipment basis ▶  |                           |                | <br>                      |  |  |
|                      |          | Less: accumulated depreciation (attach schedule) ▶  |                           |                | <u> </u>                  |  |  |
|                      | 12       | Investments—mortgage loans  |                           | <u> </u>       |                           |  |  |
|                      | 13       | Investments—other (attach schedule)   |                           | 542,359        | 552,946                   |  |  |
|                      | 14       | Land, buildings, and equipment: basis ▶   | <u></u>                   |                |                           |  |  |
|                      |          | Less: accumulated depreciation (attach schedule) ▶  |                           |                |                           |  |  |
|                      | 15       | Other assets (describe ▶)   |                           | 2              |                           |  |  |
|                      | 16       | Total assets (to be completed by all filers—see the   |                           |                |                           |  |  |
|                      |          | instructions. Also, see page 1, item I)   | 1,278,900                 | 1,103,029      | 1,181,610                 |  |  |
|                      | 17       | Accounts payable and accrued expenses   |                           |                | į                         |  |  |
| S                    | 18       | Grants payable  |                           |                |                           |  |  |
| ı≝                   | 19       | Deferred revenue  |                           |                |                           |  |  |
| Liabilities          | 20       | Loans from officers, directors, trustees, and other disqualified persons  |                           |                | 1                         |  |  |
| Ę.                   | 21       | Mortgages and other notes payable (attach schedule)   |                           | 1.21.          |                           |  |  |
|                      | 22       | Other liabilities (describe ► ) <b>Total liabilities</b> (add lines 17 through 22)  |                           |                |                           |  |  |
|                      | 23       | I otal liabilities (add lines 17 through 22)  | 0                         | 0              |                           |  |  |
| g                    |          | Foundations that follow SFAS 117, check here >  |                           |                |                           |  |  |
| 2                    |          | and complete lines 24 through 26 and lines 30 and 31.   |                           |                | 1                         |  |  |
| alances              | 24       | Unrestricted  |                           |                |                           |  |  |
|                      | 25       | Temporarily restricted  |                           | <del></del>    | '                         |  |  |
| ğ                    | 26       | Permanently restricted  |                           |                | ,                         |  |  |
| Net Assets or Fund B |          | Foundations that do not follow SFAS 117, check here ► ✓ and complete lines 27 through 31.   |                           |                | i                         |  |  |
| Ž                    | 07       |   |                           | _              | 1                         |  |  |
| 8                    | 27       | Capital stock, trust principal, or current funds  | 0                         | 0              |                           |  |  |
| set                  | 28       | Paid-in or capital surplus, or land, bldg., and equipment fund  | 0                         | 0              | ı                         |  |  |
| As                   | 29<br>30 | Retained earnings, accumulated income, endowment, or other funds  Total net assets or fund balances (see instructions)              | 1,278,900                 | 1,103,029      | 1                         |  |  |
| et.                  | 31       | Total liabilities and net assets/fund balances (see   | 1,278,900                 | 1,103,029      | 1                         |  |  |
| Ž                    | ٠.       | instructions)   | 4 370 000                 | 1,103,029      |                           |  |  |
| Рa                   | rt III   | Analysis of Changes in Net Assets or Fund Balances  | 1,278,900                 | 1,103,029      | <u> </u>                  |  |  |
|                      |          | I net assets or fund balances at beginning of year—Part II, colu  | mn (a), line 30 (must     | agree with     |                           |  |  |
| •                    |          | of-year figure reported on prior year's return)   |                           |                | 1,278,900                 |  |  |
| 2                    |          | er amount from Part I, line 27a   |                           | <u> </u>       | 1,278,900                 |  |  |
| 3                    |          | er increases not included in line 2 (itemize) Correction to prior ye  |                           |                | 551                       |  |  |
| 4                    |          | lines 1, 2, and 3   |                           |                | 1,281,118                 |  |  |
| 5                    |          |   |                           |                | 178,089                   |  |  |
| 6                    | Tota     | reases not included in line 2 (itemize) ►<br>Il net assets or fund balances at end of year (line 4 minus line 5)—I                  | Part II, column (b). line | 30 6           | 1,103,029                 |  |  |
|                      |          |   | ,                         | ····           | Form <b>990-PF</b> (2015) |  |  |

| Part          | (a) List and describe the 2-story brick warehou              | , , ,   | acquired<br>day, yr)                | (d) Date sold<br>(mo., day, yr.) |          |   |  |  |
|---------------|--|---|-------------------------------------|----------------------------------|----------|---|--|--|
| 1a            | Publicly traded securities                                   |   |                                     |                                  |          |   |  |  |
| b             | Capital gains distributions                                  | ***   |                                     |                                  |          |   |  |  |
| <u>C</u>      | · · · · · · · · · · · · · · · · · · ·                        |   |                                     | <u> </u>                         |          |   |  |  |
| d             |  |   |                                     |                                  | ļ        |   |  |  |
| е             | (e) Gross sales pnce (f) Depreciation allowed (or allowable) |   |                                     | r other basis<br>ense of sale    |          |   | in or (loss)<br>(f) minus (g)                  |  |
|               | A77 EE0  | ,   |                                     |                                  |          |   |  |  |
| <u>a</u><br>b | 477,550<br>28.844  |   |                                     | 478,119                          |          |   | (569)<br>28,844                                |  |
| C             | 20,011   |   |                                     |                                  |          |   | 20,011   |  |
| d             |  |   |                                     |                                  |          |   |  |  |
| е             |  |   |                                     |                                  |          |   |  |  |
|               | Complete only for assets sho                                 | owing gain in column (h) and owned b  | y the foundation                    | on 12/31/69                      |          | II) Gains (Co   | l. (h) gain minus                              |  |
|               | (i) F.M.V. as of 12/31/69                                    | (j) Adjusted basis<br>as of 12/31/69  |                                     | ss of col. (i)<br>l. (j), if any |          | (I) Gains (Col. (h) gain minus<br>col. (k), but not less than -0-) or<br>Losses (from col. (h)) |  |  |
| а             |  |   |                                     |                                  |          |   |  |  |
| b             |  |   |                                     |                                  |          |   |  |  |
| C             | ·  |   |                                     |                                  |          |   |  |  |
| d             |  |   |                                     |                                  |          |   |  |  |
| ее            |  | ( If main   | olon ontenio De                     | willian 7                        | 1        |   |  |  |
| 2             | Capital gain net income o                                    | or (net capital loss) { If (loss),  | also enter in Pa<br>enter -0- in Pa | rt I, line 7                     | 2        | · · · · · · · · · · · · · · · · · · ·   | 28,275   |  |
| 3             | If gain, also enter in Part                                  | in or (loss) as defined in sections I, line 8, column (c) (see instruc                        | tions). If (loss)                   |                                  |          |   |  |  |
| Part          |  | ler Section 4940(e) for Redu  |                                     | · · · · )                        | 3        |   | (3,452)  |  |
|               |  | ivate foundations subject to the s  |                                     |                                  |          |   |  |  |
| Was t         |  | re this part blank.<br>section 4942 tax on the distribut<br>qualify under section 4940(e). Do |                                     |                                  | oase per | iod?  | ☐ Yes ☑ No                                     |  |
| 1             | Enter the appropriate amo                                    | ount in each column for each yea  | r; see the instr                    | uctions before ma                | aking an | y entries.  |  |  |
| Cale          | (a) Base period years endar year (or tax year beginning in   | (b) Adjusted qualifying distributions   | Net value o                         | (c)<br>of nonchantable-use a     | ssets    |   | (d)<br>tribution ratio<br>divided by col. (c)) |  |
|               | 2014   | 72  | ,009                                | 1,34                             | 9,872    |   | .053345  |  |
|               | 2013   | 51  | ,628                                | 1,23                             | 3,016    |   | .041871  |  |
|               | 2012   | 34  | ,118                                | 1,06                             | 8,226    |   | .031939  |  |
|               | 2011   |   | ,555                                | 1,00                             | 6,511    |   | .015454  |  |
|               | 2010   | 4   | ,200                                | 8                                | 6,705    | <del></del>   | .048440  |  |
| 2<br>3        | Total of line 1, column (d)                                  | )   |                                     |                                  | . 2      | <u>:</u>  | .191049  |  |
|               |  | dation has been in existence if le  |                                     |                                  |          | ,   | .038210  |  |
| 4             | Enter the net value of nor                                   | ncharitable-use assets for 2015 fr  | om Part X, line                     | 5                                | . 4      | <u> </u>  | 1,265,073                                      |  |
| 5             | Multiply line 4 by line 3                                    |   |                                     |                                  | . 5      | <u>;                                    </u>  | 48,338   |  |
| 6             | Enter 1% of net investme                                     | nt income (1% of Part I, line 27b)  |                                     |                                  | . 6      | ;   | 558  |  |
| 7             | Add lines 5 and 6  |   |                                     |                                  | . 7      | ,   | 48,896   |  |
| 8             |  | ons from Part XII, line 4   |                                     |                                  | . 8      |   | 74,088   |  |
| 8             |  | ons from Part XII, line 4 ater than line 7, check the box in                                  |                                     |                                  |          |   |  |  |

