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Return of Private Foundation

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

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

Department of the Treasury Internal Revenue Service

Information about Form 990-PF and its separate instructions is at www.irs gov/form990pf.

For calendar year 2015 or tax year beginning		, and ending		
Name of foundation	<u></u>		A Employer identification	number
LT. COL. ORVILLE O "BILL" N	TINSON SCHOLA	R	46-3349419	
Number and street (or P O box number if mail is not delivered to street as		Room/suite	B Telephone number	
6717 NE 113TH STREET			(405) 209-	1136
City or town, state or province, country, and ZIP or foreign po	ostal code		C If exemption application is pe	
EDMOND, OK 73013				
G Check all that apply: Initial return	Initial return of a fo	rmer public charity	D 1. Foreign organizations	, check here
Final return	Amended return	,		
Address change	Name change		 Foreign organizations me check here and attach cor 	eting the 85% test, mputation
H Check type of organization: X Section 501(c)(3) ex			E If private foundation state	tus was terminated
	Other taxable private founda	tion	under section 507(b)(1)	
Fair market value of all assets at end of year J Accounti	ng method: X Cash	Accrual	F If the foundation is in a	60-month termination
· • • • • • • • • • • • • • • • • • • •	ther (specify)		under section 507(b)(1)	. —
	mn (d) must be on cash b	asis)		
Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements for charitable purposes
(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	(cash basis only)
1 Contributions, gifts, grants, etc., received	30000.		N/A	
2 Check If the foundation is not required to attach Sch. B				
3 interest on savings and temporary cash investments				
4 Dividends and interest from securities	921.	921.		STATEMENT 1
5a Gross rents				
b Net rental income or (loss)				
64 Net gein or (lose) from salara at sets not on line 10	1974.			DEOFIN
ES Charles and Charles of the Seets not on line 10 9758.			ļ <u></u>	RECEIVED
Capital gain net income (from Part IV, line 2)		1974.	4	0
18 Elet short-term capital gain 9 Income modifications				NOV 1 7 2016 E
9 Income modifications			<u> </u>	\(\frac{1}{2}\)
Gross sales less returns and allowances				CINCINNATI OH
OGDEND LIGHT L			<u> </u>	
c Gross profit or (loss)				
11 Other Income RECETVEウ	20005	2005		
12 Total. Add lines 1 through 11/2 2120	32895.	2895.	 	0.
13 Compensation of officers, directors, trustees, etc	0.	0.	}	0.
14 Other employee salaries and wages				
15 Pension plans, employee benefits				
16a Legal fees Clemon #1-				
b Accounting fees ACS STIPPC 2.1		 	 	
c Other professional fees				
9 17 Interest 18 Taxes STMT 2	4.	4.		0.
18 Taxes STMT 2			· · · · · · · · · · · · · · · · · · ·	
19 Depreciation and depletion				
b Accounting fees c Other professional fees 17 Interest 18 Taxes STMT 2 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative expenses. Add lines 13 through 23 25 Contributions gifts grants paid	·-	-	 	
21 Travel, conferences, and meetings 22 Printing and publications			 	
22 Printing and publications				† · · · · · · · · · · · · · · · · · · ·
23 Other expenses			*	
문 24 Total operating and administrative expenses. Add lines 13 through 23	4.	4.	.	0.
25 Contributions, gifts, grants paid	8000.			8000.
26 Total expenses and disbursements.				
Add lines 24 and 25	8004.	4.		8000.
27 Subtract line 26 from line 12:				
a Excess of revenue over expenses and disbursements	24891.	<u> </u>		
b Net investment income (If negative, enter -0-)		2891		
c Adjusted net income (if negative, enter -0-)			N/A	
- 110/00/04 1101 1101 1101				5 000 DE 1994

