

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



REVENUE PROCEDURE 2014-11, RETROACTIVE REINSTATEMENT

990-PF

Return of Private Foundation

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

2015

Department of the Treasury

or section 4347 (a)(1) Trust Treated as 1 Trate 1 buildanon

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

Open to Public Inspection

		Information about Form 990-FF and its set				Jupi. Topest	20 Functiopocion.
		lar year 2015 or tax year beginning	, 2015, a	nd ending			, 20
		oundation			• -	dentification number	
		FAMILY PROVIDENCE FOUNDATION			46-4342		
		nd street (or P O box number if mail is not delivered to street address)	Ro	om/suite	B Telephone	number (see instructions)	Ţ.
		N 18TH ST	<u></u>				
	•	vn, state or province, country and ZIP or foreign postal code			C If exempting	on application is pending	check here
		DMA CITY, OK 73103-1903					. —
G	Jheck a	```	of a former public charit	ty	D 1. Foreign	organizations, check here	e . ▶ ∐
		Final return Amended ret	_		2 Foreign	organizations meeting the	e 85% test
	35	Address change Name change			check h	nere and attach computation	on · ▶∐
4	٦ .	ype of organization X Section 501(c)(3) exempt priva				oundation status was term	ninated under
1			X Cash A	Accrual	section 50	17(b)(1)(A), check here .	· •
			X Cash A	Accidai		dation is in a 60-month ter	l I
	•	rear (from Part II, col. (c),	an annh hanna l		under sec	tion 507(b)(1)(B), check h	ere
$\overline{}$	ine 16)	Analysis of Revenue and Expenses (The total of	Off Cash Dasis)				
-	are i	amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and	(b) Net	nvestment	(c) Adjusted net	(d) Disbursements for charitable
		the amounts in column (a) (see instructions))	expenses per books		come	income	purposes (cash basis only)
	1	Contributions, gifts grants, etc., received (attach schedule)	13,000	, ,			(GGG, DGG, G')
	2	Check ► If the foundation is not required to attach Sch B	13,000	,	`		
	3	Interest on savings and temporary cash investments .				· - · / · · · · ·]	
	4	Dividends and interest from securities	4,791		4,791	4,791	
	5a	Gross rents				*,,,,,	
(V)	ь	Net rental income or (loss)					<u> </u>
Q	6a	Net gain or (loss) from sale of assets not on line 10				 	
35	ь	Gross sares price for all assets on line 6a					
₹	7	Capital gain net income (from Part IV, line 2)				· · · · · · · · · · · · · · · · · · ·	
General C	8	Net short-term capital gain .	······································	, , ,			
	1 '	Income modifications		7 17			
PE	10a	Gross sales less returns and allowances	<u> </u>	,		()	
C	b	Less Cost of goods sold					
0	c	Gross profit or (loss) (attach schedule)					
00	11	Other income (attach schedule)					2.
2017	12	Total. Add lines 1 through 11	17,791		4,791	4,791	
7	13	Compensation of officers, directors, trustees, etc .					
es	14	Other employee salaries and wages				· <u>.</u>	
Sus	15	Pension plans, employee benefits .					
Expenses	16a	Legal fees (attach schedule) .		ļ			
Ü	b	Accounting fees (attach schedule) STM108	1,100			1,100	
	C	Other professional fees (attach schedule) . STM109	2,607		2,607	2,607	
itra	17	interest		ļ		· · · · · · · · · · · · · · · · · · ·	
nis	18	Taxes (attach schedule) (see instructions)		ļ			
Administrativ	19	Depreciation (attach schedule) and depletion VED					2 5/20/2 /
Ą	20	Translation 20		 			
and	21	rraver, conterences, and incentings		 - -		······································	
<u>0</u>	23	Printing and publications 3 NOV 2 9 2017 Other expenses (attach schedule)		 			
ř.	24			 			
Operating	27	Add lines 13 through 23	3,707	}	2,607	3 707	
Ö	25	Contributions, gifts, grants paid	13,500		2,607	3,707	13.,500
	26	Total expenses and disbursements. Add lines 24 and 25	17,207	1	2,607		
_	27	Subtract line 26 from line 12	77,207	82.30.8	2,007	1987 8 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	13,300
	a	Excess of revenue over expenses and disbursements	584				
	Ь	Net investment income (if negative, enter -0-)	3.8000000000000000000000000000000000000	1		STONE SCHOOL	
	C	Adjusted net income (if negative, enter -0-)	100 July 100 State of	187.60	. 28 N 1/24	1.084	

For Paperwork Reduction Act Notice, see instructions.