| Part ' |  | nstrı    | 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      | Domestic foundations that meet the section 4940(e) requirements in Part V, check   |          | 558  | <u> </u>        |  |  |  |  |  |  |
| _      | here $\triangleright$ $\checkmark$ and enter 1% of Part I, line 27b  |          |  |                 |  |  |  |  |  |  |
| C      | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).   |          |  | -               |  |  |  |  |  |  |
| 2      |  |          |  |                 |  |  |  |  |  |  |
| 3      | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2 Add lines 1 and 2  |          | 0  | <del> </del>    |  |  |  |  |  |  |
| 4      | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)  |          | <u>558</u><br>0                                  | -               |  |  |  |  |  |  |
| 5      | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0   |          | 558  |                 |  |  |  |  |  |  |
| 6      | <del> </del>   |          |  |                 |  |  |  |  |  |  |
| а      |  |          |  |                 |  |  |  |  |  |  |
| b      | Exempt foreign organizations—tax withheld at source 6b   |          |  |                 |  |  |  |  |  |  |
| C      | Tax paid with application for extension of time to file (Form 8868) . 6c   |          |  |                 |  |  |  |  |  |  |
| d      | Backup withholding erroneously withheld 6d   |          |  | ĺ               |  |  |  |  |  |  |
| 7      | Total credits and payments. Add lines 6a through 6d  |          | 1,240  |                 |  |  |  |  |  |  |
| 8      | Enter any <b>penalty</b> for underpayment of estimated tax. Check here   |          |  |                 |  |  |  |  |  |  |
| 9      | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed ▶ 9  |          |  | L               |  |  |  |  |  |  |
| 10     | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10   |          | 682  |                 |  |  |  |  |  |  |
| 11     | Enter the amount of line 10 to be: Credited to 2016 estimated tax   682 Refunded   11  |          | 0  |                 |  |  |  |  |  |  |
|        | VII-A Statements Regarding Activities  During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it  | Τ        | Yes  | No              |  |  |  |  |  |  |
| 14     | participate or intervene in any political campaign?  | 1a       | 168  | <b>140</b><br>✓ |  |  |  |  |  |  |
| b      | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see   |          | <del>                                     </del> | <u> </u>        |  |  |  |  |  |  |
| _      | Instructions for the definition)?  |          |  |                 |  |  |  |  |  |  |
|        | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials  | 1b       |  | <u> </u>        |  |  |  |  |  |  |
|        | published or distributed by the foundation in connection with the activities.  |          |  |                 |  |  |  |  |  |  |
| С      | c Did the foundation file Form 1120-POL for this year?   |          |  |                 |  |  |  |  |  |  |
| d      | • • · · · · · · · · · · · · · · · · · ·  |          |  |                 |  |  |  |  |  |  |
|        | (1) On the foundation. ▶ \$ (2) On foundation managers. ▶ \$   |          |  |                 |  |  |  |  |  |  |
| 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        |  | <b>/</b>        |  |  |  |  |  |  |
| 3      | If "Yes," attach a detailed description of the activities.  Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of  | ļ        |  | 1               |  |  |  |  |  |  |
| 3      | 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       |  | 1               |  |  |  |  |  |  |
|        | If "Yes," has it filed a tax return on Form 990-T for this year?   | 4b       |  | Ť               |  |  |  |  |  |  |
| 5      | Was there a liquidation, termination, dissolution, or substantial contraction during the year?   | 5        |  | 1               |  |  |  |  |  |  |
|        | If "Yes," attach the statement required by General Instruction T.  |          |  | 1               |  |  |  |  |  |  |
| 6      | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:  | ļ        |  | ļ               |  |  |  |  |  |  |
|        | By language in the governing instrument, or  | ļ        |  |                 |  |  |  |  |  |  |
|        | • 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        | 1  | ļ               |  |  |  |  |  |  |
| 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        | <u> </u>   | <u> </u>        |  |  |  |  |  |  |
| 8a     | Enter the states to which the foundation reports or with which it is registered (see instructions)   |          |  |                 |  |  |  |  |  |  |
| _      | Oklahoma Control of the Control of t |          |  |                 |  |  |  |  |  |  |
| 10     | b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation  |          |  |                 |  |  |  |  |  |  |
| •      | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or  | 8b       | ✓  |                 |  |  |  |  |  |  |
| 9      | 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes,"   | <u> </u> | -  |                 |  |  |  |  |  |  |
|        | complete Part XIV  | 9        | [  | 1               |  |  |  |  |  |  |
| 10     | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their   | <u> </u> |  |                 |  |  |  |  |  |  |
| -      | names and addresses  | 10       |  | ✓               |  |  |  |  |  |  |
|        |  | -        | A DE   |                 |  |  |  |  |  |  |

| Part     | VII-A Statements Regarding Activities (continued)  |          |      |              |
|----------|--|----------|------|--------------|
| •        |  |          | Yes  | No           |
| 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       |      | 1            |
| 12       | Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified   | <u> </u> |      |              |
|          | person had advisory privileges? If "Yes," attach statement (see instructions)  | 12       |      | 1            |
| 13       | Did the foundation comply with the public inspection requirements for its annual returns and exemption application?  | 13       |      | <del>Ľ</del> |
| 10       |  | 13       |      |              |
| 14       | Website address ► N/A The backs are in any of N. Tarress I. Dudes  |          | 7240 |              |
| 17       |  | 5) 823   |      |              |
| 4-       | Located at ► P. O. Box 423, Edmond, OK ZIP+4 ►   | 7308     | 3    |              |
| 15       | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here  |          | •    | ▶ ⊔          |
|          | and enter the amount of tax-exempt interest received or accrued during the year  |          | 24   | N/A          |
| 16       | At any time during calendar year 2015, 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       |      | <b>/</b>     |
|          | See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of   |          |      | ļ            |
|          | the foreign country ▶  |          |      |              |
| Part     | VII-B Statements Regarding Activities for Which Form 4720 May Be Required  |          |      | ,            |
|          | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.  |          | Yes  | 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?   |          |      |              |
|          | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a  |          |      |              |
|          | disqualified person?   |          |      | ì            |
|          | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?   |          |      |              |
|          | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?   |          |      |              |
|          | (5) Transfer any income or assets to a disqualified person (or make any of either available for  |          |      |              |
|          | 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 fail to qualify under the exceptions described in Regulations   |          |      |              |
|          | section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?  | 1b       |      |              |
|          | Organizations relying on a current notice regarding disaster assistance check here ▶□  |          |      |              |
| 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 2015?   | 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 2015, did the foundation have any undistributed income (lines 6d and  |          |      |              |
| •        | 6e, Part XIII) for tax year(s) beginning before 2015?  |          |      |              |
|          | If "Yes," list the years ▶ 20 , 20 , 20 , 20   |          |      |              |
| <b>L</b> | Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2)  |          |      | ļ            |
| U        | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to   |          |      |              |
|          | THE STATE OF THE S | 2b       |      | <sup> </sup> |
| _        | · · · · · · · · · · · · · · · · · · ·  | 20       |      | <del></del>  |
| С        | If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here.  |          |      |              |
| 0-       | ▶ 20 , 20 , 20 , 20  |          |      |              |
| За       | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise  |          |      | '            |
|          | at any time during the year?   |          |      |              |
| þ        | 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 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the   |          |      | L J          |
|          | foundation had excess business holdings in 2015.)  | 3b       | L    | <b> </b>     |
| 4a       | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?  | 4a       |      | 1            |
| 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 2015?   | 4b       |      | ✓            |

| Part  | : VII-B  | Statements Regarding Activitie  | es for W  | Vhich Form                                      | 4720              | May Be R      | equire        | d (contii   | nued)               |  |                    |        |
|-------|--|---|---|---|-------------------|---------------|---------------|---|---------------------|--|--------------------|--------|
| 5a ·  | _  | the year did the foundation pay or incur  | -   |   | /                 | : 404E(-)     | ١٥            | <b>□ v</b>  | [7] No.             |  |                    |        |
|       | (2) Influ  | ry on propaganda, or otherwise attempt<br>sence the outcome of any specific pub   | lic electı  | on (see secti                                   | on 495            | 5); or to ca  | irry on,      | ∐ Yes   | ☑ No                |  |                    |        |
|       |  | ctly or indirectly, any voter registration o  |   |   |                   |               |               | ☐ Yes   | ✓ No                |  |                    |        |
|       | (4) Pro  | vide a grant to an individual for travel, st<br>vide a grant to an organization other tha<br>tion 4945(d)(4)(A)? (see instructions) | an a cha  | ritable, etc.,                                  | organiz           | ation desci   | ibed in       | ☐ Yes   | ✓ No                |  |                    |        |
|       | (5) Pro  | vide for any purpose other than religiou  | s, charit   | able, scientifi                                 | c, litera         |               | ational       |   |                     |  |                    |        |
| b     |  |   |   |   |                   |               |               | _   |                     |  |                    |        |
|       | Regulat  | ions section 53.4945 or in a current notice   | e regardi   | ng disaster as                                  | ssistand          | e (see instr  | uctions)      | ?   | . <u>N</u> /A       | 5b                                       |                    |        |
|       | Organizations relying on a current notice regarding disaster assistance check here   |   |   |   |                   |               |               | ▶□  |                     |  |                    |        |
| С     | c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? N/A. Yes No |   |   |   |                   |               |               |   |                     |  |                    |        |
| 6a    |  | " attach the statement required by Regu<br>foundation, during the year, receive an  |   |   |                   |               | emiums        |   |                     |  |                    |        |
| -     | Sa Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?                                       |   |   |   |                   |               |               | 1   |                     |  |                    |        |
| b     |  | foundation, during the year, pay premit   | ıms, dıre   | ectly or indire                                 | ctly, on          | a personal    | benefit       | contract  | ? .                 | 6b                                       |                    | ✓      |
| 70    |  | to 6b, file Form 8870. ime during the tax year, was the foundation  | a narty   | to a probibate                                  | tav ch            | olter transac | tion?         | □Yes  | [Z] No              |  |                    |        |
| b     |  | " did the foundation receive any procee   |   |   |                   |               |               |   |                     |  |                    |        |
| Part  | VIII   | Information About Officers, Dire  | ctors, 1  | Trustees, F                                     | ounda             | tion Mana     | agers,        | Highly F  | Paid E              | nploy                                    | ees,               |        |
|       |  | and Contractors   |   |   | <u>.</u>          |               | <del>_,</del> |   |                     |  |                    |        |
| _1_   | List all   | officers, directors, trustees, foundati   |   |   |                   | npensation    |               | Contribution                                      |                     |  |                    |        |
|       |  | (a) Name and address  | (b) Title, and average<br>hours per week<br>devoted to position |   | (If not paid, emp |               | emplo         | employee benefit plans<br>d deferred compensation |                     | (e) Expense account,<br>other allowances |                    |        |
|       | a L. Rud   |   | Presid  | ent   |                   |               |               |   |                     |  |                    |        |
|       | sox 423, I<br>ice L. Rui   | Edmond, OK 73083  | 9.3   |   |                   | 0             |               |   | 0                   |  |                    | 0      |
|       |  | Edmond, OK 73083  | Secret  | ary/Treasurer                                   |                   | 0             |               |   | 0                   |  |                    | 0      |
| 1.0.2 | JOX 420, 1   | amond, ox 7000  | <del>                                      </del>               |   |                   | <u>_</u>      |               |   |                     |  |                    |        |
|       |  |   |   |   |                   |               |               |   |                     |  |                    |        |
|       |  |   |   |   |                   |               |               |   |                     |  |                    |        |
|       | Compe  | ensation of five highest-paid employe   | ees (oth  | er than tho                                     | se incl           | uded on li    | ne 1—         | see instr   | uctions             | s). If n                                 | one,               | enter  |
| _     | "NONE  |   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,                         |   |                   |               |               |   |                     |  |                    |        |
|       | (a) Name a   | and address of each employee paid more than \$50,   | 000   | (b) Title, and a<br>hours per v<br>devoted to p | veek              | (c) Compe     | nsation       | (d) Contrib<br>employee<br>plans and<br>compen    | benefit<br>deferred |  | ense ac<br>allowar |        |
| NONE  |  |   |   |   |                   |               |               |   |                     | -  |                    |        |
|       |  |   |   |   |                   |               |               |   |                     |  |                    |        |
|       |  |   |   |   |                   |               |               |   |                     |  |                    |        |
|       |  |   |   |   |                   |               |               |   |                     |  |                    |        |
|       |  |   | <b></b>   |   |                   |               |               |   |                     |  |                    |        |
|       |  |   |   |   |                   |               | -             |   |                     |  |                    |        |
|       |  |   |   |   |                   |               |               |   |                     |  |                    |        |
|       |  |   |   |   |                   |               |               | j   |                     |  |                    |        |
| Total | number   | of other employees paid over \$50,000   |   | <u> </u>  |                   | L             |               | <u> </u>  | . ▶                 |  | 0                  |        |
|       |  | C. C. S. Chiployeco paid over 400,000   |   | <u> </u>  | • •               |               |               | <del></del>                                       |                     | Form QQ                                  |                    | (2015) |