	-	Attended schoolules and amounts as the descenter	Beginning of year	End of	Sygner Page 2
P	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
٦	1	Cash - non-interest-bearing	3.	4388.	4388.
-		Savings and temporary cash investments		4300.	4300.
		Accounts receivable			
	J	Less: allowance for doubtful accounts	 		
Į	4	Pledges receivable			
ĺ	7	Less; allowance for doubtful accounts			
	5	Grants receivable			
	-		····		
	6	Receivables due from officers, directors, trustees, and other			
- {	7	disqualified persons Other notes and loans receivable			
	′	Less; allowance for doubtful accounts			
Assets	8	Inventories for sale or use			
Ass	9	Prepaid expenses and deferred charges Investments - U.S. and state government obligations			
1					
ļ		Investments - corporate stock			
		Investments - corporate bonds			
	11	Investments - land buildings, and equipment basis		·	}
	40	Less accumulated depreciation			
		Investments - mortgage loans Investments - other STMT 3	30282.	50788.	44966.
1	13		30202.	30788.	44700.
	14	Land, buildings, and equipment: basis			
	40	Less accumulated depreciation			
	15	Other assets (describe)	 +		
	16	Total assets (to be completed by all filers - see the	30285.	55176.	49354.
	47	Instructions. Also, see page 1, item I)	302031	55176.	49334.
	ĺ	Accounts payable and accrued expenses			
	18	Grants payable Deferred revenue	_ 		_
ies	19	F	 +		_
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
Lia	21	Mortgages and other notes payable			-* *
_	22	Other liabilities (describe)			
	22	Total liabilities (add lines 17 through 22)	0.	0.	
_	23				· '
		Foundations that follow SFAS 117, check here			
Ś	0.4	and complete lines 24 through 26 and lines 30 and 31.			,
ဦ	24	Unrestricted			
<u>a</u>	25	Temporarily restricted			
8	26	Permanently restricted Foundations that do not follow SFAS 117, check here			
Net Assets or Fund Balances		·			
o.	07	and complete lines 27 through 31 Capital stock, trust principal, or current funds	30285.	55176.	,
ţ	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
SSE	28	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
Z X	29		30285.	55176.	
ž	30	Total net assets or fund balances	30203.		
	24	Total liabilities and net assets/fund balances	30285.	55176.	
_				331700	
LP	art	III Analysis of Changes in Net Assets or Fund Ba	lances		
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
•		st agree with end-of-year figure reported on prior year's return)	-	- 1	30285.
2	•	r amount from Part I, line 27a		2	24891.
		er increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3		4	55176.
		reases not included in line 2 (itemize)		5	0.
		I net assets or fund balances at end of year (line 4 minus line 5) - Part II, col	lumn (b), line 30	6	55176.
Ť					Form 990-PF (2015)

orm 990-PF (2015) LT. Part IV Capital Gains a	COL ORV			MUNSON S					-3349		Page
				income			TACHE	ED STA	ATEME	(d) Date	e sold
(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse; or common stock, 200 shs. MLC Co.) (b) How ac P - Purch D - Dona				- Purch - Donat	ase tion	(mo., day,		(mo., da			
					4_		_				
<u> </u>					 						
					л.		<u></u>		 +		
(e) Gross sales price	(f) Depreciatio (or allowa			t or other basis opense of sale	ŀ			(h) Gain (e) plus (f	ı or (loss) i) mınus (ç	3)	
······································					·						
	ļ_ 										
9758.	Ĺ			778	4.						L974
Complete only for assets showing					—			Gains (Col. (k), but not			
(i) F.M.V. as of 12/31/69	(j) Adjusted as of 12/3		over	cess of col. (I)				Losses (fr	om col. (h))	
				 	\dashv						
; 							··				
<u> </u>											1974
·	(1	f dain, also enter in C	Part I line	 7	7						
Capital gain net income or (net ca	apital loss) 🥻 i	f gain, also enter in F f (loss), enter -0- in l	Part I, line	7	}	2		·	· <u>···</u> ·		L974
Net short-term capital gain or (los	•					}					
If gain, also enter in Part I, line 8,		, ,	•		\				/-		
If (loss), enter -0- in Part I, line 8	adau Oaallaa	1010/a) 1a : Da	diiood	Tay on Not	1	3	nt Inco		N/A		
as the foundation liable for the sec "Yes," the foundation does not qua Enter the appropriate amount in	lify under section 49	40(e). Do not comple	ete this par	t						Yes	X
(a) Base period years		(b)			(c)				Distrib	(d) ution ratio	***
Calendar year (or tax year beginni	ing in) Adjust	ed qualifying distribi		Net value of n	oncha				ol. (b) divi	ded by col.	
2014			184.				28554				8155
2013			193. 0.				21157 21411				5638 0000
2012 2011							21411	•			0000
2010								 			
2010				 							
Total of line 1, column (d)								2		.2	3793
Average distribution ratio for the			ne 2 by 5,	or by the numbe	r of ye	ars		{ }		- م	
the foundation has been in existe	ince if less than 5 year	ars						3		.0'	<u>7931</u>
Enter the net value of noncharita	ble-use assets for 20	115 from Part X, line	5					4		4	2979
Multiply line 4 by line 3								5		:	3409
Enter 1% of net investment incor								6			29
Add lines 5 and 6		<i>-</i> ,						7			3438
	m Dort VIII line 4								<u></u>		8000
Enter qualifying distributions fro If line 8 is equal to or greater tha		ox in Part VI, line 1b,	, and comp	lete that part usi	ng a 1	% tax r	ate.	8			2000
See the Part VI instructions.				 -					F	orm 990 -	PF (

