

# See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



## **Return of Private Foundation** or Section 4947(a)(1) Trust Treated as Private Foundation

OMB No 1545-0052 2015

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

For	cale	ndar	year 2015, or ta	x year beginnir	ng	, 2015	5, and ending		1	
		undate				•		Α	Employer identification nui	mber
Sto	ott	-Th	nedford Famer (or PO box number	nily Found	<u>ation</u>	address)	Room/suite	В	46-4246161 Telephone number (see instr	untenn)
			•		i to street a	address)	Roomsule	8	(405) 372-313	•
City o	r towi	n, state	ounty Road	⊥ 0 U and ZIP or foreign pos	tal code		<u> </u>	+~-	(403) 372 31	1 /
•		wat	•	<b>,</b>		OK	74075	C	If exemption application is	pending, check here 🕨
			that apply	Initial return		Initial return of a form			4 Fernian organizations sho	alk horo
	····	on an	app.,	Final return	F	Amended return	<b>F</b> ,	P	1 Foreign organizations, che	ck nere .
			<u> </u>	Address chan	ae i	Name change			2 Foreign organizations mee	eting the 85% test, check
H	Che	ck tyr	oe of organization	<del></del>	<u> </u>	(c)(3) exempt private fo	undation	1	here and attach computation	on · · •
•••		_ ′'	ction 4947(a)(1) n				private foundation	E	If private foundation status	was terminated
	E air n		value of all assets at				Cash Accrual		under section 507(b)(1)(A)	
			I, column (c), line 16)			Other (specify)		F	If the foundalion is in a 60-	month termination
•	• • \$		49	803.	(Part I.	column (d) must be on t	cash basis )	┨╏	under section 507(b)(1)(B)	
Pa		Δι	nalysis of Re		17 471 17	1			1	1
1 4	, .		penses (The t		ın	(a) Revenue and expenses per books	(b) Net investmer income	π	(c) Adjusted net income	(d) Disbursements for charitable
		CO	lūmns (b), (c), an	d (d) may not ne	ces-	CAPONIOGO POR DOGRA				purposes
			rily equal the amo ee instructions))	ounts in column (	(a)					(cash basis only)
	—т	1	Contributions, offis, grants	etc. received (attach sche	edule) .	22,567.	· .	·	* 2	· , }
		2	F-7 *	, etc., received (attach scho idation is not required to at		, , ,		,		
		_							<del> </del>	3 25
		3	Interest on savings and ter							,,
		4	Dividends and interest from	n secunlies · · · ·	•					1 13.
			Gross rents . Net rental income				,			7%
			or (loss)						2.5	
R			Net gain or (loss) from sale Gross sales price for a				× 8.5			,, ,
E V			assets on line 6a · ·	·		, .	, , ,	**	1	3 3
E	:	7	Capital gain net incom	•	2) • •	-				
N	א ט	8 9	Net short-term capital income modifications	gain • •		,				,
E			Gross sales less	, I			* * * * * * * * * * * * * * * * * * * *	,	2	
_		iva	returns and allowances			`. <sup>*</sup> . *		5	1.	, ,
		b	Less Cost of		-		, ,	`		,, ,,
		_	goods sold Gross profit or (loss) (attac	h schedule)						
	l	_	Other income (attach				<del> </del>		ļ	
		• •	•	,						1,8,24,
		12	Total Add lines 1 th	hrough 11.	<del></del>	22,567.				
	$\dashv$	13	Compensation of office							
		14	Other employee sal	aries and wages .			FORC			
		15	Pension plans, emplo	yee benefits.			NEW	نا سا	75-70	
	A	16 a	Legal fees (attach sch	nedule)					181	
	Ď	b	Accounting fees (attai	ch sch)		350.	I I FFR	26	2010 121	
	1	c	Other prof fees (attac	ch sch)			1-1		2	
o	N	17	interest					ا صر	TO DOS	
O P E R	S	18	Taxes (attach schedule)(s	ee instrs) • •			1 1 1 1 1	ا تروز		
R A	R	19	Depreciation (attach				िल्ला			
Ţ	Ť	•	schedule) and deplete				<del> </del>		1	
Ň G	E	20	Occupancy				<del> </del>		<del> </del>	
_	- 1	21 22	Printing and publication				-			
N	E X P	23	Other expenses (atta		-		<del> </del>		<del>  .</del>	
U	Εl		, ,	,						
	N	24	Total operating and	administrative		·	<del>                                     </del>			
D	SES		expenses Add lines			350.		_	<u> </u>	
	ا ً	25	Contributions gills, grants	s paid · · ·		1,200.				
		26	Total expenses and							
						1,550.	ļ			
		27	Subtract line 26 from			-	,			
;		ē	Excess of revenue of and disbursements	over expenses · .		21,017.	290 %		*	, , , , ,
			Net investment inco	ome (if negative, enter	· -0-)	21,017.			7	
			Adjusted net incom		•		<del>                                     </del>			
		<u> </u>	, najuotea net mooni	- 1 1.0901.7C, CIRCI -0	., .	<u> </u>	<del></del>		_ <del>'</del>	