| Five highest-pold independent contractors for professional services (see Instructions). If none, enter "NONE."  (a) Name and address of each person pad more than \$50,000 (b) Type of service (c) Compensation NONE    Total number of others receiving over \$50,000 for professional services   • • • • • • • • • • • • • • • • • •  | Par  | Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Em and Contractors (continued) | ployees,                       |
|---|------|--|--------------------------------|
| Total number of others receiving over \$50,000 for professional services > 0  Port IX-A Summary of Direct Charitable Activities  Let 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  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  All other program-related investments. See instructions.  3  Total. Add lines 1 through 3 > | 3    |  | "                              |
| 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 other damage served, conferences convened, research papers produced, etc  1 N/A  2  |      | (a) Name and address of each person paid more than \$50,000 (b) Type of service                                  | (c) Compensation               |
| Expenses  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   | NON  |  | <del></del>                    |
| Expenses  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   |      |  |                                |
| Expenses  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   |      |  |                                |
| Expenses  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   |      |  |                                |
| Expenses  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   |      |  |                                |
| Expenses  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   |      |  |                                |
| Expenses  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   |      |  |                                |
| Expenses  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   |      |  |                                |
| Expenses  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   |      |  |                                |
| Expenses  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   | Tota | 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 N/A  2   |      |  |                                |
| organizations and other beneficianes served, conferences convened, research papers produced, etc  1 N/A  2  | Par  | ILIXEA 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  |      |  | Expenses                       |
| 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.  All other program-related investments. See instructions.  3  All other program-related investments. See instructions.   | 1    | N/A  |                                |
| 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.  All other program-related investments. See instructions.  3  All other program-related investments. See instructions.   |      |  |                                |
| 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.  All other program-related investments. See instructions.  3  All other program-related investments. See instructions.   |      |  |                                |
| 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   | 2    |  |                                |
| 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.  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  Amount  All other program-related investments. See instructions.  3  Total. Add lines 1 through 3  | 3    |  |                                |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  Amount  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  Amount  All other program-related investments. See instructions.  3  Total. Add lines 1 through 3  | A    |  |                                |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2.  Amount  Amount  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  Amount  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  Amount  All other program-related investments. See instructions.  3  Total. Add lines 1 through 3  | Par  | t IX-B Summary of Program-Related Investments (see instructions)   | · · · · · ·                    |
| All other program-related investments. See instructions.  3  Total. Add lines 1 through 3   | De   |  | 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   |      |  |                                |
| All other program-related investments. See instructions.  3  Total. Add lines 1 through 3   |      |  |                                |
| 3   | 2    |  |                                |
| 3   |      |  |                                |
| 3   |      |  |                                |
| Total. Add lines 1 through 3  |      | other program-related investments. See instructions.   |                                |
|   | 3    |  |                                |
|   |      |  |                                |
|   | Tota | Add lines 1 through 3  |                                |
|   |      |  | 0<br>Form <b>990-PF</b> (2015) |

| 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:   |           |                        |
| а    | Average monthly fair market value of securities   | 1a        | 1,187,236              |
| b    | Average of monthly cash balances  | 1b        | 97,102                 |
| C    | Fair market value of all other assets (see instructions)  | 1c        |                        |
| d    | <b>Total</b> (add lines 1a, b, and c)   | 1d        | 1,284,338              |
| 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         | 0                      |
| 3    | Subtract line 2 from line 1d  | 3         | 1,284,338              |
| 4    | Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see  |           |                        |
|      | instructions)   | 4         | 19,265                 |
| 5    | Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4  | 5         | 1,265,073              |
| 6    | Minimum investment return. Enter 5% of line 5   | 6         | 63,254                 |
| Part | XI 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         | 63,254                 |
| 2a   | Tax on investment income for 2015 from Part VI, line 5 2a 558   |           |                        |
| b    | Income tax for 2015. (This does not include the tax from Part VI.) 2b 0   |           |                        |
| C    | Add lines 2a and 2b   | 2c        | 558                    |
| 3    | Distributable amount before adjustments. Subtract line 2c from line 1   | 3         | 62,696                 |
| 4    | Recoveries of amounts treated as qualifying distributions   | 4         | 0                      |
| 5    | Add lines 3 and 4   | 5         | 62,696                 |
| 6    | Deduction from distributable amount (see instructions)  | 6         | 0                      |
| 7    | Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII,   |           |                        |
|      | line 1  | 7         | 62,696                 |
| Part | XII Qualifying Distributions (see instructions)   |           |                        |
| 1    | Amounts paid (including administrative expenses) to accomplish chantable, etc., purposes:   |           |                        |
| а    | Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26   | 1a        | 74,088                 |
| þ    | Program-related investments—total from Part IX-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:  |           |                        |
| а    | Suitability test (prior IRS approval required)  | 3a        |                        |
| þ    | 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         | 74,088                 |
| 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         | 558                    |
| 6    | Adjusted qualifying distributions. Subtract line 5 from line 4  | 6         | 73,530                 |
|      | Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.          | g whether | the foundation         |
|      |   | For       | m <b>990-PF</b> (2015) |

| Part   | VIII Undistributed Income (see instruction  | ons)          |                                       |             |                           |
|--------|---|---------------|---------------------------------------|-------------|---------------------------|
| 1      | Distributable amount for 2015 from Part XI,   | (a)<br>Corpus | (b)<br>Years prior to 2014            | (c)<br>2014 | <b>(d)</b><br>2015        |
|        | line 7  |               | · · · · · · · · · · · · · · · · · · · |             | 62,696                    |
| 2      | Undistributed income, if any, as of the end of 2015:  |               |                                       |             |                           |
| а      | Enter amount for 2014 only  |               |                                       | 53,038      |                           |
| b      | Total for prior years: 20 ,20 ,20   |               | 0                                     |             |                           |
| 3      | Excess distributions carryover, if any, to 2015:  |               |                                       |             | 1                         |
| а      | From 2010   |               |                                       |             |                           |
| b      | From 2011   |               |                                       |             | ı                         |
| C      | From 2012   |               |                                       |             |                           |
| d      | From 2013   |               |                                       |             |                           |
| e      | From 2014   |               |                                       |             | ı                         |
| f      | Total of lines 3a through e   | 0             |                                       |             |                           |
| 4      | Qualifying distributions for 2015 from Part XII,  |               |                                       |             |                           |
| •      | line 4: ▶ \$ 74,088   |               |                                       |             | 1                         |
| _      | Applied to 2014, but not more than line 2a.   | •             |                                       | 53,038      |                           |
| a<br>b | Applied to 2014, but not more than line 2a.  Applied to undistributed income of prior years |               |                                       | 33,030      | <del></del>               |
| IJ     | (Election required—see instructions)  |               | _                                     |             | į                         |
| _      | •   | ·····         | 0                                     |             |                           |
| С      | Treated as distributions out of corpus (Election required—see instructions)                 |               |                                       |             |                           |
|        | •   | 0             |                                       |             |                           |
| d      | Applied to 2015 distributable amount  |               |                                       |             | 21,050                    |
| е      | Remaining amount distributed out of corpus  | 0             |                                       |             |                           |
| 5      | Excess distributions carryover applied to 2015  | 0             |                                       |             | 0                         |
|        | (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  |               | o                                     |             |                           |
| C      | Enter the amount of pnor years' undistributed   |               |                                       |             |                           |
| _      | income for which a notice of deficiency has   |               |                                       | į           |                           |
|        | been issued, or on which the section 4942(a)  |               |                                       |             |                           |
|        | tax has been previously assessed  |               | ol                                    |             | 1                         |
| d      | Subtract line 6c from line 6b. Taxable  |               |                                       |             |                           |
| _      | amount—see instructions   |               | o                                     |             |                           |
|        | Undistributed income for 2014. Subtract line  |               |                                       |             |                           |
| •      | 4a from line 2a. Taxable amount—see   |               |                                       |             | I                         |
|        | instructions  |               |                                       | اه          |                           |
| f      | Undistributed income for 2015. Subtract lines   |               |                                       |             |                           |
| •      | 4d and 5 from line 1. This amount must be   | ł             |                                       |             |                           |
|        | distributed in 2016   |               |                                       | 1           | 41,646                    |
| 7      | Amounts treated as distributions out of corpus  |               |                                       |             | 11,010                    |
| •      | to satisfy requirements imposed by section  |               |                                       |             |                           |
|        | 170(b)(1)(F) or 4942(g)(3) (Election may be   |               |                                       |             |                           |
|        | required—see instructions)  | ٥ ا           |                                       |             |                           |
| 8      | Excess distributions carryover from 2010 not  | ļ             |                                       |             |                           |
| Ū      | applied on line 5 or line 7 (see instructions) .  | o             |                                       |             |                           |
| 9      | Excess distributions carryover to 2016.   |               |                                       |             |                           |
|        | Subtract lines 7 and 8 from line 6a   | 0             |                                       |             | 1                         |
| 10     | Analysis of line 9:   |               |                                       |             | 1                         |
| а      | Excess from 2011  |               | }                                     |             | ,                         |
| b      | Excess from 2012  |               |                                       |             | ı                         |
| C      | Excess from 2013  | <u> </u>      |                                       |             | 1                         |
| d      | Excess from 2014  |               |                                       |             | 1                         |
| е      | Excess from 2015  |               |                                       |             |                           |
|        |   | <del></del>   |                                       |             | Form <b>990-PF</b> (2015) |