Form 990-PF (2015) LT. COL. ORVILLE O "BILL" MUNSON SCHOLE Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4			P: tions	age 4
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.				\neg
Date of ruling or determination letter: (attach copy of letter if necessary-see instruc				Ì
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here			2	9.
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, c	ol. (b).			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2			0.
3 Add lines 1 and 2	3			9.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5		2	9.
6 Credits/Payments:	{ }			}
a 2015 estimated tax payments and 2014 overpayment credited to 2015				
b Exempt foreign organizations - tax withheld at source				1
c Tax paid with application for extension of time to file (Form 8868)				
d Backup withholding erroneously withheld				با
7 Total credits and payments. Add lines 6a through 6d	7			0.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8			
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9			<u>.9</u>
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	Refunded 11			
11 Enter the amount of line 10 to be: Credited to 2016 estimated tax ▶ Part VII-A Statements Regarding Activities	Refunded 11			
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it parti	icinate or intervene in	\Box	Yes	No
any political campaign?	iolpato of intervente in	1a		X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instruction	ns for the definition)?	1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any m				\neg
distributed by the foundation in connection with the activities.	raterials passioned or		}	
c Did the foundation file Form 1120-POL for this year?		1c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:				
(1) On the foundation. ▶ \$ 0 . (2) On foundation managers. ▶ \$	0.		. 1	
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed o	n foundation			}
managers. ► \$0.				
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?		2		X
If "Yes," attach a detailed description of the activities.				
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles	of incorporation, or	<u> </u>		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes		3		<u>X</u>
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	37 / 3	4a		<u>X</u>
b If "Yes," has it filed a tax return on Form 990-T for this year?	N/A	4b		
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
If "Yes," attach the statement required by General Instruction T				
Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:				· [
 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that co 	onflict with the state law	-	[1
remain in the governing instrument?	offiliet with the state law	6	- 	x
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, co	/ (c) and Part YV	7	X	
P Did the foundation have at least \$6,000 in assets at any time during the year. If Yes, Complete Part II, Co	i. (c), and Fait AV	<u> </u>		
8a Enter the states to which the foundation reports or with which it is registered (see instructions) OK				
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or	r designate)	<u></u>		
of each state as required by General Instruction G? If "No," attach explanation		8b	Х	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or	⁻ 4942(j)(5) for calendar			
year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If "Yes," complete Part XIV		9		<u>X</u>
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names a		10	X	
	F	orm 99 0	J-PF (2015)

orm 990-PF (2015) LT. COL. ORVILLE O "BILL' Part VII-B Statements Regarding Activities for Which Fo	' MUNSON SCHOL	AR equired (continu	<u>46-334941</u>	9 Page 6
 5a During the year did the foundation pay or incur any amount to: (1) Carry on propaganda, or otherwise attempt to influence legislation (section (2) Influence the outcome of any specific public election (see section 4955); or any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization 4945(d)(4)(A)? (see instructions) (5) Provide for any purpose other than religious, charitable, scientific, literary, the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und section 53.4945 or in a current notice regarding disaster assistance (see instructions). c If the answer is "Yes" to question 5a(4), does the foundation claim exemption for expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53.4945. 6a Did the foundation, during the year, receive any funds, directly or indirectly, to part a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a part "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax so if "Yes," did the foundation receive any proceeds or have any net income attributed. Part VIII Information About Officers, Directors, Trusteen.	4945(e))? To carry on, directly or indirectly or educational purposes, or for educational purposes, or for indirectly or education or indirectly or education or indirectly or individual or indirectly or indirectly or indirectly or indirectly or indirectly or indire	Ye	S X No S X No S X No S X No N/A 5	b X
Paid Employees, and Contractors				
List all officers, directors, trustees, foundation managers and their can be a second to the can be a second		(c) Compensation	(d) Contributions to	(e) Eynense
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
CURTIS A MUNSON	CO-DIRECTOR			
6717 NE 113TH STREET EDMOND, OK 73013-8356	1.00	0.	0.	0.
BRUCE E MUNSON	CO-DIRECTOR			<u>··</u>
61 FONTENAY CIRCLE		'		
LITTLE ROCK, AR 72223	1.00	0.	0.	0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contribution 1	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				
		-		
	t			
	 	 	 	