Page 2

Parl	- 11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	year
1,411		(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing · · · · · · · · · · · · · · · · · · ·	_		
	2	Savings and temporary cash investments	30,216.	49,803.	49,803.
	3	Accounts receivable		_	
		Less allowance for doubtful accounts			
	4	Pledges receivable			
	_	Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach sch)		n an annual a samulu i marrie na mana ha	all and the second second
A		Less allowance for doubtful accounts			
S	8	Inventories for sale or use			
E	9	Prepaid expenses and deferred charges			
S	10 a	a Investments — U S and state government obligations (attach schedule)			
	t	nvestments — corporate stock (attach schedule)			
	c	: Investments — corporate bonds (attach schedule)			<del></del>
	11	Investments — land, buildings, and equipment basis			4
		Less accumulated depreciation (attach schedule)			
	12	Investments – mortgage loans			
	13	Investments — other (attach schedule)			<del> </del>
	14	Land, buildings, and equipment basis	,		8,
		Less accumulated depreciation (attach schedule)			
	15	Other assets (describe )			
	16	Total assets (to be completed by all filers — see the instructions Also, see page 1, item l).	30,216.	49,803.	49,803.
L	17	Accounts payable and accrued expenses			•
Å	18	Grants payable			
В	19	Deferred revenue	<u> </u>		*
L	20	Loans from officers, directors, trustees, & other disqualified persons			
T	21	Mortgages and other notes payable (attach schedule)			
1	22	Other liabilities (describe	· <del></del> -	<del></del>	•
E S	23	Total liabilities (add lines 17 through 22)			
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
NF	24	Unrestricted			, ,
E U T N	25	Temporarily restricted			
און D	26	Permanently restricted .			
A S B S A E L		Foundations that do not follow SFAS 117, check here X and complete lines 27 through 31.			
EL	27	Capital stock, trust principal, or current funds			,
T A S N	28	Paid-in or capital surplus, or land, bldg , and equipment fund			•
С	29	Retained earnings, accumulated income, endowment, or other funds	30,216.	49,803.	r
O E R S	30	Total net assets or fund balances (see instructions)	30,216.	49,803.	
	31	Total liabilities and net assets/fund balances			
-		(see instructions)	30,216.	49,803.	
		Analysis of Changes in Net Assets or Fund Balance		<del></del>	
1	Total end-	I net assets or fund balances at beginning of year — Part II, column ( of-year figure reported on prior year's return)	a), line 30 (must agree w	rith 1	30,216.
2	Ente	r amount from Part I, line 27a		2	21,017.
3		increases not included in line 2 (itemize) . Earnings		3	
4				4	51,233.
5		eases not included in line 2 (itemize) . Unrealized los		5	1,430.
6	Tota	net assets or fund balances at end of year (line 4 minus line 5) — Pa	art II, column (b), line 30	6	49,803.