LNE

Form 990-PF (2015)

Pa	irt II	Balance Sheets Attached scriedules and amounts in the description column	Beginning of year	End of	year
		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	231,942	13,000	13,000
	2	Savings and temporary cash investments		·	
	3	Accounts receivable	ļ		′ ,
		Less allowance for doubtful accounts	<u></u>		
	4	Pledges receivable		, i	
		Less allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			l
	1	disqualified persons (attach schedule) (see instructions)			
	7	Other notes and loans receivable (attach schedule)	` , "` ,		
		Less allowance for doubtful accounts ▶			
ssets	8	Inventories for sale or use			
SS	9	Prepaid expenses and deferred charges			
4	10a	investments - U S and state government obligations (attach schedule)			
	b	Investments - corporate stock (attach schedule)			
-	С	Investments - corporate bonds (attach schedule)			
	11	Investments land buildings, and equipment basis			X X
		Less accumula ed deprecial on (attach schedule)			,
	12	Investments - mortgage loans			
	13	Investments - other (attach schedule) . STM118		219,526	219,526
	14	Land buildings, and equipment basis			
		Less accumulated ceprecial on (attach schedule)		, ,	
	15	Other assets (describe ▶	ı		
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1. item i)	231,942	232,526	232,526
_	17	Accounts payable and accrued expenses	331,7312	232,320	232,320
	18	Grants payable			
es S	19	Deferred revenue .			,
Liabilities	20	Loans from officers, directors, trustees and other disqualified persons			N .
abi	21	Mortgages and other notes payable (attach schedule)			
Ξ	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	0	0	,
	-	Foundations that follow SFAS 117, check here		<u></u> _	`
G		and complete lines 24 through 26 and lines 30 and 31.			,
Balances	24	Unrestricted	231,942	232,526	
lan	25	Temporarily restricted .	231,712	232,320	•
Ва	26	Permanently restricted			`, v
Fund	-	Foundations that do not follow SFAS 117, check here			**
Ē	İ	and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			`
Assets or	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
sse	29	Retained earnings, accumulated income, endowment, or other funds			`('
¥	30	Total net assets or fund balances (see instructions)	321 042	222 526	
Net	31	Total liabilities and net assets/fund balances (see	231,942	232,526	S
	"	Instructions)	221 042	222 526	2, 4
D-	ırt II		231,942	232,526	
-		net assets or fund balances at beginning of year - Part II, column (a), line			
			So (must agree with		224 242
		of-year figure reported on prior year's return)		1	231,942
		amount from Part I, line 27a	• • •	2	584
		rincreases not included in line 2 (itemize)		3	
		ines 1, 2, and 3	• • • •	4	232,526
		eases not included in line 2 (itemize)	(1) 1	5	
6	rotal	net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	piumn (b), line 30	6	232,526