	1]	
Total number of other employees paid over \$50,000	<u></u>	<u> </u>	<u> </u>	

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Form 990-PF (2015) LT. COL. ORVILLE O "BILL" MUNSO!	N SCHOLAR 46-3	349419 Page 7
Part VIII Information About Officers, Directors, Trustees, Found Paid Employees, and Contractors (continued)	ation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, ent	er "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		-
		
		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant state	tistical information such as the	
number of organizations and other beneficiaries served, conferences convened, research papers pro	oduced, etc.	Expenses
1N/A		
2		
•		
3		
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year of	on lines 1 and 2.	Amount
1 <u>N/A</u>		
2		
*		
All other program-related investments. See instructions.		
3		
		
Total. Add lines 1 through 3		0.

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, see ii	nstructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:	` .	
a	Average monthly fair market value of securities	1a	42881.
	Average of monthly cash balances	1b	752.
	Fair market value of all other assets	1c	0.
d	Total (add lines 1a, b, and c)	1d	43633.
	Reduction claimed for blockage or other factors reported on lines 1a and	, R	
	1c (attach detailed explanation) 1e 0.		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	43633.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	654.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	42979.
6	Minimum investment return. Enter 5% of line 5	6	2149.
_	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are	nd certain	
	foreign organizations check here and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	2149.
2a	Tax on investment income for 2015 from Part VI, line 5		
b	Income tax for 2015. (This does not include the tax from Part VI.)	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	2120.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	2120.
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	2120.
P	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	ĭ \	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	8000.
b	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:	3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	8000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
	income. Enter 1% of Part I, line 27b	5	29. 7971.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	7971.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	qualifies for the	section

Part XIII Undistributed Income (see instructions) (a) (b) (c) (d) Corpus Years prior to 2014 2014 2015 1 Distributable amount for 2015 from Part XI. line 7 2120. 2 Undistributed income if any as of the end of 2015 a Enter amount for 2014 only 0. b Total for prior years 0 3 Excess distributions carryover, if any, to 2015 a From 2010 b From 2011 c From 2012 d From 2013 2945. e From 2014 2945 f Total of lines 3a through e 4 Qualifying distributions for 2015 from 8000. Part XII, line 4 > \$ 0 a Applied to 2014, but not more than line 2a **b** Applied to undistributed income of prior 0 years (Election required - see instructions) c Treated as distributions out of corpus 0. (Election required - see instructions) 2120 d Applied to 2015 distributable amount 5880. e Remaining amount distributed out of corpus 0. Excess distributions carryover applied to 2015 (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 8825 a Corpus. Add lines 37 4c and 4e Subtract line 5 b Prior years undistributed income Subtract = ----0. line 4b from line 2b c Enter the amount of prior years' -undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously 0 assessed d Subtract line 6c from line 6b Taxable 0. amount - see instructions e Undistributed income for 2014. Subtract line 0 4a from line 2a Taxable amount - see instr 1 Undistributed income for 2015 Subtract 22 lines 4d and 5 from line 1. This amount must 0. be distributed in 2016 7 Amounts treated as distributions out of ~~~ = corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election 0. may be required - see instructions) 8 Excess distributions carryover from 2010 0. not applied on line 5 or line 7 9 Excess distributions carryover to 2016 8825 Subtract lines 7 and 8 from line 6a 10 Analysis of line 9 a Excess from 2011 b Excess from 2012 c Excess from 2013 2945. d Excess from 2014