| Part : | XIV Private Operating Founda  | tions (see instru                    | ctions and Part    | VII-A, question 9     | N/A                                   |   |
|--------|---|--------------------------------------|--------------------|-----------------------|---------------------------------------|---|
| 1a·    | If the foundation has received a ruling   |                                      |                    |                       |                                       |   |
|        | foundation, and the ruling is effective fo  | r 2015, enter the da                 | te of the ruling . | ▶ [                   |                                       |   |
| b      | Check box to indicate whether the four  |                                      | operating founda   |                       | ction 🗌 4942(j)                       | (3) or 4942(j)(5)                       |
| 2a     | Enter the lesser of the adjusted net income from Part I or the minimum  | Tax year                             |                    | Prior 3 years         |                                       | (e) Total                               |
|        | investment return from Part X for each year listed  | (a) 2015                             | <b>(b)</b> 2014    | (c) 2013              | (d) 2012                              |   |
| b      | 85% of line 2a  |                                      |                    |                       |                                       |   |
| С      | Qualifying distributions from Part XII, line 4 for each year listed   |                                      |                    |                       |                                       |   |
| d      | Amounts included in line 2c not used directly for active conduct of exempt activities   |                                      |                    |                       |                                       |   |
| e      | Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c                                     |                                      |                    |                       |                                       |   |
| 3      | Complete 3a, b, or c for the alternative test relied upon:  |                                      |                    |                       |                                       |   |
| а      | "Assets" alternative test-enter:  |                                      |                    |                       |                                       |   |
|        | (1) Value of all assets   |                                      |                    |                       |                                       |   |
|        | (2) Value of assets qualifying under section 4942(j)(3)(B)(i)   |                                      |                    |                       |                                       |   |
| D      | "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed                                  |                                      |                    |                       |                                       |   |
| C      | "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) |                                      |                    |                       |                                       |   |
|        | (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)                                      |                                      |                    |                       |                                       |   |
|        | (3) Largest amount of support from an exempt organization   |                                      |                    |                       |                                       |   |
|        | (4) Gross investment income   |                                      |                    |                       |                                       | <u> </u>                                |
| Part   |   |                                      |                    | the foundation h      | ad \$5,000 or m                       | ore in assets at                        |
|        | any time during the year-   |                                      | IS.)               |                       |                                       |   |
| 1_     | Information Regarding Foundation  |                                      | dad mare then O    | V of the total contr  | ibutione received                     | by the foundation                       |
| а      | List any managers of the foundation before the close of any tax year (but of  |                                      |                    |                       |                                       | by the loundation                       |
|        | ce L. Ruder   | 1004                                 |                    | al. of a same motion  | · /or op ogvolky le                   | argo portion of the                     |
| b      | List any managers of the foundation ownership of a partnership or other e   |                                      |                    |                       |                                       | arge portion or the                     |
| NONE   | ownership of a partnership of other c   | riaty, or willow the                 | TOUTION THAT I     | 1070 Or ground, and   |                                       |   |
| NONE 2 | Information Regarding Contribution  | n. Grant. Gift. Loa                  | n. Scholarship.    | etc Programs:         |                                       |   |
| _      | Check here ▶ ☑ if the foundation unsolicited requests for funds. If the other conditions, complete items 2a,                                      | only makes contr<br>foundation makes | ibutions to prese  | elected charitable    | organizations and or individuals or o | d does not accept<br>rganizations under |
| а      | The name, address, and telephone no   | umber or e-mail ad                   | ldress of the pers | son to whom applica   | ations should be                      | addressed:                              |
| b      | The form in which applications should   | d be submitted and                   | d information and  | materials they sho    | uld include:                          | 11, 94, 94,                             |
| С      | Any submission deadlines:   |                                      |                    |                       |                                       |   |
| d      | Any restrictions or limitations on av   | wards, such as b                     | y geographical a   | areas, charitable fie | elds, kinds of ins                    | stitutions, or other                    |

| Part XV Supplementary Information (con | tinued)  |                      | <del></del>         |         |
|--|--|----------------------|---------------------|---------|
| 3 Grants and Contributions Paid During | the Year or Approv   | ed for Fut           | ure Payment         |         |
| Recipient                              | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or | Amount  |
| Name and address (home or business)    | any foundation manager<br>or substantial contributor                           | recipient            | contribution        | Amount  |
| a Paid during the year                 |  |                      |                     |         |
|  |  |                      |                     |         |
|  |  |                      |                     |         |
| CCC ATTACHMENT L(Continuedian Charts)  |  |                      |                     |         |
| SEE ATTACHMENT I (Continuation Sheets) |  |                      |                     |         |
|  |  |                      |                     |         |
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|  |  |                      |                     |         |
| Total                                  | <u> </u>   | SEE CON              | ITINUATION SHEETS   | 3a 74,0 |
| <b>b</b> Approved for future payment   |  | SEE CON              | THOATION ONLE TO    | 74,0    |
|  |  |                      |                     | j       |
| NONE                                   | į  |                      |                     |         |
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| Total                                  |  | <u> </u>             |                     | 3b      |

| Ente  | k aross    | s amounts unless otherwise indicated.   | Unrelated bu   | Isiness income                          | Excluded by section                              | on 512, 513, or 514                   |   |
|-------|------------|---|--|---|--|---------------------------------------|---|
| Litte | ar gross   | s amounts unless otherwise indicated.   | (a)<br>Business code   | (b)<br>Amount                           | (c)<br>Exclusion code                            | (d)<br>Amount                         | (e) Related or exempt function income (See instructions.) |
| 1     | _          | am service revenue:   |  |   | L  | ·-··                                  |   |
|       | a _        |   |  |   |  |                                       |   |
|       | b _        |   |  |   |  | <del> </del>                          | n   |
|       | с<br>—     | <del>.</del>  |  |   |  |                                       |   |
|       | е —        |   |  | <u> </u>                                |  |                                       |   |
|       | ř –        | · · · · · · · · · · · · · · · · · · ·   |  |   | <del>                                     </del> |                                       |   |
|       | , <u>-</u> | ees and contracts from government agencies  |  |   |  |                                       |   |
| 2     |            | bership dues and assessments  |  |   |  |                                       |   |
| 3     |            | st on savings and temporary cash investments  | -  |   | 14   | 16                                    |   |
| 4     |            | ends and interest from secunties  |  |   | 14   | 27,537                                |   |
| 5     |            | ental income or (loss) from real estate:  |  |   | 17   | 21,001                                |   |
| •     |            | ebt-financed property   |  |   |  | <del></del>                           |   |
|       |            | ot debt-financed property   |  |   |  |                                       |   |
| 6     |            | ental income or (loss) from personal property   |  |   | 1  |                                       |   |
| 7     |            | rinvestment income  |  |   |  |                                       |   |
| 8     | Gain o     | or (loss) from sales of assets other than inventory                                     |  | - A 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 18   | 28,275                                |   |
| 9     |            | ncome or (loss) from special events   |  | M                                       |  |                                       |   |
| 10    | Gross      | s profit or (loss) from sales of inventory  |  |   |  |                                       |   |
| 11    | Other      | revenue: a  |  |   |  |                                       |   |
|       | b          |   |  |   |  |                                       |   |
|       | С          |   |  |   |  |                                       |   |
|       | d _        |   |  |   |  | · · · · · · · · · · · · · · · · · · · |   |
|       | e _        |   |  |   |  |                                       |   |
| 12    | Subto      | otal. Add columns (b), (d), and (e)   |  | 0                                       |  | 55,828                                |   |
|       |            | . Add line 12, columns (b), (d), and (e)  |  |   |  | 13                                    | 55,828  |
|       |            | sheet in line 13 instructions to verify calculation                                     |  |   |  |                                       |   |
|       | rt XVI     |   |  |   |  |                                       |   |
| Lin   | ne No.     |   |  |   |  |                                       |   |
|       | ▼          | Explain below how each activity for which accomplishment of the foundation's exempt put | ncome is report<br>rposes (other that  | orted in column<br>n by providing fun   | (e) of Part XVI-<br>ds for such purpo            | A contributed in oses). (See instruc  | nportantly to the tions.)                                 |
|       | ·          | Explain below how each activity for which accomplishment of the foundation's exempt put | rposes (other that   | orted in column<br>n by providing fun   | (e) of Part XVI-<br>ds for such purpo            | A contributed in oses). (See instruc  | nportantly to the tions.)                                 |
|       | ·          |   | rposes (other tha  | orted in column<br>in by providing fun  | (e) of Part XVI-<br>ds for such purpo            | A contributed in oses). (See instruc  | nportantly to the   |
|       | ·          |   | income is reporposes (other that   | orted in column<br>n by providing fun   | (e) of Part XVI-<br>ds for such purpo            | A contributed in oses). (See instruc  | nportantly to the   |
|       | ·          |   | income is rep<br>poses (other tha  | orted in column<br>n by providing fun   | (e) of Part XVI-<br>ds for such purpo            | A contributed in oses). (See instruc  | nportantly to the   |
|       | ·          |   | income is rep<br>rposes (other tha   | orted in column                         | (e) of Part XVI-<br>ds for such purpo            | A contributed in oses). (See instruc  | nportantly to the   |
|       | ·          |   | income is reporposes (other that   | orted in column                         | (e) of Part XVI-<br>ds for such purpo            | A contributed in oses). (See instruc  | nportantly to the   |
|       | ·          |   | income is repr<br>poses (other tha   | orted in column                         | (e) of Part XVI-<br>ds for such purpo            | A contributed in oses). (See instruc  | nportantly to the   |
|       | ·          |   | Income is reproses (other that   | orted in column                         | (e) of Part XVI-<br>ds for such purpo            | A contributed in oses). (See instruc  | nportantly to the   |
|       | ·          |   | income is rep<br>rposes (other tha   | orted in column                         | (e) of Part XVI-                                 | A contributed in oses). (See instruc  | nportantly to the   |
|       | ·          |   | Income is rep<br>rposes (other tha   | orted in column                         | (e) of Part XVI-                                 | A contributed in oses). (See instruc  | nportantly to the   |
|       | ·          |   | Income is reproposes (other that   | orted in column                         | (e) of Part XVI-                                 | A contributed in oses). (See instruc  | nportantly to the   |
|       | ·          |   | Income is reproposes (other that   | orted in column                         | (e) of Part XVI-                                 | A contributed in oses). (See instruc  | nportantly to the   |
|       | ·          |   | Income is reporposes (other that   | orted in column                         | (e) of Part XVI-                                 | A contributed in oses). (See instruc  | mportantly to the tions.)                                 |
|       | ·          |   | Income is reporposes (other that   | orted in column                         | (e) of Part XVI-                                 | A contributed in oses). (See instruc  | mportantly to the tions.)                                 |
|       | ·          |   | Income is reproposes (other that   | orted in column                         | (e) of Part XVI-<br>ds for such purpo            | A contributed in oses). (See instruc  | nportantly to the tions.)                                 |
|       | ·          |   | Income is reported to the income inc | orted in column                         | (e) of Part XVI-                                 | A contributed in oses). (See instruc  | mportantly to the tions.)                                 |
|       | ·          |   | Income is reporposes (other than   | orted in column                         | (e) of Part XVI-                                 | A contributed in oses). (See instruc  | nportantly to the tions.)                                 |
|       | ·          |   | Income is reproposes (other tha  | orted in column                         | (e) of Part XVI-                                 | A contributed in oses). (See instruc  | mportantly to the tions.)                                 |
|       | ·          |   | Income is repprposes (other that   | orted in column                         | (e) of Part XVI-<br>ds for such purpo            | A contributed in oses). (See instruc  | mportantly to the tions.)                                 |
|       | ·          |   | Income is reporposes (other that   | orted in column by providing fun        | (e) of Part XVI-<br>ds for such purpo            | A contributed in oses). (See instruc  | mportantly to the tions.)                                 |
|       | ·          |   | Income is reporposes (other than   | orted in column by providing fun        | (e) of Part XVI-<br>ds for such purpo            | A contributed in oses). (See instruc  | mportantly to the tions.)                                 |
|       | ·          |   | Income is reporposes (other than   | orted in column by providing fun        | (e) of Part XVI-<br>ds for such purpo            | A contributed in poses). (See instruc | mportantly to the tions.)                                 |