(a) List and describe t	the kind(s) of property sold (e.g., real ebuse, or common stock, 200 shs MLC	state	(b) How acquired P-Purchase D-Donation	(c) Dare ac (mo , da		e solđ lay yr)
1a						
b						
c						
d						
е						
(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		(h) Gain or (loss) (e) plus (f) minus (g)	
a						
b						
С						
d						
e					·	
Complete only for assets showin	ig gain in column (h) and owned by	the foundation on	12/31/69	(0)	Gains (Col. (h) gain min	nus
(i) F M V as of 12/31/69	(j) Ādjusted basis as of 12.31.69	(k) Exces over col	s of col (i) (j) if any		k) but not less than -0-) Losses (from col. (h))) or
a						
<u>b</u>						
С						
d						
e						
2 Capital gain net income or (net c	aniiai inee) ii	so enter in Part I, lii enter -0- in Part I, lii	•	2		
3 Net short-term capital gain or (lo	ss) as defined in sections 1222(5)	and (6)				
If gain, also enter in Part I, line 8	column (c) (see instructions) If (i	oss), enter -0- ın	3			
Part I line 8			J	3		
Part V Qualification Und For optional use by domestic private	der Section 4940(e) for Re				e	
Was the foundation liable for the sec f "Yes," the foundation does not qua 1 Enter the appropriate amount in (a)	dify under section 4940(e) Do not	complete this part			Yes (d)	X No
Base period years Calendar year (or tax year beginning	(b) Adjusted qualifying distribution	ns Net value of	(c) nonchantable use a	ssets	Distribution ratio (col (b) divided by col	1 (c))_
2014						···
2013						
2012 2011						
2010			<u> </u>			
2010						
2 Total of line 1 column (d)				2	0.0	
3 Average distribution ratio for the	5-year base period - divide the tot	al on line 2 by 5, or	by the	 -		
•	has been in existence if less than 5	•	•	3	0.0	
,		,		<u> </u>		
4 Enter the net value of noncharita	able-use assets for 2015 from Part	X, line 5		4	22	29,038
5 Multiply line 4 by line 3				5		
6 Enter 1% of net investment inco	me (1% of Part I, line 27b)			6		27
7 Add lines 5 and 6		,		7		2
8 Enter qualifying distributions from	m Part XII, line 4		-	8	1	13,500
· -	in line 7, check the box in Part VI,	line 1b. and comple	te that part using a	1% tax rate		

X

Form 990-PF (2015)

Part I, line 12, col (b)

Add lines 1 and 2

Credits/Payments

(1) On the foundation

10

Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			
	meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		<u>X</u>
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		<u>X</u>
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ RALPH O MCCOY Telephone no ▶ 214-4	198-3	454	
	Located at ▶ 330 LAS COLINAS BLVD, STE 212, Irving, TX ZIP+4 ▶ 75039	}		
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		,,	
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	Ĺ	X
	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	· _{[··} ,···		
	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)		<u> </u>	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from lend money to or otherwise extend credit to (or accept it from) a			
	disqualified person? Yes X No		;	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		,	,
	(4) Pay compensation to or pay or reimburse the expenses of, a disqualified person? Yes X No	` `		
	(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)? Yes X No	3	`	
	(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) Yes X No		`	,
				1
þ	If any answer is 'Yes" to 1a(1)-(6), did any of the acts tail to qualify under the exceptions described in Regulations	1b		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	15		-
_	Organizations relying on a current notice regarding disaster assistance check here Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1 :		
С	were not corrected before the first day of the tax year beginning in 2015? .	1c	İ	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	1		
_	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			1
	6e, Part XIII) for tax year(s) beginning before 2015?	ĺ	1	-
	If "Yes," list the years ► 2014 ,		[
b	Are there any years listed in 2a for which the foundation is not 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)	2b	<u> </u>	X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			,
	•			(,
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			1
	at any time during the year? . $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	1, 1	1	1
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	1. 1	1.	13
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of	1.	, , `	1 500
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C. Form 4720, to determine if the		100	
	foundation had excess business holdings in 2015)	3b	⊢ —	1
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	1, 1 3	X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its	1	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	~ ~~~
	charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b Form 9	OLDE	(2015)
EEA		UIIII 9	90° F F	(4010)