e Excess from 2015

5880

orm 990-PF (2015) LT. COL.	ORVILLE C	BILL" MUN	SON SCHOLAR		49419 Page
Part XIV Private Operating For			II-A, question 9)	N/A	
1 a If the foundation has received a ruling or o					
foundation, and the ruling is effective for 2		=	▶ ∟	40.40(.)(0)	2404.453
b Check box to indicate whether the foundat	Tax year	ing foundation described	Prior 3 years	4942(j)(3) or 4	942(₁)(5) T
2 a Enter the lesser of the adjusted net income from Part I or the minimum	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
investment return from Part X for	(4) 2010	(0) 2011	(0) 2010	(0) 2012	(0) 10421
1		1			}
each year listed b 85% of line 2a		 	 		
c Qualifying distributions from Part XII,	 _	 	 	 	
line 4 for each year listed		1			
d Amounts included in line 2c not					
used directly for active conduct of					}
exempt activities					
e Qualifying distributions made directly			<u> </u>		
for active conduct of exempt activities.		1			ĺ
Subtract line 2d from line 2c					
Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying					
under section 4942(j)(3)(B)(i)					
b "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					İ
investment income (interest,					
dividends, rents, payments on securities loans (section					J
512(a)(5)), or royalties)			<u> </u>		
(2) Support from general public					
and 5 or more exempt organizations as provided in					
section 4942(j)(3)(B)(III)				<u> </u>	
(3) Largest amount of support from					
an exempt organization		<u> </u>			ļ
(4) Gross investment income			· · · · · · · · · · · · · · · · · · ·	1 105 000	<u> </u>
Part XV Supplementary Infor			it the foundation	nad \$5,000 or mo	re in assets
at any time during th		ructions.)			
Information Regarding Foundation	-	at one full tractions		f	
a List any managers of the foundation who year (but only if they have contributed me			itributions received by the	toundation before the clos	se of any tax
ONE	510 than 4 0,000). (000	00011011007(4)(2)17			
b List any managers of the foundation who	own 10% or more of	the stock of a cornoration	/or an equally large portu	on of the ownership of a n	artnership or
other entity) of which the foundation has			(Or arrequarry large portion	on on the ownership of a p	arthership of
ONE	_				
Information Regarding Contribution	n. Grant. Gift. Loai	n. Scholarship, etc., P	rograms:		
Check here ►	ly makes contribution	s to preselected charitable	e organizations and does r		
a The name, address, and telephone number					
2 o name, address, and totophone name	o. o. o man addition of	porcon to imoni app			
SEE STATEMENT 5			_		
b The form in which applications should be	submitted and inform	ation and materials they	should include:		
c Any submission deadlines:		<u>. </u>			
d Any restrictions or limitations on awards	, such as by geograph	ical areas, charitable field	s, kinds of institutions, or	other factors:	
23601 11-24-15					Form 990-PF (20

Supplementary information	On (continued)			·
3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Marie and address (notice of business)	or substantial contributor	recipient		
8 Paid during the year		1		
		ĺ	1	ĺ
		Ì		
KATIE LUTTER	NONE	N/A	UNRESTRICTED	
1904 8TH STREET, #67		[
BROOKINGS, SD 57006	}	}		2900.
ZACHARY PAULSON	NONE	N/A	UNRESTRICTED	
P O BOX 425				2900.
WESSINGTON SPRINGS, SD 57382		 		2900.
				j
MORGAN TEBAY	NONE	N/A	UNRESTRICTED	
21966 392ND AVENUE				İ
ALPENA, SD 57312				1700.
				ļ
	l _{vov}	1/3	(DIDECED LOWED	
OWEN WHITE 807 COLLEGE AVENUE NORTH	NONE	N/A	UNRESTRICTED	
WESSINGTON SPRINGS, SD 57382				500.
WIDDINGTON DERINGS, DD 37302		 		
		Ì		
		<u> </u>		8000.
Total		T		0000,
b Approved for future payment		Ì		
	}			
NONE	}			
		_ 		ļ
			1	1
			}	
			Ì	
Total			▶ 3b	0.
IUIAI				