(a) List and describ	d Losses for Tax on Investme be the kind(s) of property sold (e.g., real lise, or common stock, 200 shares MLC	estate, (	b) How acquired P — Purchase D — Donation	(C) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1 a					
b					
С					
d					
е			-	-	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) mi	
a					
b c					<del></del>
e	<del> </del>				<del></del>
	l l ving gain in column (h) and owned by th	o foundation on 12/21/60		<del>-</del>	
(i) F M V	(j) Adjusted basis	(k) Excess of col (i)		(I) Gains (Co ain minus col (k), b	
as of 12/31/69	as of 12/31/69	over col (j), if any	th	an -0-) <b>or</b> Losses (fr	om col (h))
a					
b					_
c	<del>                                     </del>	<del></del>			
d					
e					
2 Capital gain net income or (ne	t capital loss) If gain, also if (loss) enter	enter in Part I, line 7 er -0- in Part I, line 7	2		
3 Net short-term capital gain or	(loss) as defined in sections 1222(5) and				
If gain, also enter in Part I, line	8, column (c) (see instructions) If (loss	s), enter -0-			
ın Part I, line 8		<u> </u>	. 3		
Part V Qualification Und	er Section 4940(e) for Reduce	ed Tax on Net Investme	nt Income		
	ction 4942 tax on the distributable amou lify under section 4940(e) Do not comp	• •	od?	Yes	No
Enter the appropriate amount	in each column for each year, see the ir	nstructions before making any	entries		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asset	s (col	(d) Distribution (b) divided by co	
2014	0.		0.	· · · · · · · · · · · · · · · · · · ·	0.00000
2013	0.			·	
2012				<del></del>	
2011					
2010			<del> </del>		
2 Total of line 1, column (d) .			. 2		0.00000
3 Average distribution ratio for the number of years the foundation	ne 5-year base period — divide the total n has been in existence if less than 5 ye	on line 2 by 5, or by the ears	3		0.00000
4 Enter the net value of nonchar	itable-use assets for 2015 from Part X,	line 5	. 4		0
5 Multiply line 4 by line 3			. 5		0
6 Enter 1% of net investment inc	come (1% of Part I, line 27b)		6_		
7 Add lines 5 and 6			. 7		0
8 Enter qualifying distributions fr	om Part XII, line 4		8_		
		1b, and complete that part us			

orm	990-PF (2015) Stott-Thedford Family Foundation 46-4246161		Р	age 4
Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instruction	s)		
1 a	Exempt operating foundations described in section 4940(d)(2), check here • and enter 'N/A' on line 1			
	Date di ruling or determination letter (attach copy of letter if necessary – see instrs)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V,			_
	check here . A and enter 1% of Part I, line 27b			
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)   -			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
3	Add lines 1 and 2			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			0.
6	Credits/Payments			
а	2015 estimated tax pmts and 2014 overpayment credited to 2015			
b	Exempt foreign organizations — tax withheld at source			
С	Tax paid with application for extension of time to file (Form 8868) 6 c	4		
d	Backup withholding erroneously withheld			
7	Total credits and payments Add lines 6a through 6d			-
8	Enter any penalty for underpayment of estimated tax. Check here If Form 2220 is attached			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			0.
	Enter the amount of line 10 to be Credited to 2016 estimated tax			
Pari	VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	`	Yes	No
14	participate or intervene in any political campaign?	1 a		Х
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for the definition)?	1 b		Х
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities			
	Did the foundation file Form 1120-POL for this year?	1 c	- ~	Χ,
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation \$\bigs\\$ \\$ (2) On foundation managers \cdot \bigs\\$			
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	•	1	,
	foundation managers * \$	-		-
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	_2		<u>X</u>
•	· · · · · · · · · · · · · · · · · · ·			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3		Х
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a	İ	X
	If 'Yes,' has it filed a tax return on Form 990-T for this year?	4 b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
-	If 'Yes,' attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	1		
·	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X	i
7	Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, col. (c), and Part XV	7	Х	
8 a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	OK - Oklahoma			
h	If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Altorney General	_		
	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation	8 b	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		Х

Form 990-PF (2015)