orm	990-PF (2015) MCCOY FAMILY PROVIDE	ENCE F	OUNDATION				4	46-4342	2693	Р	age 6
Pai	t VII-B Statements Regarding Activitie	s for V	Which Forn	n 4720	May Be I	Requir	ed (cor	ntinued)			
5a	During the year did the foundation pay or incur any an	nount to							7.57	,	
	(1) Carry on propaganda, or otherwise attempt to infli	uence leg	gislation (section	n 4945(e))?	[Yes	X No		11	•
	(2) Influence the outcome of any specific public election	ion (see s	section 4955),	or to car	ry on,		_	_			5
	directly or indirectly any voter registration drive?					. [Yes	X No			2
	(3) Provide a grant to an individual for travel, study, o	r other si	ımılar purposes	?		Ī	Yes	X No		1	,
	(4) Provide a grant to an organization other than a ch				ribed in	L					,
	section 4945(d)(4)(A)? (see instructions)					-	Yes	X No			
	(5) Provide for any purpose other than religious, char	utable so	rientific literary	or educ	rational	·		٠٠٠ رين			
	purposes, or for the prevention of cruelty to children	•	•	, or cauc	Jaconai	ſ	Yes	X No		,	
ь	If any answer is "Yes" to 5a(1)-(5), did any of the tran			nder the	eventions	Jaccuba Jaccuba		21		~	
Ü	Regulations section 53 4945 or in a current notice reg						J 111		5b		
	Organizations relying on a current notice regarding dis	•			instructions)	•		. [30		
	If the answer is "Yes" to question 5a(4), does the four				· tov					`	
C			aim exemption	HOITI ME	e lax	ſ	¬ _v	П.			
	because it maintained expenditure responsibility for the	-	CO 4045 5(4)	•		Ĺ	Yes	∐ No			
c	If "Yes," attach the statement required by Regulations										`,
oa	Did the foundation, during the year, receive any funds	, airectly	or indirectly, to	pay pre	emiums	ſ	٦.,	(7 7)	-		·
_	on a personal benefit contract?					٠ . ا	Yes	X No		,	37
O	Did the foundation, during the year, pay premiums, dir	ectly or i	ndirectly, on a	persona	i benetit cont	ract		-	6b		<u>X</u>
_	If "Yes" to 6b, file Form 8870				_	r	- 1	(T.)	1.		•
	At any time during the tax year was the foundation a	•	•			l	Yes	X No	1 1		
	If "Yes," did the foundation receive any proceeds or h							. =			
Pa	t VIII Information About Officers, Dire	ectors,	Trustees,	Found	lation Ma	nager	s, High	ly Paid	Fublo	yees	5,
	and Contractors										
1 L	ist all officers, directors, trustees, foundation man										
	(a) Name and address		e, and average rs per week		mpensation of paid,		Contribution		(e) Expe	ense ad allowan	
		devote	ed to position	en	ter -0-)	and def	erred com	persation	Ollici .	A11777 (211	
	PH O MCCOY	PRESI	DENT/TREAS	•							
330	LAS COLINAS BLVD, STE 212, 75039		0.00		0			0			0
	AN D MCCOY	VICE-	PRESIDENT,	,							
	LAS COLINAS BLVD STE 212, 75039		0.00		0			0			0
MOR	GAN E MCCOY	DIREC'	TOR								
330	LAS COLINAS BLVD STE 212, 75039		0.00		0			0			_0
	ISON E MCCOY	DIREC'	TOR								
330	LAS COLINAS BLVD STE 212, 75039		0.00		0			0			_ 0
2 (Compensation of five highest-paid employees (othe	r than th	ose included	on line	1 - see instr	uctions	, If none	, enter			
"	NONE."										
			(b) Title, and	avernee.				ibulions to			
	(a) Name and address of each employee paid more than \$50	0,000	hours per w	reek "	(c) Comper	nsation		ee benefit d deferred i	(e) Expe	nse ac allowan	
			devoted to po	sition				ensation			
NON	É										
			1								
			1		[1			
					 						
			1		1		}				
			ŀ		1						
					 				-		
Tota	number of other employees paid over \$50,000		L.,		<u></u>				-		

Form 990-PF (2015)