| Part 2        | (VII             |  | n Regarding Trar<br>ganizations               | nsfers To and Trai  | nsactio                | ns and R                                   | elationship                   | s With No                | oncharit                                      | able                |                     |
|---------------|------------------|--|---|---|------------------------|--|-------------------------------|--------------------------|---|---------------------|---------------------|
| !             | ın sec           | e organization of                              | directly or indirectly                        | engage in any of the<br>section 501(c)(3) orga                  |                        |  |                               |                          |   | Y                   | es No               |
|               | (1) Ca           | ash  | _   | o a noncharitable exe   |                        |  |                               |                          | _   | (1)                 | 1                   |
| b             | Other<br>(1) Sa  |  |   | empt organization   |                        |  |                               |                          | <u>it</u>                                     | )(2)<br>)(1)        | 7                   |
| 1             | (3) Re<br>(4) Re | ental of facilities<br>eimbursement a          | , equipment, or othe rrangements              | able exempt organiza  | <br>                   |  |                               |                          | <u>11</u>                                     | (2)<br>(3)<br>(4)   | 1                   |
| C             | (6) Pe<br>Sharii | erformance of senger of facilities, e          | ervices or membersl<br>equipment, mailing li  | nip or fundraising solists, other assets, or p                  | icitations<br>paid emp | s<br>oloyees .                             |                               |                          | 1k  | (5)<br>(6)<br>C     | <i>I</i>            |
|               | value<br>value   | of the goods, o                                | ther assets, or servi<br>on or sharing arrang | s," complete the folloces given by the represent, show in colu  | orting fo<br>mn (d) th | undation.<br>e value of                    | If the founda<br>the goods, o | tion receiv              | ed less th<br>s, or servi                     | an fai<br>ces re    | r market<br>ceived. |
| (a) Line      | no (1            | b) Amount involved                             | (c) Name of nonc                              | hantable exempt organizat                                       | юп                     | (d) Descri                                 | otion of transfers            | , transactions           | , and sharing                                 | arrang              | ements              |
|               |                  | · · · · · · · · · · · · · · · · · · ·          |   |   |                        | · · · · · · · · · · · · · · · · · · ·      |                               |                          |   |                     |                     |
|               |                  |  |   |   |                        | -  |                               |                          |   |                     |                     |
|               |                  |  |   |   |                        |  |                               |                          |   |                     |                     |
|               |                  |  |   |   |                        |  |                               |                          |   |                     |                     |
|               |                  | ·····  |   |   |                        |  |                               |                          |   |                     |                     |
|               | is the           | foundation dure                                | ectly or indirectly af                        | filiated with, or relate  | ed to, o               | ne or more                                 | e tax-exempt                  | organizat                | ions  |                     |                     |
|               | descr            | ibed in section to s," complete the            | 501(c) of the Code (c<br>e following schedule | other than section 50   | )1(c)(3)) c            |  | n 527?                        |                          | • • 🗆   |                     | ☑ No                |
| N/A           |                  | (a) Name of orgar                              | nization                                      | (b) Type of org   | ganization             |  | (C                            | ) Description            | or relationsn                                 | р                   |                     |
|               |                  |  |   |   |                        |  |                               |                          |   |                     |                     |
| Sign<br>Here  | corre            | r penalties of penjury, ct, and complete. Decl | laration of preparer (other the               | ed this return, including according taxpayer) is based on all i | nformation             | chedules and of which prepared cretary/Tre | rer has any knowl             | edge.                    | May the IRS with the prep<br>(see instruction | discuss<br>arer sho | this return         |
| Paid<br>Prepa |                  | Print/Type prepare                             |   | Preparer's signature  | ride                   |  | Date                          | Check<br>self-err        |   | l                   |                     |
| Use C         |                  | Firm's name >                                  |   |   |                        |  |                               | irm's EIN ▶<br>Phone no. |   | 000-                | <b>PF</b> (2015     |

#### 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

2015

Employer identification number

|          | dence Foundation  | ·  |  |   |   |   |   |  |  | 27-2931971   | _ |
|----------|---|--|--|---|---|---|---|--|--|--|---|
| Organi   | zation type (check or   | ne):   |  |   |   |   |   |  |  |  |   |
| Filers o | ıf:   | Section  | ;  |   |   |   |   |  |  |  |   |
| Form 9   | 90 or 990-EZ  | <b>501</b> (   | >)(  | ) (enter  | number) org   | ganizatior  | 1   |  |  |  |   |
|          |   | <b>4947</b>  | (a)(1) n                                     | onexempt o  | haritable tr  | rust <b>not</b> tr                                      | eated a   | s a priv                                       | ate fou                                  | ındation   |   |
|          |   | □ 527  | oolitica                                     | ıl organizatio  | on  |   |   |  |  |  |   |
| Form 9   | 90-PF   | <b></b> 501(   | c)(3) ex                                     | empt privat   | e foundatio   | n   |   |  |  |  |   |
|          |   | ☐ 4947   | (a)(1) n                                     | onexempt o  | :haritable tr   | rust treate   | ed as a p   | orivate  | founda                                   | tion   |   |
|          |   |  |  | -   |   |   |   |  |  |  |   |
|          |   | ☐ 201(i  | <i>5)</i> (3) (a)                            | xable privat  | e louridatio  | T1  |   |  |  |  |   |
| Oh a ala | £   |  | ٠. المام . ١                                 | Damanal Dad   | 6   | aial Dula   | ·   |  |  |  | _ |
|          |   |  | -  |   | <del>-</del>  |   |   | Genera   | l Rule a                                 | and a Special Rule. See  |   |
| Genera   | il Rule   |  |  |   |   |   |   |  |  |  |   |
| <b>7</b> | 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.   |  |  |   |   |   |   |  |  |  |   |
| Specia   | l 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. |  |  |   |   |   | 90 or 990-EZ), Part II, line itions of the greater of (1) |  |  |  |   |
|          | contributor, during t   | the year, to   | tal con                                      | ntributions o   | f more than   | \$1,000 e   | exclusive   | ly for r                                       | eligious                                 | t received from any one<br>s, charitable, scientific,<br>nplete Parts I, II, and III.                                    |   |
|          | contributor, during to<br>contributions totale<br>during the year for a<br>General Rule applie  | the year, o<br>d more tha<br>an <i>exclusi</i> v<br>es to this o | ontribu<br>an \$1,0<br>rely relig<br>organiz | utions <i>exclus</i><br>000. If this b<br>igious, chari<br>cation becau | nively for release is checked table, etc., see it receive | ligious, cl<br>ed, enter<br>purpose.<br>ed <i>nonex</i> | haritable<br>here the<br>Do not of<br>clusively           | e, etc.,  <br>e total (<br>comple<br>/ religio | purpos<br>contrib<br>ete any<br>ous, cha | at received from any one es, but no such utions that were received of the parts unless the aritable, etc., contributions |   |
| Cautio   | n. An organization tha  | at is not co   | vered l                                      | by the Gene   | ral Rule an   | d/or the S  | Special f   | Rules c  | loes no                                  | ot 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 organization Employer identification number
The Credence Foundation 27-2931971

| Part I     | <b>Contributors</b> (see instructions). Use duplicate co                | pies of Part I if additional space is | needed.   |
|------------|---|---------------------------------------|---|
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                       | (c)<br>Total contributions            | (d)<br>Type of contribution   |
| 1          | Terrence L. Ruder Revocable Trust  3700 Redmont Trace  Edmond, OK 73034 | \$\$                                  | Person Payroll Noncash  (Complete Part II for noncash contributions.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                       | (c)<br>Total contributions            | (d)<br>Type of contribution   |
|            |   | \$                                    | Person  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                       | (c)<br>Total contributions            | (d)<br>Type of contribution   |
|            |   | \$                                    | Person  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                       | (c)<br>Total contributions            | (d)<br>Type of contribution   |
|            |   | \$                                    | Person Payroli Noncash  (Complete Part II for noncash contributions.) |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                       | (c)<br>Total contributions            | (d)<br>Type of contribution   |
|            |   | \$                                    | Person  |
| (a)<br>No. | (b)<br>Name, address, and ZIP + 4                                       | (c)<br>Total contributions            | (d)<br>Type of contribution   |
|            |   | \$                                    | Person  |