10

Form	n 990-PF (2015) Stott-Thedford Family Foundation 46-42461	51	F	Page 5
	rt VII-A Statements Regarding Activities (continued)	7		
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	. 11		x
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If 'Yes,' attach statement (see instructions)	. 12		_x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address	. 13	X	<u> </u>
14	The books are in care of Damas	372		·
• •	The books are in care of $\$ Thomas R Thedford $\$ Telephone no $\$ (405) Located at $\$ 30751 County Road 160 $\$ Stillwater OK $\$ ZIP+4 $\$ 74075	_5/2	:	: <u>-</u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	- <del>-</del> -		-
	and enter the amount of tax-exempt interest received or accrued during the year			ш
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a		Yes	No
10	bank, securities, or other financial account in a foreign country?	16		Х
	See the instructions for exceptions and filing requirements for FinCEN Form 114 If 'Yes,' enter the name of the foreign country			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required		-1	
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)	1		
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No	1	'	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?		,	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1		
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?	,		
	(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	o If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> 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)?	1 b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	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?	1 0		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section $4942(j)(3)$ or $4942(j)(5)$ )			-
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			
Ŀ	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer 'No' and attach statement — see instructions )	. 2 t		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here  20, 20, 20, 20			
3 a	2 Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?			
t	of 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 foundation had excess business holdings in 2015)	3 t		
4 a	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4 8	1	Х
ŀ	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?	. 41		X
BAA		orm 99	0-PF (	<del></del>

Form 990-PF (2015) Stott-Thedford Far			46-42	46161 Page <b>6</b>
Part VII-B   Statements Regarding Activity		n 4720 May Be Rec	uired (continued)	<del></del>
5 a During the year did the foundation pay or incur a	-		п., г	1
(1) *Carry on propaganda, or otherwise attempt	to influence legislation (s	ection 4945(e))?	··· · Yes X	No
(2) Influence the outcome of any specific public on, directly or indirectly, any voter registration	n drive?			No
(3) Provide a grant to an individual for travel, str			Yes X	No
(4) Provide a grant to an organization other that in section 4945(d)(4)(A)? (see instructions)			Yes X	No
(5) Provide for any purpose other than religious educational purposes, or for the prevention	of cruelty to children or a	nımals?	Yes X	No
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in a (see instructions)?	current notice regarding	disaster assistance		5 b
Organizations relying on a current notice regard	ng disaster assistance ch	neck here	► _	
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsit	foundation claim exemplifity for the grant?	tion from the	Yes	]No
If 'Yes,' attach the statement required by Regula	tions section 53 4945-5(d	d)	_	, , ,
6 a Did the foundation, during the year, receive any on a personal benefit contract?			ا لــا	]No
<b>b</b> Did the foundation, during the year, pay premium	ns, directly or indirectly, c	on a personal benefit con	tract?	6b X
If 'Yes' to 6b, file Form 8870 7 a At any time during the tax year, was the foundati	on a party to a prohibitor	tay chalter transaction?	Tyes X	No
b If 'Yes,' did the foundation receive any proceeds				7 b
Part VIII Information About Officers, D				
and Contractors	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,	p,
1 List all officers, directors, trustees, foundation	n managers and their c	ompensation (see inst	ructions).	
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Thomas R Thedford				
30751 County Road 160	Director			
Stillwater OK 74075	1.00	0.	0.	0.
Libby E Stott				
30751 County Road 160	Director	•		
Stillwater OK 74075	1.00	0.	0.	0.
			**.	
2 Compensation of five highest-paid employee			(d)Contributions to	(e) Expense account.
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	other allowances
None				
	j			
				<del>  -</del>
		<u> </u>	<u> </u>	
Total number of other employees paid over \$50,000		40.4F		None Form <b>990-PF</b> (2015)
BAA	TEEA0306 10	/13/15		101111 330-FT (2013)

Form 990-PF (2015) Stott-Thedford Family Foundation  Part VIII Information About Officers, Directors, Trustees, Foundation and Contractors (continued)	46-424 dation Managers, Highly Paid E	
3 Five highest-paid independent contractors for professional services (see in	structions). If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None		
~		
~		
Total number of others receiving over \$50,000 for professional services		None
		None
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year include relevant statistical in organizations and other beneficiaries served, conferences convened, research papers produced, etc	nformation such as the number of	Expenses
1		
2		
3		
		<del></del>
4		
Part IX-B Summary of Program-Related Investments (see instruc	ctions)	
Describe the two largest program-related investments made by the foundation during t	he tax year on lines 1 and 2	Amount
1		<del></del>
2		
All other program-related investments See instructions		
3		
T. 1. 1. 1. 1. 1. 2.	<b>-</b>	
Total. Add lines 1 through 3		Form <b>990-PF</b> (2015)