Form 990-PF (2015) LT. COL. ORVI Part XVI-A Analysis of Income-Proc			SCHO	LAR 46-	3349419 Page 12
Enter gross amounts unless otherwise indicated.		ed business income	Exclud	ded by section 512, 513, or 514	(e)
eritor groot amounto amous otherwise malouted.	(a)	(b)	(c) Exclu-	(d)	Related or exempt
4. December 2011/100 100 100 100 100 100 100 100 100	(a) Business	Amount	sion	Amount	function income
1 Program service revenue:	code		code		Tanotion income
a	_		\longrightarrow		
b		·			
C			1 1		·
d			T I	· · · · · · · · · · · · · · · · · · ·	
e					
•					
g Fees and contracts from government agencies	_		+		
-			+ -		
2 Membership dues and assessments			-		
3 Interest on savings and temporary cash					
investments			\longrightarrow		
4 Dividends and interest from securities					921.
5 Net rental income or (loss) from real estate;	4 g * (A \$	The state of the s	475	是一种,他们有	"秦秦"(宋代明史)
a Debt-financed property		 :	1		
b Not debt-financed property			1		
· · · · · ·			+ +		
6 Net rental income or (loss) from personal)]		J
property	ļ		+-1		
7 Other investment income			↓		Ļ <u></u>
8 Gain or (loss) from sales of assets other			1 1		
than inventory					1974.
9 Net income or (loss) from special events	<u> </u>				
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
	J		1		
			+		
·	_		+		
d			+		
e					0005
12 Subtotal. Add columns (b), (d), and (e)	T + Fift gare	0.	., `	0.	
13 Total. Add line 12, columns (b), (d), and (e)				13 _	2895.
(See worksheet in line 13 instructions to verify calculations	3.)				
Part XVI-B Relationship of Activitie	s to the Acco	mplishment of Ex	empt	Purposes	
Line No Explain below how each activity for which	income is reported	ın column (e) of Part XVI-	A contrib	outed importantly to the acco	mplishment of
the foundation's exempt purposes (other t					
3 PORTFOLIO INCOME IS U	SED TO PI	ROVIDE SCHOL	ARSH	IIP AWARDS TO	STUDENTS
3 PORTFOLIO INCOME IS U 4 PORTFOLIO INCOME IS U	SED TO PI	ROVIDE SCHOL	ARSH	IIP AWARDS TO	STUDENTS
8 CAPITAL GAIN INCOME					S TO STUDENTS
		<u> </u>			
					
				 	
					
					
					-
					<u> </u>
			_ ~		

15) LT. COL. ORVILLE O "BILL" MUNSON SCHOLAR 46-3349419
Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations**

1	Did the o	the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of								No
the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										
a Transfers from the reporting foundation to a noncharitable exempt organization of:										
(1) Cash										X
(2) Other assets										X
b	Other tra	nsactions;						\Box		
	(1) Sale:	s of assets to a noncharitat	ole exempt organization	on				1b(1)		<u> </u>
	(2) Puro	hases of assets from a nor	ncharitable exempt or	ganızatıon				1b(2)		X
	(3) Rent	al of facilities, equipment, o	or other assets					1b(3)		X
		nbursement arrangements						1b(4)		X
	•	is or loan guarantees						1b(5)		X
		ormance of services or mei						1b(6)		<u>X</u>
	•	of facilities, equipment, mai	• .		· ·			<u>_1c_</u>		X
đ				-	• •	-	narket value of the goods, o		ets,	
					d less than fair market value	e in any transaction	or sharing arrangement, sh	ow in		
(a) ∟ı		d) the value of the goods, of (b) Amount involved			exempt organization	(d) December	of transfers transactions and all			
(4)	ne no	(b) Amount myored	(c) Name of	N/A	exempt organization	(u) Description	of transfers, transactions, and st	naring arra	ingemen	ts
				N/A		 				
						 				
		 				 				
						-	 -			
									-	
			· 							
			- <u>-</u>				*			
				<u> </u>						
										
			<u> </u>							
2a	Is the fo	undation directly or indirec	tly affiliated with, or r	elated to, one	or more tax-exempt organi	zations described		_		_
	ın sectio	n 501(c) of the Code (other	r than section 501(c)(3)) or in secti	on 527? 🔨			Yes	X	No
<u>b</u>	If "Yes,"	complete the following sch				r	(1.5			
		(a) Name of org	janization		(b) Type of organization		(c) Description of relations	пр		
		N/A								
							···-			
	·			<u> </u>						
					· · · · · · · · · · · · · · · · · · ·	 				
	Und	er penalties of penury, I declare	that I have examined this	return, including	accompanying schedules and st	atements, and to the be	est of my knowledge			
Si	1				taxpayer) is based on all informa		as any knowledge retu	the TRS or rn with the	e prepar	er 📗
He		Shank			11/11/16	CO-DIE	RECTOR	wn below Yes	_	7)? No
	Sı	gnature of officer or trustee	}	<u></u>	Date	Title		100		
		Print/Type preparer's na		Preparer's si		Date	Check If PTIN			
		7, 2, 2, 2, 2, 2, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3,		1		,, ,, ,	self- employed			
Pa	iid	JAMES S. D	ENTON		Thomas	11-4-16	P00	0971	378	
	eparer	Firm's name ► ARL		SOCIATI	ES, P.C.		Firm's EIN ► 73-13			
Us	se Only									
		Firm's address ► 30		NT AVE	NUE					
		ED	MOND, OK	73034 <u></u>			Phone no. 405-34			
							Fo	orm 99 0	0-PF	(2015)