Name of organization Employer identification number
The Credence Foundation 27-2931971

| Noncash Property (see instructions). Use duplicate co | opies of Part II if additional spac   | e is needed.   |
|---|---|--|
| (b)  Description of noncash property given            | (c) FMV (or estimate) (see instructions)  | (d)<br>Date received   |
| 16.7249 shares of Pfizer common stock                 |   | 40/00/004F   |
| (b)  Description of noncash property given            | (c) FMV (or estimate) (see instructions)  | 12/23/2015<br>(d)<br>Date received   |
|   | \$  |  |
| (b)  Description of noncash property given            | (c) FMV (or estimate) (see instructions)  | (d)<br>Date received   |
|   | \$ s  |  |
| (b) Description of noncash property given             | (c) FMV (or estimate) (see instructions)  | (d)<br>Date received   |
|   | \$  |  |
| (b)  Description of noncash property given            | (c) FMV (or estimate) (see instructions)  | (d)<br>Date received   |
|   | s   |  |
| (b)<br>Description of noncash property given          | (c)<br>FMV (or estimate)<br>(see instructions)  | (d)<br>Date received   |
|   |   |  |
|   | Description of noncash property given  (b)  Description of noncash property given | Description of noncash property given  (b) Description of noncash property given  (c) FMV (or estimate) (see instructions)  (d) FMV (or estimate) (see instructions)  (e) FMV (or estimate) (see instructions)  (c) FMV (or estimate) (see instructions)  (d) FMV (or estimate) (see instructions)  (e) FMV (or estimate) (see instructions)  (f) FMV (or estimate) (see instructions)  (g) FMV (or estimate) (see instructions)  (h) Description of noncash property given  (g) FMV (or estimate) (see instructions)  (h) Description of noncash property given  (c) FMV (or estimate) (see instructions) |

| Name of or                                   | ganization   |  |   |                                 | Employer Identification number                                 |  |  |  |  |
|--|--|--|---|---------------------------------|--|--|--|--|--|
|  | nce Foundation   |  |   |                                 | 27-2931971   |  |  |  |  |
| Part III<br>N/A                              | Exclusively religious, charitable, etc. (10) that total more than \$1,000 for the the following line entry. For organization contributions of \$1,000 or less for the Use duplicate copies of Part III if additional transfer or the second contributions. | ne year from any<br>ns completing Pa<br>year. (Enter this in | one contributor. one contributor. on the total of the total of the total of the total one | Complete<br>I of <i>exclusi</i> | columns (a) through (e) and ively religious, charitable, etc., |  |  |  |  |
| (a) No.                                      |  | •  |   |                                 |  |  |  |  |  |
| from<br>Part I                               | (b) Purpose of gift  | (c) Use  | of gift   | (d) Des                         | scription of how gift is held                                  |  |  |  |  |
|  |  |  |   |                                 |  |  |  |  |  |
|  |  |  |   |                                 |  |  |  |  |  |
| <u>                                     </u> |  | (e) Trans  | fer of gift   | <u></u>                         |  |  |  |  |  |
|  | Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee   |  |   |                                 |  |  |  |  |  |
|  |  |  |   |                                 |  |  |  |  |  |
|  |  |  |   |                                 |  |  |  |  |  |
|  |  |  |   |                                 |  |  |  |  |  |
| (a) No.<br>from<br>Part I                    | (b) Purpose of gift  | (c) Use  | of gift   | (d) Des                         | scription of how gift is held                                  |  |  |  |  |
|  |  |  |   |                                 |  |  |  |  |  |
|  |  |  |   |                                 |  |  |  |  |  |
|  |  |  |   |                                 |  |  |  |  |  |
|  | (e) Transfer of gift   |  |   |                                 |  |  |  |  |  |
|  |  |  |   |                                 |  |  |  |  |  |
| ļ  | Transferee's name, address, and  | ZIP + 4  | Relationship of transferor to transferee  |                                 |  |  |  |  |  |
| ŀ  |  |  |   |                                 |  |  |  |  |  |
| 1  |  |  |   |                                 |  |  |  |  |  |
| [  |  |  |   |                                 |  |  |  |  |  |
| (a) No.                                      | <b>4.5</b>   | 4 > 4 >  | 1   | 455                             |  |  |  |  |  |
| from<br>Part i                               | (b) Purpose of gift  | (c) Use  | or gift   | (d) Des                         | scription of how gift is held                                  |  |  |  |  |
|  |  |  |   | · · · · · · · ·                 |  |  |  |  |  |
|  |  |  |   |                                 |  |  |  |  |  |
|  |  |  |   |                                 |  |  |  |  |  |
| L  |  |  |   |                                 |  |  |  |  |  |
|  | (e) Transfer of gift   |  |   |                                 |  |  |  |  |  |
|  | Transferee's name, address, and  | ZIP + 4  | Relation  | ship of tra                     | nsferor to transferee  |  |  |  |  |
| -  |  |  | T   |                                 |  |  |  |  |  |
|  |  |  |   |                                 |  |  |  |  |  |
|  |  |  |   |                                 |  |  |  |  |  |
|  |  | · · · · · · · · · · · · · · · · · · ·                        |   |                                 |  |  |  |  |  |
| (a) No.<br>from<br>Part I                    | (b) Purpose of gift  | (c) Use  | of gift   | (d) Des                         | scription of how gift is held                                  |  |  |  |  |
|  |  |  |   |                                 |  |  |  |  |  |
|  |  | *-**   |   |                                 |  |  |  |  |  |
|  |  |  |   |                                 |  |  |  |  |  |
| -  | (e) Transfer of gift   |  |   |                                 |  |  |  |  |  |
|  | (c) transier of Sur  |  |   |                                 |  |  |  |  |  |
|  | Transferee's name, address, and  | ZIP + 4  | Relation  | ship of tra                     | nsferor to transferee  |  |  |  |  |
| Γ  |  |  |   |                                 |  |  |  |  |  |
|  |  |  |   |                                 | ***************************************                        |  |  |  |  |
|  |  |  |   |                                 |  |  |  |  |  |

# Part XV Supplemental Information

| 3 Grants and Contributions Paid D       |                                | on)        |   |   |
|---|--------------------------------|------------|---|---|
| , | If recipient is an individual, |            |   |   |
| Recipient                               | show any relationship to       | Foundation |   |   |
|   | any foundation manager         | status of  | Purpose of grant or                     |   |
| Name and address (home or business)     | or substantial contributor     | recipient  | contribution                            | Amount                                  |
| a Paid during the year                  |                                |            |   |   |
| Peggy Anderson                          | None                           | N/A        | Payment for insurance                   | 558.83                                  |
| 12401 Sweetwater Drive                  |                                |            |   |   |
| Yukon, OK 73099                         |                                |            |   |   |
| Dallaia Astroina                        | Nana                           | 21/4       | Down out for housing                    | 300.00                                  |
| Delicia Antwine                         | None                           | N/A        | Payment for housing                     | 300.00                                  |
| 7111 Michelle Lane                      |                                |            |   |   |
| Oklahoma City, OK 73127                 |                                |            |   |   |
| Ron Baker                               | None                           | N/A        | Payments for housing                    | 3,009.00                                |
|   | None                           | 1,77       | Tayments for nousing                    | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 3213 West Main Street, Ste 323          |                                | ļ          |   |   |
| Rapid City, SD 57702                    |                                |            |   |   |
| Miesha Benson                           | None                           | N/A        | Payment for housing                     | 300.00                                  |
| 1701 NW 146th Street, Apt 330           |                                |            | 1                                       |   |
| Oklahoma City, OK 73118                 |                                |            |   |   |
| Okidiioilid City, Ok 75116              |                                |            | i                                       |   |
| Lilian Biswas                           | None                           | N/A        | Payment for housing                     | 671.75                                  |
| 1115 N Blackwelder                      |                                |            |   |   |
| Edmond, OK 73034                        |                                |            |   |   |
| Lumona, ok 73034                        |                                |            |   |   |
| Crystal Blanchard                       | None                           | N/A        | Payments for housing and utilities      | 1,926.88                                |
| 3213 S Meta Avenue                      |                                |            |   |   |
| Oklahoma City, OK 73119                 |                                |            |   |   |
|   |                                |            |   |   |
| Earlisa Bush                            | None                           | N/A        | Payment for housing                     | 500.00                                  |
| 1600 NW 31st Street, Apt 254            |                                |            |   | 1                                       |
| Oklahoma City, OK 73118                 |                                |            |   |   |
| Daleto acco Charlos a                   | Nana                           | N/A        | Down out for housing                    | 779.00                                  |
| Brittany Christian                      | None                           | N/A        | Payment for housing                     | //9.00                                  |
| 7319 NW 23rd Street, Apt 209            |                                | ł          |   |   |
| Bethany, OK 73008                       |                                |            |   |   |
| LaDonna Covalt                          | None                           | N/A        | Payments for food, car and utilities    | 213.51                                  |
| 205 E Memorial Road                     | None                           | ''/        | rayments for food, car and diffices     | 213.51                                  |
|   |                                | 1          |   |   |
| Edmond, OK 73013                        |                                |            |   |   |
| Ashley Crews                            | None                           | N/A        | Payments for housing, utilities and car | 1,069.92                                |
| 7406 NW 23rd Street, Apt 208            |                                |            | ,                                       |   |
| Bethany, OK 73008                       |                                |            |   |   |
| octivity, OK 75000                      |                                |            |   |   |
| Elizabeth Cunningham                    | None                           | N/A        | Payment for housing                     | 775.00                                  |
| 424 NW 87th Street                      |                                |            |   |   |
| Oklahoma City, OK 73114                 |                                |            |   |   |
|   | 1                              | 1          | 1                                       | 1                                       |

| Part XV | Supplemental | Information |
|---------|--------------|-------------|
|         |              |             |

| 3 Grants and Contributions Paid D   | uring the Year (Continuati     | on)        |                                      |          |
|-------------------------------------|--------------------------------|------------|--------------------------------------|----------|
| ,                                   | If recipient is an individual, |            |                                      |          |
| Recipient                           | show any relationship to       | Foundation |                                      |          |
|                                     | any foundation manager         | status of  | Purpose of grant or                  |          |
| Name and address (home or business) | or substantial contributor     | recipient  | contribution                         | Amount   |
| a Paid during the year              |                                |            |                                      |          |
| Crystal Daniels                     | None                           | N/A        | Payments for utilities and car       | 1,695.97 |
| 5821 Hefner Village Circle          |                                |            |                                      |          |
| Oklahoma City, OK 73162             |                                |            |                                      |          |
| Kirstin Ditata                      | None                           | N/A        | Payments for housing and utilities   | 1,054.05 |
| 3417 SE 44th Street, Apt 110        |                                |            |                                      | 1        |
| Oklahoma City, OK 73135             |                                |            |                                      |          |
|                                     |                                |            |                                      | 2 017 21 |
| Brandon Edgmon                      | None                           | N/A        | Payments for housing, utilities, car | 2,817.31 |
| 2305 N Cashion Place                |                                |            | and food                             |          |
| Oklahoma City, OK 73112             |                                |            |                                      |          |
| Cristina English                    | None                           | N/A        | Payments for housing and utilities   | 1,075.36 |
| 2458 N Alexander Lane               |                                |            | 1                                    | · ·      |
| Bethany, OK 73008                   |                                |            |                                      |          |
|                                     |                                |            |                                      |          |
| Dana Ewart                          | None                           | N/A        | Payment for utilities                | 491.33   |
| 2420 N Alexander Lane               |                                |            |                                      |          |
| Bethany, OK 73008                   |                                |            |                                      | ļ        |
|                                     |                                |            |                                      |          |
| Kimberly Flyingout                  | None                           | N/A        | Payment for housing                  | 450.00   |
| 2201 W Lindley Avenue               |                                |            |                                      |          |
| Oklahoma City, OK 73107             |                                |            |                                      |          |
|                                     |                                |            |                                      | 4 752 25 |
| Danita Freeman                      | None                           | N/A        | Payments for housing                 | 1,753.25 |
| 864 NW 12th Street, Apt 6           |                                |            |                                      |          |
| Moore, OK 73160                     |                                |            |                                      |          |
| Patty Goodman                       | None                           | N/A        | Payments for moving expenses         | 207.46   |
| 3800 N I-44 Service Rd, Rm 326      | None                           | ""         | Tayments for moving expenses         | 257.15   |
| Oklahoma City, OK 73112             |                                |            |                                      |          |
| Oktationia City, Ok 73112           |                                |            |                                      |          |
| lan Hanson                          | None                           | N/A        | Payment for housing                  | 350.00   |
| 3407 NW 39th Street, Apt 119        |                                |            |                                      |          |
| Oklahoma City, OK 73112             |                                | 1          |                                      |          |
| ••                                  |                                |            |                                      |          |
| Beverly Harris                      | None                           | N/A        | Payment for housing                  | 1,529.68 |
| 1405 SE 8th Street                  |                                |            |                                      | 1        |
| Moore, OK 73160                     |                                |            |                                      |          |
| Hoothor Handricks                   | None                           | N/A        | Payment for housing                  | 500.00   |
| Heather Hendricks                   | None                           | IV/A       | rayment to nousing                   | 300.00   |
| 9912 S Douglas Avenue               |                                | 1          |                                      |          |
| Oklahoma City, OK 73139             | I                              | 1          | 1                                    | 1        |