Form <b>990-PF</b> (2015)	Stott-Thedford Family Foundation	46-4246161
Part X Minimu	um Investment Return (All domestic foundations must complete this part	. Foreign foundations,

Page 8

	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes	4	
	Average monthly fair market value of securities	1 a	
	O Average of monthly cash balances	1 b	
	Fair market value of all other assets (see instructions)	1 c	
		1 d	
,	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
2	(attach detailed explanation)	2	
3	Subtract line 2 from line 1d	3	0.
3		3	
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	0.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.
Pa	<b>TXI</b> Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating and certain foreign organizations check here ► and do not complete this part.)	founda	tions
1	Minimum investment return from Part X, line 6	1	0.
2 a	ı Tax on investment income for 2015 from Part VI, line 5		
Ł	Income tax for 2015 (This does not include the tax from Part VI )		
C	Add lines 2a and 2b	2 c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	0.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	0.
Par	Qualifying Distributions (see instructions)		
ä	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes Expenses, contributions, gifts, etc – total from Part I, column (d), line 26	1 a	
ł	Program-related investments — total from Part IX-B	1 b	
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 Suitability test (prior IRS approval required)	3 a	
i	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	
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	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the for qualifies for the section 4940(e) reduction of tax in those years	undation	
BAA		i	orm <b>990-PF</b> (2015)

Form 990-PF (2015)

# Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				0.
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only			0.	
b Total for prior years 20 , 20 , 20			<del></del>	
3 Excess distributions carryover, if any, to 2015				
a From 2010 0 .				
b From 2011 0 .				
<b>c</b> From 2012 0.				
<b>d</b> From 2013 0 .				
			ı	
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2015 from Part				
XII, line 4  \$				
a Applied to 2014, but not more than line 2a				
b Applied to undistributed income of prior years (Election required — see instructions)			,	
c Treated as distributions out of corpus (Election required — see instructions)				
d Applied to 2015 distributable amount			•	
e Remaining amount distributed out of corpus	0.			
5 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:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		_
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed				
d Subtract line 6c from line 6b Taxable amount — see instructions		0.		
e Undistributed income for 2014 Subtract line 4a from				
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2015 Subtract lines 4d and 5 from line 1 This amount must be				
distributed in 2016				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required — see instructions)				
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a				
	0.			
10 Analysis of line 9				
a Excess from 2011 . 0.				
b Excess from 2012 . 0.				
© Excess from 2013 0.				
<b>d</b> Excess from 2014 . 0.	_			
e Excess from 2015 . 0.			<u> </u>	

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)  1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling  b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed (a) 2015 (b) 2014 (c) 2013 (d) 2012  c Qualifying distributions from Part XII, line 4 for each year listed 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	N/A 4942(j)(5) (e) Total							
is effective for 2015, enter the date of the ruling  b Check box to indicate whether the foundation is a private operating foundation described in section  2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed  b 85% of line 2a  c 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 Subtract line 2d from line 2c  C Complete 3a, b, or c for the								
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed  b 85% of line 2a  c 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 Subtract line 2d from line 2c  c Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c  Complete 3a, b, or c for the								
income from Part I or the minimum investment return from Part X for each year listed  b 85% of line 2a  c 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	(e) Total							
investment return from Part X for each year listed	(e) Total							
C 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								
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								
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								
for active conduct of exempt activities Subtract line 2d from line 2c  Complete 3a, b, or c for the								
alternative test relied uport								
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 lest — 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)(ii)								
(3) Largest amount of support from an exempt organization								
(4) Gross investment income								
Part XV   Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year — see instructions.)	l							
<ul> <li>Information Regarding Foundation Managers:         <ul> <li>a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))</li> </ul> </li> <li>b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest</li> </ul>								
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs:  Check here X if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicity requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions complete items 2a, b, c, and d								
a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed								
b The form in which applications should be submitted and information and materials they should include								
c Any submission deadlines								
d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors								

TEEA0310 10/13/15

BAA

Form **990-PF** (2015)