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2015

Name of the organization

Employer identification number

	LT	. COL. ORVILLE O "BILL" MUNSON SCHOLAR	46-3349419						
Organizatio	on type (check on	э):							
Filers of:		Section:							
Form 990 o	r 990-EZ	501(c)() (enter number) organization							
		4947(a)(1) nonexempt charitable trust not treated as a private foundation							
		527 political organization							
Form 990-P	PF	X 501(c)(3) exempt private foundation							
		4947(a)(1) nonexempt charitable trust treated as a private foundation							
		501(c)(3) taxable private foundation							
-	-	covered by the General Rule or a Special Rule . '), (8), or (10) organization can check boxes for both the General Rule and a Special Rul	le. See instructions.						
General Ru	ule								
	_	filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling one contributor. Complete Parts I and II. See instructions for determining a contributor							
Special Ru	ıles								
se an	ections 509(a)(1) a ny one contributor	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support nd 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amou line 1 Complete Parts I and II.	or 16b, and that received from						
ye	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.								
ye ıs pı	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year								
but it must	t answer "No" on	at is not covered by the General Rule and/or the Special Rules does not file Schedule Beart IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Fithe filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	Form 990-PF, Part I, line 2, to						

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Name of organization

Employer identification number

LT. COL. ORVILLE O "BILL" MUNSON SCHOLAR	LT.	COL.	ORVILLE	0	"BILL"	MUNSON	SCHOLAR	
--	-----	------	---------	---	--------	--------	---------	--

46-3349419

<u> </u>	OD. ORVIDDE O BIDD MONSON SCHOLAR		1-3343413
Part I	Contributors (see instructions). Use duplicate copies of Part I if add	ditional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	, (d) Type of contribution
1	CURTIS A MUNSON 6717 NE 113TH STREET EDMOND, OK 73013-8356	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	BRUCE E MUNSON 61 FONTENAY CIRCLE LITTLE ROCK, AR 72223	\$10000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)

Name of organization

Employer identification number

LT.	COL.	ORVILLE	0	"BILL"	MUNSON	SCHOLAR

46-3349419

Part II	Noncash Property (see instructions) Use duplicate copies of Part I	I if additional space is needed.	-3343419
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			000 FT or 000 PT (0045)

ne of organi	zation		Employer identification number
COL	ORVILLE O "BILL" MUNS Exclusively religious, charitable, etc., contrib	utions to organizations described in	46-3349419 section 501(c)(7), (8), or (10) that total more than \$1,000 for
	the year from any one contributor. Complete col completing Part III, enter the total of exclusively religious, Use duplicate copies of Part III if additional	charitable, etc., contributions of \$1,000 or le	ss for the year (Enter this info once)
No. om art i	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
- - - -		(e) Transfer of gift	
-	Transferee's name, address, and	ZIP + 4	Relationship of transferor to transferee
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	Transferee's name, address, and	(e) Transfer of gift	Relationship of transferor to transferee
No. om art i	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
_		(e) Transfer of gift	
	Transferee's name, address, and	3 ZIP + 4	Relationship of transferor to transferee
No. om art I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	
-	Transferee's name, address, and	d ZIP + 4	Relationship of transferor to transferee
-			