Form 990-PF (2015) MCCOY FAMILY PROVIDENCE FOUNDATION

EEA

Page 7

Form 990-PF (2015)

	ti on About Officers, Directors, Trustees, Fo I tractors (continued)	oundation Managers, Highly Pa	uid Employees,
3 Five highest-paid inc	dependent contractors for professional services (see ii	nstructions). If none, enter "NONE."	-
	and address of each person paid more than \$50 000	(b) Type of service	(c) Compensation
NONE			
Total sumber of others soon	eiving over \$50,000 for professional services	. >	

Part IX-A Summa	ary of Direct Charitable Activities		
List the foundation's four larg	est direct charitable activities during the tax year. Include relevant	statistical information such as the number of	
	eliciaries served, conferences convened research papers produce		Expenses
1 DISTRIBUTIONS T	O CHARITABLE ORGANIZATIONS		
			13,50
2			
3			
4			
Part IX-B Summa	ary of Program-Related Investments (see in	structions)	
	gram related investments made by the foundation during the tax y		Amount
1	,		
2			
All other program-related inve	stments See instructions		
3			
Takal Add be - 4 thus, -t- (0	<u> </u>	
Total. Add lines 1 through 3)	<u></u>	

46-4342693

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign	found	lations,
	see instructions.)	,	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes	,	İ
а	Average monthly fair market value of securities .	1a	219,526
þ	Average of monthly cash balances .	1b	13,000
С	Fair market value of all other assets (see instructions)	1c	0
d	Total (add lines 1a, b, and c)	1d	232,526
e	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	232,526
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see		
	instructions)	4	3,488
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	229,038
6	Minimum investment return. Enter 5% of line 5	6	11,452
Pa	rt XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for	unda	tions
-	and certain foreign organizations check here ▶ and do not complete this part.)		-
1	Minimum investment return from Part X line 6	1	11,452
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) 2b		
С	Add lines 2a and 2b	2c	22
3	Distributable amount before adjustments Subtract line 2c from line 1	3	11,430
4	Recoveries of amounts treated as qualifying distributions .	4	
5	Add lines 3 and 4	5	11,430
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	11,430
TD:	rt XII Qualifying Distributions (see instructions)		
Га	TO A COURT OF THE		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	13,500
b	Program-related investments - total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
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	13,500
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	22
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	13,478
	Note. The amount on line 6 will be used in Part V column (b), in subsequent years when calculating whether the	e found	lation
	qualifies for the section 4940(e) reduction of tax in those years		