Page 11

3 Grants and Contributions Paid During the Year or Approved for Future Payment									
Recipient		If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount				
Name and address (home of	or business)								
a Paid during the year eridian Technology Center 312 S. Sangre Road				Charitable	1 200				
Stillwater	OK 74074		501 (c) (3)	Charitable	1,200				
					1 000				
Total	<del></del>	· · · · · · ·	· · ·		a 1,200.				
b Approved for future payment					b				

# Part XVI-A Analysis of Income-Producing Activities

Enter gros	ss amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 514	(0)
	gram service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (See instructions)
a						
b						
c					······································	
d						
e	<u> </u>		<del></del>			
f				<del></del>		
	s and contracts from government agencies					
	mbership dues and assessments					
	est on savings and temporary cash investments		<del></del>			
	dends and interest from securities			<del>                                     </del>		<del></del>
	rental income or (loss) from real estate			<del>  </del>		
	et-financed property			<b>↓</b>		
	debt-financed property					
	ental income or (loss) from personal property			<del> </del>		
	er investment income					<del></del>
	or (loss) from sales of assets other than inventory				·	
	income or (loss) from special events .					
<b>10</b> Gro	ss profit or (loss) from sales of inventory					
11 Oth	er revenue				,	
a						
b						
С						
ď						
е						
12 Sub	total Add columns (b), (d), and (e)					
13 Tota	al. Add line 12, columns (b), (d), and (e)			•	13	
(See work	sheet in line 13 instructions to verify calculations	)				
Part X\	/I-B Relationship of Activities to the	Accompli	shment of Exem	nt Purnos	:AS	
- 411771						
Line No ▼	Explain below how each activity for which inco accomplishment of the foundation's exempt pi	me is reporte	d in column (e) of Part	XVI-A contri	buted importantly to	the
	accomplishment of the foundation's exempt po		Thair by providing fun	us ioi sucii p	urposes) (See instru	
					<del></del>	
<del></del>						
					<del></del>	
					·····	
			···			
		. <u></u>				
			- <u>-</u>			
			<del> </del>			
BAA		TEEA0	502 10/13/15			Form <b>990-PF</b> (2015)

TEEA0502 10/13/15

Dart VVIII	Information Demanding	Transfore	Tanad	Transactions	and Dalatianahir	a Mith Nanaharitable	_
rait AVII	Information Regarding	ransiers	ro anu	mansactions	and Relationship	os with Nonchantable	
	Exempt Organizations						

	_,									Yes	No
d	escribe	rganization directl d in section 501(c) o political organiza	) of the Code (oth	gage in any of the er than section	ne following wit 501(c)(3) orgai	h any othe าเzations) ด	r organization or in section 527,			165	NO
аΤ	ransfers	from the reportin	g foundation to a	noncharitable e	exempt organiz	ation of					ľ
		1 <i></i>							1 a (1)		Х
	•	rassets							1 a (2)		Х
	,	nsactions							15 (-)		<u> </u>
		-	maharitahla ayon	nt araanization					1 h /4\		,
		s of assets to a no		-		• •			1 b (1)		X
	•	hases of assets fr				•			1 b (2)		_X_
(3	3) Rent	al of facilities, equ	iipment, or other a	assets					1 b (3)		X
(4	l) Reim	ibursement arrang	gements						1 b (4)		X_
(5	5) Loan	s or loan guarante	ees						1 b (5)		X
(6	<ol><li>Perfo</li></ol>	ormance of service	es or membership	or fundraising:	solicitations .				1 b (6)		X
c S	haring o	of facilities, equipn	nent, mailing lists,	other assets, o	or paid employe	es			1 c		Χ
th a	ne good ny trans	s, other assets, or action or sharing	services given by arrangement, sho	the reporting for the transfer of the transfer	oundation If the the value of the	e foundation le goods, c	on received less that other assets, or se		ın 		
(a) Line	no	(b) Amount involved	(c) Name	of noncharitable ex	empt organization		(d) Description of tran	sfers, transactions, and s	haring arrang	gements	<u> </u>
		<del>-</del>									
		<u> </u>									
		<del> </del>			<del></del>			·		-	
									<del></del>		
								·····			
		<del></del>			- <del></del>						
			<del></del>				· · · · · · · · · · · · · · · · · · ·		<del></del>		
d	escribe		of the Code (oth				mpt organizations 17?		Yes	X	No
	(a)	Name of organiza	ation	( <b>b</b> ) Ty	pe of organizat	ion	(0	) Description of relat	onship		
											_
	Under po	enalties of perjury, I decl	lare that I have examine	ed this return, including	ng accompanying s	chedules and	statements, and to the b	est of my knowledge and be	kef, it is true,		
Sign Here	correct,	and complète Declaration	on of preparer (other the	an taxpayer) is based	d on all information of	of which prepa	•		May the If this return preparer s	with the	
		w/nac	W/ JM	0700	173	190	<u>Director</u>		(see instri	uctions)?	<u>`</u>
	Signal	ure of officer or trustee	name.	1	Date	·	<del></del>	<del> </del>	PTIN	Yes	No
		Print/Type preparer s r		Preparer	s signature	N	Daig	Checkif		F 6 6	
Paid		Mark E Gun	kel CPA	N. P.	puri VI		111116	self-employed	P00285	582	
Prepa	arer	Firm's name	Mark E. G	unkel, CPA	A, PC			Firm's EIN ► 73-1;	3795 <u>35</u>		
Use C	Only	Firm's address	PO Box 72					_			
		<u> </u>	Stillwate:	r		OK 7	4076	Phone no (405	624-9	999	
BAA									Form 990	)-PF (2	2015)