THE CREDENCE FOUNDATION

27-2931971

**Supplemental Information** Part XV

Form 990-PF (2015)

| 3 Grants and Contributions Paid D   |                                       | on)        |                                       |          |
|-------------------------------------|---------------------------------------|------------|---------------------------------------|----------|
|                                     | If recipient is an individual,        |            |                                       | İ        |
| Recipient                           | show any relationship to              | Foundation |                                       |          |
|                                     | any foundation manager                | status of  | Purpose of grant or                   |          |
| Name and address (home or business) | or substantial contributor            | recipient  | contribution                          | Amount   |
| a Paid during the year              |                                       |            |                                       |          |
| David Hernandez                     | None                                  | N/A        | Payments for insurance, utilities and | 2,943.48 |
| 2029 Summer Way Lane                |                                       |            | dental care                           |          |
| Edmond, OK 73013                    |                                       |            |                                       |          |
| Shaunda Hill                        | None                                  | N/A        | Payments for utilities                | 2,508.83 |
| 12713 Trail Oaks Drive              | l wome                                | ,          | Toyments for cumules                  | -,       |
|                                     |                                       |            |                                       |          |
| Oklahoma City, OK 73120             |                                       |            |                                       |          |
| Penny Hughes                        | None                                  | N/A        | Payment for housing                   | 400.00   |
| 5901 S May Ave, Apt 269             |                                       |            |                                       |          |
| Oklahoma City, OK 73119             |                                       |            | †                                     |          |
|                                     |                                       | 4-         | L                                     |          |
| Tina Holbrook                       | None                                  | N/A        | Payment for housing                   | 850.00   |
| 7414 NW 22nd Street, Apt 268        |                                       |            |                                       |          |
| Bethany, OK 73008                   |                                       |            |                                       |          |
| Sharee Jackson                      | None                                  | N/A        | Payment for utilities                 | 613.02   |
| 537 Ercoupe                         | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | ,          |                                       |          |
| Midwest City, OK 73110              |                                       |            |                                       |          |
| Widwest City, OK 73110              |                                       |            |                                       |          |
| Karensa Keita                       | None                                  | N/A        | Payment for housing                   | 410.00   |
| 3012 NW 41st Street, Apt 11         |                                       |            |                                       |          |
| Oklahoma City, OK 73112             |                                       |            |                                       | į        |
|                                     |                                       |            |                                       |          |
| Lindsey Koch                        | None                                  | N/A        | Payment for housing                   | 1,353.29 |
| 10301 Ashford Drive                 |                                       |            |                                       |          |
| Yukon, OK 73099                     |                                       |            |                                       |          |
| ,                                   |                                       |            |                                       |          |
| Laurie Laliberte                    | None                                  | N/A        | Payment for housing                   | 1,100.00 |
| 737 SE 30th Street                  |                                       |            |                                       |          |
| Oklahoma City, OK 73129             |                                       |            |                                       |          |
| Matrina Landau                      | None                                  | A1/A       | Down out for housing                  | 1,255.49 |
| Katrina Lemley                      | None                                  | N/A        | Payment for housing                   | 1,233.49 |
| 2422 N Alexander Lane               |                                       |            | 1                                     |          |
| Bethany, OK 73008                   |                                       |            | 1                                     |          |
| Lisa Long                           | None                                  | N/A        | Payments for utilities and child care | 428.31   |
| 501 W 15th Street, Apt 87           |                                       |            |                                       |          |
| Edmond, OK 73013                    |                                       |            |                                       |          |
|                                     |                                       |            |                                       | 4 440 05 |
| Jamie Martinek                      | None                                  | N/A        | Payments for housing and utilities    | 1,148.95 |
| 4022 N Meridian, Apt C-26           |                                       |            |                                       |          |
| Oklahoma City, OK 73122             |                                       |            |                                       | 1        |

| Part XV | Suppl | lemental | Inf | ormati | ion |
|---------|-------|----------|-----|--------|-----|
|---------|-------|----------|-----|--------|-----|

| 3 Grants and Contributions Pald Du  | If recipient is an individual, | T .        |  |          |
|-------------------------------------|--------------------------------|------------|--|----------|
| Recipient                           | show any relationship to       | Foundation |  |          |
|                                     | any foundation manager         | status of  | Purpose of grant or                      |          |
| Name and address (home or business) | or substantial contributor     | recipient  | contribution                             | Amount   |
| a Paid during the year              |                                |            |  |          |
| lessica McGlugritch                 | None                           | N/A        | Payment for utilities                    | 436.05   |
| 513 NW 30th Street, Apt 5           |                                |            |  |          |
| Oklahoma City, OK 73118             |                                |            |  |          |
| Norman McIntyre                     | None                           | N/A        | Payments for housing, utilities, car and | 4,502.23 |
| 14600 N Rockwell Ave, Apt 2315      |                                |            | storage                                  |          |
| Oklahoma City, OK 73142             |                                |            |  |          |
| Ashley Meeks                        | None                           | N/A        | Payment for housing                      | 500.00   |
| 1217 NW 81st Street                 |                                |            | ,  |          |
| Oklahoma City, OK 73114             |                                |            |  |          |
| Ioan Miller                         | None                           | N/A        | Payment for housing                      | 375.00   |
| 1700 NW 17th Street, Apt 2          | NOTE                           | IN/A       | ayment for nousing                       | 373.00   |
| Oklahoma City, OK 73106             |                                | !          |  |          |
| Tonya Moore                         | None                           | N/A        | Payment for utilities                    | 286.30   |
| 1605 NE 47th Street                 |                                |            |  |          |
| Oklahoma City, OK 73111             |                                |            |  |          |
| Kelly Morris                        | None                           | N/A        | Payment for housing                      | 330.36   |
| 6801 NW 122nd Street, Apt F-8       |                                |            |  |          |
| Oklahoma City, OK 73142             |                                |            |  |          |
| Karen Overstreet                    | None                           | N/A        | Payment for housing                      | 896.60   |
| 7020 E Reno Avenue, Apt 103         |                                |            |  |          |
| Midwest City, OK 73110              |                                |            |  |          |
| Michael Platt                       | None                           | N/A        | Payment for utilities                    | 156.83   |
| 4745 SE 17th Street                 |                                |            |  |          |
| Del City, OK 73115                  |                                |            |  |          |
| Steve Reel                          | None                           | N/A        | Payments for housing and utilities       | 675.02   |
| 7501 S Sherwood, Apt 38             |                                |            |  |          |
| Oklahoma City, OK 73159             |                                |            |  |          |
| Rick Reger                          | None                           | N/A        | Payments for housing and utilities       | 704.98   |
| 8523 Candlewood Drive, Apt 213      |                                |            |  |          |
| Oklahoma City, OK 73132             |                                |            |  |          |
| Portia Riley-Jones                  | None                           | N/A        | Payment for housing                      | 218.00   |
| 6017 N May Avenue, Apt 157          |                                | -          |  |          |
| ,,,                                 |                                |            |  |          |

| Part XV Supp | lemental Information |
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| 3 Grants and Contributions Paid Du  | ring the Year (Continuation    | on)        |   |          |
|-------------------------------------|--------------------------------|------------|---|----------|
|                                     | If recipient is an individual, |            |   |          |
| Recipient                           | show any relationship to       | Foundation |   |          |
|                                     | any foundation manager         | status of  | Purpose of grant or                           |          |
| Name and address (home or business) | or substantial contributor     | recipient  | contribution                                  | Amount   |
| a Paid during the year              |                                | ļ          | İ   |          |
| Latisha Roberts                     | None                           | N/A        | Payment for utilities                         | 458.63   |
| 5404 N Meridian Ave                 |                                |            |   |          |
| Oklahoma City, OK 73112             |                                |            |   |          |
| Issachar Smith                      | None                           | N/A        | Payments for housing and utilities            | 1,023.00 |
| 6100 MacArthur Park Ln, Apt 2005    |                                |            |   |          |
| Oklahoma City, OK 73127             |                                |            |   |          |
| Eddie Tatum                         | None                           | N/A        | Payments for housing, utilities and           | 2,527.66 |
| 19360 E Imhoff Road                 |                                |            | medical care                                  |          |
| Norman, OK 73026                    |                                |            |   |          |
| Sareece Toledo                      | None                           | N/A        | Payment for utilities                         | 188.84   |
| 511 S Hadden                        | l None                         | '','       | To dimension                                  | 200.0    |
| El Reno, OK 73036                   |                                |            |   |          |
| Li Relio, OK 73030                  |                                |            |   |          |
| Stacie Tuthill                      | None                           | N/A        | Payment for housing                           | 800.00   |
| 7414 NW 22nd Street, Apt 264        |                                |            | ,   |          |
| Bethany, OK 73008                   |                                |            |   |          |
| bethany, on 75000                   |                                |            |   |          |
| Linda Valles                        | None                           | N/A        | Payments for utilities, food, car, storage    | 1,010.62 |
| 5575 NW 50th Street, Apt B          |                                |            | and moving expenses                           | ,        |
| Oklahoma City, OK 73122             |                                |            | and moving expenses                           |          |
| Oktationia City, Ok 73122           |                                |            |   |          |
| Shannon Williams                    | None                           | N/A        | Payment for utilities                         | 270.00   |
| 2500 N Knottingham Way, Apt 3       |                                |            | ,       |          |
| Moore, OK 73160                     |                                |            |   |          |
| WOOTE, OK 75100                     |                                |            |   |          |
| Shantrell Williams                  | None                           | N/A        | Payment for utilities                         | 287.73   |
| 2516 SE 47th Street                 |                                | ,          | 7,  |          |
| Oklahoma City, OK 73135             |                                |            |   |          |
| Oklanoma City, Ok 73133             |                                | ļ          |   |          |
| Catherine's House Inc.              | N/A                            | PC         | Provide funds for transitional housing        | 2,500.00 |
|                                     | N/A                            | "          | 1   | 2,300.00 |
| P.O. Box 1633                       | ł                              |            | for homeless women and children               |          |
| Belmont, NC 28012                   |                                |            |   |          |
| Catholic Charities                  | N/A                            | PC         | Provide funds to support services             | 2,500.00 |
| 1501 N. Classen Blvd.               |                                |            | provided to the poor and needy                |          |
| Oklahoma City, OK 73106             |                                |            |   | 1        |
| ••                                  |                                |            |   |          |
| Catholic Relief Services            | N/A                            | PC         | Provide funds to support services provided to | 2,000.00 |
| 228 W. Lexington Street             |                                | 1          | impoverished and disadvantaged people         |          |
| Baltimore, MD 21201                 |                                |            |   |          |
|                                     | 1                              | •          | , '   |          |