Par	t XIII Undistributed Income (see instru	uctions)			
		(a)	(b)	(c)	(d)
1	Distributable amount for 2015 from Part XI,	Corpus	Years prior to 2014	2014	2015
	line 7 .	, , ,		· ****	11,430
2	Undistributed income, if any, as of the end of 2015		, T	, ,	, , ,
а	Enter amount for 2014 only		7.5	4,828	
b	Total for prior years	1.			
3	Excess distributions carryover if any, to 2015				
a	From 2010	, , ,			
b	From 2011	1''			
c	From 2012	1		, ,	
ď	From 2013 .		, , ,		, , , ,
e	From 2014	1 ' , ' , ' ,	, , , , , , , , , , , , , , , , , , , ,		5.
f	Total of lines 3a through e	1	, ,		
4	Qualifying distributions for 2015 from Part XII,				
7	line 4 ▶ \$ 13,500	` '	,	, , ,	· ·
_ a-	Applied to 2014, but not more than line 2a			4,828	·
b	Applied to undistributed income of prior years			1,020	
J	(Election required - see instructions)	,			•
_	•	· · · · · · · · · · · · · · · · · · ·			
С	Treated as distributions out of corpus (Election		w /		,
_	required - see instructions) .				8,672
d	Applied to 2015 distributable amount Remaining amount distributed out of corpus			<u></u>	0,072
e			/	I	. ,
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	<u> </u>	,		
_	indicated below:				
a	Corpus Add lines 3f, 4c, and 4e Subtract line 5				
ь	Prior years' undistributed income Subtract	,		` ,	
_	line 4b from line 2b				,,
С	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			 ,,,,,,,,	
a	Subtract line 6c from line 6b Taxable			, ,	-
	amount - see instructions	1	 	· · · · · · · · · · · · · · · · · · ·	
е	Undistributed income for 2014 Subtract line	·		ļ	
	4a from line 2a Taxable amount - see	/ "	,	1	,
	Instructions		 		
f	Undistributed income for 2015 Subtract lines	,	4, , ,		
	4d and 5 from line 1. This amount must be distributed in 2016.	, , , , ,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1, 3	2,758
7	Amounts treated as distributions out of corpus	· · · · · · · · · · · · · · · · · · ·			2,730
'	to satisfy requirements imposed by section		1	1,	* //:
	170(b)(1)(F) or 4942(g)(3) (Election may be			^ ^	`
	required - see instructions)		16 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	* * * * * * * * *
o	•	<u> </u>	1,311		, , , , , , , , , , , , , , , , , , ,
8	Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)		10,000 10 10		1
0	Excess distributions carryover to 2016.		7. 7. 77 19 19		A HOLL BOND TO THE STATE OF THE
9	•	1	The family of		1000
10	Subtract lines 7 and 8 from line 6a		1003 003		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
10	Analysis of line 9				
a	Excess from 2011	HY. (2009) [28]	100 J. 1200		13.00
b	Excess from 2012 .	4、5000000000000000000000000000000000000	H. Comer		1 6 Th 3 14 15 16
C	Excess from 2013	40000 10000		#\$\$%\$\\$\;\\\	
d	Excess from 2014		Company Say	19. 2. 18 M. C. 18 M.	
e	Excess from 2015	B \$28 1 1 1 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Priday was princed	16.60 " " " " "	Form 990-PF (2015)
EEA					FOITH 990-PF (2015)

orm 9		LY PROVIDENCE			46-4342693	Page 10
Part	XIV Private Operating Foun	dations (see ins	structions and Par	t VII-A, question 9)	-	
1a	If the foundation has received a ruling or o		-	ting		
	foundation, and the ruling is effective for 2	2015, enter the date of	of the ruling .	- !	<u> </u>	
b	Check box to indicate whether the foundation	ition is a private oper	ating foundation descr	ibed in section	4942(j)(3) or 4942	2(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for each year listed	(a) 2015	(b) 20*4	(c) 2013	(d) 2012	(1) (02)
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					
е	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)					
b	"Endowment" alternative test - enter 2/3 of minimum investment return snown in Part X line 6 for each year listed					
С	"Support" alternative test - enter					
•	(1) Total support other than gross					
	investment income (interest,		İ			
	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					
Part	XV Supplementary Informa			the foundation ha	d \$5,000 or more in a	assets at
	any time during the yea		ons.)			
1 -	Information Regarding Foundation M		are then 20% of the tet	al contributions recovered	by the foundation	
а	List any managers of the foundation who before the close of any tax year (but only	v if they have contrib	ore than 2% of the total outed more than \$5.000) (See section 507(d)(2)))	
		,,				
	•					
b	List any managers of the foundation wh	o own 10% or more o	of the stock of a corpor	ration for an equally large	portion of the	
U	ownership of a partnership or other entit				portion of the	
				_		
2	Information Regarding Contribution,	Grant, Gift, Loan, S	icholarship, etc., Pro	grams:		
	_			able organizations and d	oes not accept	
	unsolicited requests for funds. If the fou					
	other conditions, complete items 2a, b.	•	- '			
а	The name, address, and telephone num	ber or e-mail addres	s of the person to who	m applications should be	addressed	
b	The form in which applications should b	e submitted and info	rmation and materials	they should include		

Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Any submission deadlines

Part XV | Supplementary Information (continued)