CONTINUATION FOR 990-PF, PART IV 46-3349419 PAGE 1 OF 1

Part IV Capital Gains and Losses for Tax on Ir	vestment Income			
(a) List and describe the kind	i(s) of property sold, e.g., re	al estate,		(c) Date acquired (d) Date sold
	r common stock, 200 shs. N		D - Donation	(mo., day, yr.) (mo., day, yr.)
ta LORD ABBETT SHORT DURA		FUND - 146.60		VARIOUS 02/18/15 07/08/1402/18/15
c LORD ABBETT SHORT DURA		FUND - 224.21		07/08/1403/18/15
d LORD ABBETT SHORT DURA		FUND - 224.71		07/08/14/04/17/15
e LORD ABBETT SHORT DURA		FUND - 224.21		07/08/14/05/18/15
1 LORD ABBETT SHORT DURA		FUND - 225.22		07/08/14/06/18/15
g LORD ABBETT SHORT DURA		E FUND - 38.2	30	09/14/1201/20/15
h LORD ABBETT SHORT DURA	TION INCOME I	FUND - 224.21	5	05/01/1301/16/15
LORD ABBETT SHORT DURA		FUND - 38.886	S	VARIOUS 02/18/15
LORD ABBETT SHORT DURA		FUND - 59.540	S	05/01/1302/18/15
k LORD ABBETT SHORT DURA		FUND - 225.73	4	07/08/14/07/17/15
CAPITAL GAINS DIVIDEND	<u>s</u>	 		
<u>m</u>				
<u>n</u>				
0	 	10-4 - 4b - b 1		
(e) Gross sales price		g) Cost or other basis plus expense of sale) Gain or (loss) plus (f) minus (g)
a 113.		116.		
b 654.		667.		-13.
c 1000.		1020. 1018.	 	-20. -18.
d 1000.		1020.		-20.
f 1000.		1025.		-25.
C00	_ 	609.		-9.
h 1000.		1043.		-43.
173.		177.		-4.
60.		62.		-2.
k 1000.		1027.		-27.
2158.				2158.
m				
n				
0	(h) d	dation on 10/01/60		
Complete only for assets showing gain in column				sses (from col. (h)) of col. (h) gain over col. (k),
(i) F.M.V. as of 12/31/69 (j) Adju	sted basis 12/31/69	(k) Excess of col. (I) over col. (I), if any		not less than "-0-")
<u>a</u>		····		-3. 13
<u>b</u>				-13.
<u>c</u>				-20. -18.
d				-20.
f		··· ·	·	-25.
· a				<u>-9.</u>
h				-43.
1				-4.
<u></u>				-2.
k				-27.
				2158.
m				
<u>n</u>				
0				
2 Capital gain net income or (net capital loss)	{ If gain, also enter in Part If (loss), enter "-0-" in Pa	I, line 7 rt I, line 7	2	1974.
3 Net short-term capital gain or (loss) as defined in)		
If gain, also enter in Part I, line 8, column (c).	, ,	}	_	27 / 2
If (loss), enter "-0-" in Part I, line 8			3	N/A

FORM 990-PF	DIVIDENDS	AND INTER	EST FROM SECUR	ITIES S'	PATEMENT 1
SOURCE	GROSS AMOUNT		(A) REVENUE S PER BOOKS		ADJUSTED
RAYMOND JAMES FINANCIAL SERVICES INC RAYMOND JAMES	921.		0. 921.	921.	
FINANCIAL SERVICES INC	2158.	215	8. 0.	0.	
TO PART I, LINE 4	3079.	215	8. 921.	921.	
FORM 990-PF		TAX	ES	s	FATEMENT 2
DESCRIPTION		(A) EXPENSES PER BOOKS		ADJUSTED	CHARITABLE
FOREIGN TAXES WITHHE	ELD	4.	4.		0.
TO FORM 990-PF, PG 1	T.N 19	4.	4.		0.

FORM 990-PF OTH	ER INVESTMENTS		STATEMENT 3
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
RAYMOND JAMES - MUTUAL FUNDS	COST	50788.	44966.
TOTAL TO FORM 990-PF, PART II, LIN	E 13	50788.	44966.

FORM 990-PF

LIST OF SUBSTANTIAL CONTRIBUTORS
PART VII-A, LINE 10

ADDRESS

CURTIS A MUNSON

ADDRESS

6717 NE 113TH STREET
EDMOND, OK 73013-8356

BRUCE E MUNSON

61 FONTENAY CIRCLE
LITTLE ROCK, AR 72223

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 5

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

CURTIS A MUNSON 6717 NE 113TH STREET EDMOND, OK 73013-8356

TELEPHONE NUMBER

NAME OF GRANT PROGRAM

(405) 209-1136

LT COL ORVILLE O "BILL" MUNSON SCHOLARSHIP FUND

FORM AND CONTENT OF APPLICATIONS

ANY GRADUATING SENIOR FROM WESSINGTON SPRINGS HIGH SCHOOL, WESSINGTON, SOUTH DAKOTA, MAY COMPLETE A STANDARD APPLICATION FORM PROVIDED BY THE ORGANIZATION AND SUBMIT IT TO THE SCHOOL ADMINISTRATION. THE SCHOOL ADMINISTRATION THEN FORWARDS THE APPLICATIONS TO THE DIRECTORS.

ANY SUBMISSION DEADLINES

JANUARY 31 PRIOR TO END OF SPRING SEMESTER.

RESTRICTIONS AND LIMITATIONS ON AWARDS

SCHOLARSHIPS ARE LIMITED TO 36 MONTHS, AND THE STUDENT MUST PROVIDE PERIODIC PROOF OF RE-ENROLLMENT, MAINTAIN A PASSING AVERAGE, AND STAY IN SCHOOL.

> RECEIVED IN CORRES DEC 1 4 20.6

QGULN UIAH .