# Part XV Supplemental Information

| 3 ( | Grants and Contri | butions Paid During | g the Year | (Continuation) |  |
|-----|-------------------|---------------------|------------|----------------|--|
|-----|-------------------|---------------------|------------|----------------|--|

| •                                   | If recipient is an individual, |            |   |          |
|-------------------------------------|--------------------------------|------------|---|----------|
| Recipient                           | show any relationship to       | Foundation |   |          |
|                                     | any foundation manager         | status of  | Purpose of grant or                     |          |
| Name and address (home or business) | or substantial contributor     | recipient  | contribution                            | Amount   |
| a Paid during the year              |                                |            |   |          |
| Center of Family Love               | N/A                            | PC         | Provide funds to house and care for     | 2,500.00 |
| P. O. Box 245                       |                                |            | developmentally challenged adults       |          |
| Okarche, OK 73762                   |                                |            |   |          |
| Central OK Habitat for Humanity     | N/A                            | PC         | Provide home ownership for limited      | 1,000.00 |
| P. O. Box 95832                     |                                |            | income families living in substandard   |          |
| Oklahoma City, OK 73143             |                                |            | conditions                              |          |
| Cross Catholic Outreach             | N/A                            | PC         | Provide funds to feed, clothe and house | 6,900.00 |
| P. O. Box 273908                    |                                |            | impoverished families                   |          |
| Boca Raton, FL 33427                |                                |            |   |          |
| Mary Elizabeth Maternity Home       | N/A                            | PC         | Provide funds for transitional housing  | 2,500.00 |
| P. O. Box 132                       |                                |            | for pregnant and unwed mothers          |          |
| Hays, KS 67601                      |                                |            |   |          |
| Oklahoma Brain Tumor Foundation     | N/A                            | PC         | Provide funds to assist brain tumor     | 1,000.00 |
| 2024 N Lincoln Blvd, Suite 220      |                                |            | victims                                 |          |
| Oklahoma City, OK 73105             |                                |            |   |          |
| Variety Care Foundation             | N/A                            | PC         | Provide funds for medical and dental    | 2,500.00 |
| P. O. Box 2098                      |                                |            | care for impoverished families          |          |
| Oklahoma City, OK 73101             |                                |            |   |          |
| Total from continuation sheets      | <u>I</u>                       | <u></u>    |   | 74,088   |

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| Form 990-PF (2015) Interest on sav     | ings and temporary   | cash investments  |                  |                       | Statement 1           |
|--|----------------------|-------------------|------------------|-----------------------|-----------------------|
|  |                      |                   | (A)<br>Revenue   | (B)<br>Net Investment | (C)<br>Adjusted       |
| <u>Source</u>                          |                      |                   | <u>Per Books</u> | <u>Income</u>         | Net Income            |
| Merrill Lynch                          |                      |                   | 16               | 16                    |                       |
| To Part I, Line 3                      |                      |                   | 16               | 16                    |                       |
| Form 990-PF (2015) Dividends and       | interest from securi | ties              |                  |                       | Statement 2           |
|  |                      | Capital           | (A)              | (B)                   | (C)                   |
|  | Gross                | Gains             | Revenue          | Net Investment        | Adjusted              |
| Source                                 | Amount               | <u>Dividends</u>  | Per Books        | <u>Income</u>         | Net Income            |
| Merrill Lynch (dividends and interest) | 57,982               | 28,844            | 29,138           | 29,138                |                       |
| Merrill Lynch (accrued paid interest)  | -1,601               | ·                 | -1,601           | -1,601                |                       |
| To Part I, Line 4                      | 56,381               | 28,844            | 27,537           | 27,537                |                       |
| Form 990-PF (2015) Accounting fee      | <u></u>              |                   |                  |                       | Statement 3           |
|  |                      |                   |                  |                       |                       |
|  |                      | (A)               | (B)              | (C)                   | (D)                   |
|  |                      | Expenses          | Net Investment   | Adjusted              | For Charitable        |
| <u>Source</u>                          |                      | <u>Per Books</u>  | Income           | Net Income            | <u>Purposes</u>       |
| Nymer Brownlee                         |                      | 830               | 0                |                       | 0                     |
| To Part I, Line 16b                    |                      | 830               | 0                |                       | 0                     |
| Form 990-PF (2015) Other profession    | onal fees (Investme  | nt advisory fees) |                  |                       | Statement 4           |
|  |                      | (A)               | (B)              | (C)                   | (D)                   |
|  |                      | Expenses          | Net Investment   | (C)<br>Adjusted       | (D)<br>For Charitable |
| <u>Source</u>                          |                      | Per Books         | Income           | Net Income            | Purposes              |
| <u>Source</u><br>Merrill Lynch         |                      | 127               | 0                | <u>IVEC IIICOIIIC</u> | <u>r urposes</u><br>0 |
|  |                      |                   |                  | <del></del>           | <del></del>           |
| To Part I, Line 16c                    |                      | 127               | 0                |                       | 0                     |
| Form 990-PF (2015) Taxes (Excise to    | axes)                |                   |                  |                       | Statement 5           |
|  |                      | (A)               | (B)              | (C)                   | (D)                   |
|  |                      | Expenses          | Net Investment   | Adjusted              | For Charitable        |
| <u>Source</u>                          |                      | Per Books         | <u>Income</u>    | Net Income            | <u>Purposes</u>       |
| 2015 Form 990-W                        |                      | 1,240             | 0                |                       | 0                     |
| 2014 990-PF - Excise tax due           |                      | 643               | 0                |                       | 0                     |
| To Part I, Line 18                     |                      | 1,883             | 0                |                       | 0                     |
| •                                      |                      |                   |                  |                       |                       |

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| Form 990-PF (2015) Other expenses                                  |                           |                |                    | Statement 6       |
|--|---------------------------|----------------|--------------------|-------------------|
| ·  | (A)                       | (p)            | (6)                | (5)               |
|  | (A)                       | (B)            | (C)                | (D)               |
| Description  | Expenses<br>Por Pooks     | Net Investment | Adjusted           | For Charitable    |
| <u>Description</u>   | Per Books                 | Income         | <u>Net Income</u>  | <u>Purposes</u>   |
| Postage  | 46                        | 0              |                    | 0                 |
| Post office box rental   | 82                        | 0              |                    | 0                 |
| Office supplies  | 122                       | 0              |                    | 0                 |
| Bank service fees  | 87                        | 0              |                    | 0                 |
| Photocopying   | <u> </u>                  | 0              | <del> </del>       | 0                 |
| To Part I, Line 23   | 340                       | 0              | <del> </del>       | 0                 |
| Form 990-PF (2015) Investments - corporate sto                     | ock                       |                |                    | Statement 7       |
|  |                           | Valuation      | End of Year        | End of Year       |
| <u>Source</u>  | <u>Stocks</u>             | <u>Method</u>  | <b>Book Value</b>  | Fair Market Value |
| Merrill Lynch  | BHP Billiton              | Cost           | 9,837              | 44,822            |
| Merrill Lynch  | Devon Energy              | Cost           | 17,425             | 32,000            |
| Merrill Lynch  | Duke Energy               | Cost           | 18,996             | 29,984            |
| Merrill Lynch  | Pfizer                    | Cost           | 9,526              | 19,908            |
| Merrill Lynch  | London Equity Fund        | Cost           | 212,182            | 212,184           |
| To Part II, Line 10b   |                           | -<br>-         | 267,967            | 338,899           |
| Form 990-PF (2015) Investments - corporate bo                      | nds                       |                |                    | Statement 8       |
| · · · · · · · · · · · · · · · · · · ·                              |                           |                |                    |                   |
|  |                           | Valuation      | <b>End of Year</b> | End of Year       |
| <u>Source</u>  | <u>Bonds</u>              | <u>Method</u>  | <b>Book Value</b>  | Fair Market Value |
| Merrill Lynch  | Bunge Ltd Finance         | Cost           | 25,381             | 24,861            |
| Merrill Lynch  | Computer Sciences         | Cost           | 25,742             | 25,644            |
| Merrill Lynch  | Kohl's                    | Cost           | 26,245             | 25,526            |
| Merrill Lynch  | Macys                     | Cost           | 25,407             | 24,617            |
| Merrill Lynch  | Viacom                    | Cost           | 25,005             | 24,170            |
| Merrill Lynch  | Southern Company          | Cost           | 2,207              | 2,232             |
| To Part II, Line 10c   |                           | =              | 129,988            | 127,050           |
| Form 990-PF (2015) Investments - other                             |                           |                | <del></del>        | Statement 9       |
|  |                           |                |                    |                   |
|  |                           | Valuation      | End of Year        | End of Year       |
|  | <b>Mutual Funds</b>       | <u>Method</u>  | <b>Book Value</b>  | Fair Market Value |
| <u>Source</u>  |                           |                | 44 224             | 76 665            |
|  | Guggenheim                | Cost           | 41,234             | 76,665            |
| Merrill Lynch  |                           | Cost<br>Cost   | 41,234<br>41,228   | 76,665<br>58,437  |
| Merrill Lynch<br>Merrill Lynch                                     | Guggenheim                |                |                    |                   |
| Source  Merrill Lynch  Merrill Lynch  Merrill Lynch  Merrill Lynch | Guggenheim<br>Wisdom Tree | Cost           | 41,228             | 58,437            |

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| Form 990-PF (2015) Other decreases in net assets or fund balances                      | Statement 10  |
|--|---------------|
| Description  | <u>Amount</u> |
| Adjustments to prior year noncash contributions reported at FMV rather than Book Value | 178,089.00    |
| To Part III, Line 5  | 178,089.00    |