3 Grants and Contributions Paid During th	e Year or Approve	d for Future F	ayment	
Recipient	If recipient is an individual show any relationship to any founcation manager	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor			
a Paid during the year				
OPRY HERITAGE FOUNDATION			SHOWCASE,	ĺ
2221 EXCHANGE AVE			PROMOTE, AND	
OKLAHOMA CITY, OK 73108	NONE	PC	CONNECT OKLAHOMA	3,500
FRONTLINE CHURCH		ļ	MULTIPLYING]
PO BOX 2368			GOSPEL	
OKLAHOMA CITY, OK 73101	NONE	PC	COMMUNITIES THAT	10,000
			-	
				1
•				
Total .		<u></u>	▶ 3a	13,500
b Approved for future payment				
		1		
	}]		
	1			
		<u> </u>	<u>L</u>	
Total		<u> </u>	> 3b	Form 200 PE (2015

Form 990-PF (2015) MCCOY FAMILY PROVIDEN		ATION		46-43426	93 Page 12
Part XVI-A Analysis of Income-Producing . Enter gross amounts unless otherwise indicated		f business income	Excluded by	section 512 513, or 514	(e)
	(a) Business	(b) Amount	(c) Exclusion code	(d)	Related or exempt function income (See instructions)
1 Program service reveriue	code				
ab			 		<u> </u>
b c					
d					
e	<u></u>		ļ	ļ	
f	<u> </u>		 		
g Fees and contracts from government agencies2 Membership dues and assessments	ļ		 		
3 Interest on savings and temporary cash investments			 	<u> </u>	· · · · · · · · · · · · · · · · · · ·
4 Dividends and interest from securities					4,791
5 Net rental income or (loss) from real estate	` .		ļ	· · · · · · · · · · · · · · · · · · ·	- <u></u>
a Debt-financed property			 	<u> </u>	
b Not debt-financed property			 		
6 Net rental income or (loss) from personal property 7 Other investment income				l	
8 Gain or (loss) from sales of assets other than inventory			 	-	_
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue a					
b			 		
d	ļ				
e e					- <u>-</u>
12 Subtotal Add columns (b), (d), and (e)					4,791
13 Total. Add line 12, columns (b), (d) and (e)	-			13	4,791
(See worksheet in line 13 instructions to verify calculations)	A	laboran at Eu	ament Division		
Part XVI-B Relationship of Activities to the Explain below how each activity for which inc					
accomplishment of the foundation's exempt p	•				
04 INVESTMENT INCOME TO SUSTAIN	TONTE I BUIL	TONS AND PAY	EXPENSES		
or indicate in south		10			
					·······
		····			·
					
			- 		
					Form 990-PF (2015)

Form 990-PF (2015) MCCOY FAMILY PROVIDENCE FOUNDATION 46-4342693 Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described Yes No in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of 1a(1) Χ (2) Other assets 1a(2) **b** Other transactions 1b(1) Χ (1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization 1b(2) X 1b(3) X (3) Rental of facilities, equipment, or other assets X 1b(4) (4) Reimbursement arrangements X 1b(5) (5) Loans or loan guarantees . Χ (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees 10 X d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations X No described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes." complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship perjury I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge, and belief it is true, etc. Declaration of preparer (other than taxpayer) is based on, all information of which preparer has any knowledge. Sign May the IRS discuss this return PRESIDENT/TREASURER Here with the preparer shown below Yes (see inst)? Signature of officer or trustee Print/Type preparer's name Prepa; Check

Paid

Preparer

Use Only

Albert J Bold III

Firm's name

Firm's address

▶ BOLD SOLUTIONS LLC

EDMOND OK 73013

2400 BUTTERNUT PLACE

P00648113

self employed

405-588-2433

▶

Firm s EIN

Phone no

Fe	ederal Supporting State	ments	2015 PG01	
Name(s) as shown on return			FEIN 46-4342693	
MCCOY FAMILY PROVIDENCE	JOUNDATION		40-4342033	
	990PF - PART II - L STMENTS: OTHER SCH		STATEMENT #118	
CATEGORY	BOOK VALUE (BOY)	BOOK VALUE (EOY) FMV (EOY)	
LPL FINANCIAL ACCT 1780-9430		124,52	27 1 24,527 99 94,999	
LPL FINANCIAL ACCT 7591-0906	LPL FINANCIAL ACCT 7591-0906 94,99			
TOTAL		219,52	<u>219,526</u>	