#### Schedule B

(Form 990, 990-ĘZ, 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, 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Name of the organization		Employer Identification number
Stott-Thedford Family	46-4246161	
Organization type (check one)		
Filers of.	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organ	inization
	4947(a)(1) nonexempt charitable trus	st <b>not</b> treated as a private foundation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trus	st treated as a private foundation
	501(c)(3) taxable private foundation	· · · · · · · · · · · · · · · · · · ·
Check if your organization is covered	by the General Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or	(10) organization can check boxes for both the Gener	ral Rule and a Special Rule See instructions
General Rule  X For an organization filing Form 99 property) from any one contributor	0, 990-EZ, or 990-PF that received, during the year, co Complete Parts I and II See instructions for determine	ontributions totaling \$5,000 or more (in money or ning a contributor's total contributions
Special Rules		
under sections 509(a)(1) and 1700 received from any one contributor	ection 501(c)(3) filing Form 990 or 990-EZ that met the b)(1)(A)(vi), that checked Schedule A (Form 990 or 99, during the year, total contributions of the greater of (1 Form 990-EZ, line 1 Complete Parts I and II	90-EZ), Part II, line 13, 16a, or 16b, and that
during the year, total contributions	ection 501(c)(7), (8), or (10) filing Form 990 or 990-EZ of more than \$1,000 exclusively for religious, charitab cruelty to children or animals. Complete Parts I, II, and	ole, scientific, literary, or educational
during the year, contributions excl \$1,000 If this box is checked, enti- charitable, etc., purpose Do not c	ection 501(c)(7), (8), or (10) filing Form 990 or 990-EZ usively for religious, charitable, etc., purposes, but no ser here the total contributions that were received during omplete any of the parts unless the <b>General Rule</b> apps, charitable, etc., contributions totaling \$5,000 or more	such contributions totaled more than  ig the year for an exclusively religious,  blies to this organization because
Caution. An organization that is not c 990-PF), but it must answer 'No' on P	overed by the General Rule and/or the Special Rules o art IV, line 2, of its Form 990, or check the box on line meet the filing requirements of Schedule B (Form 990)	does not file Schedule B (Form 990, 990-EZ, or H of its Form 990-EZ or on its Form 990-PF,

	B (Form 990, 990-EZ, or 990-PF) (2015)	Page	1 of 1 of <b>Part</b>
Name of org	_	' *	er identification number
	Thedford Family Foundation		246161
Part I	Contributors (see instructions) Use duplicate copies of Part I if additional space		
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Thomas Thedford	-	Person X Payroll
	30751_County_Road_160	\$ <u>22,567.</u>	Noncash
	Stillwater OK 74075		(Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for
			noncash contributions )
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash
			(Complete Part II for noncash contributions )
RAA	TEE 0702 4042/45	Schedule B /Form 9	90 990-F7 or 990-PF) (2015)