FORM 990PF - PART 1 - LIME 16(8) - ACCOUNTING FEES SCHOULE RED'IONE			Federal Su	Federal Supporting Statements	ments	2015 PG01	
FORM 99.0PF - DART 1 - LINE 16(8) - AUCOLANTING FEES SCHEDULE REDIGNATE AND DORBIGSS INVESTMENT NET INCOME 1,100 0 1,100 0 1,100 0 0 1,100 0 1,100 0 0 1,100 0 1,100 0 0 1,100 0 2,607 2,607 2,607 2,600 0 2,607 2,607 2,607 0 0 2,607 2,607 0 0 2,607 2,607 0 0 2,607 2,607 0 0 2	shown an return					Your Social Security Number 46-4342693	
NED CAREGES INVESTMENT NADJUSTED GUARTITABLE		,	PART 1 - LINE 16(B)	- ACCOUNTING FEES S	CHEDULE	STATEMENT #108~	*
1,100 0 1,100 0 1,100 0 1,100 0 0 0 0 0 0 0 0 0	DESCRIPTION ACCOUNTING FEES	REVENUE AND EXPENSES 1,10C	NET INVESTMENT	ADJUSTED NET INCOME			
FORM 990PF - PART 1 LINE 16(C) - OTH-R PROFESSIONAL FEFS SCHEDLLE REVENUE NET AND EXPENSES INVESTSYNIN INCT INCOME PURPOSE 2,607 2,607 2,607 0.607		1,100		1,100	0		
PEES AND EXPENSES INVESTMENT NET INOOME PURPOST 2,607 2,607 2,607 2,607 2,607 2,607 2,607		FORM 990PF - PART		THER PROFESSIONAL FE	FS SCHEDULE	PG01 STATEMENT #109~	<u> </u>
2,607	DESCRIPTION BAOKEFAGE FEES	REVENUE AND EXPENSES 2,607	INVES	ADJUSTED NET INCOME 2,527			
		2,607		2,607	0		
							<u> </u>

Schedule B

(Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

Employer identification number

MCCOY FAMILY PROVI	DENCE FOUNDATION		46-4342693		
Organization type (check o	ne)				
Filers of:	f: Section:				
Form 990 or 990-EZ	501(c)()((enter number) organization			
	4947(a)(1) none	nexempt charitable trust not treated as a private fou	undation		
	527 political org	ganization			
Form 990-PF	orm 990-PF 501(c)(3) exempt private foundation 501(c)(3)				
	4947(a)(1) none	nexempt charitable trust treated as a private founda	ution		
	501(c)(3) taxab	ble private foundation			
Check if your organization is	covered by the General R	Rule or a Special Rule.			
Note. Only a section 501(c) instructions	7), (8), or (10) organization	on can check boxes for both the General Rule and a	a Special Rule See		
General Rule					
_	or property) from any one co	or 990-PF that received, during the year contribution contributor. Complete Parts I and II. See instructions	_		
Special Rules					
regulations under so 13, 16a, or 16b, and	ections 509(a)(1) and 170(b I that received from any one	c)(3) filing Form 990 or 990-EZ that met the 33 1/39 (b)(1)(A)(vi), that checked Schedule A (Form 990 or ne contributor, during the year, total contributions of 90, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Cor	or 990-EZ), Part II, line if the greater of (1)		
contributor, during t	he year, total contributions	c)(7), (8), or (10) filing Form 990 or 990-EZ that reces of more than \$1,000 exclusively for religious, char evention of cruelty to children or animals. Complete	ritable, scientific,		
contributor, during t contributions totaled during the year for	he year, contributions excluding more than \$1,000 If this ban exclusively religious, chains to this organization because to this organization because.	c)(7), (8), or (10) filing Form 990 or 990-EZ that recidusively for religious, charitable, etc. purposes, but box is checked, enter here the total contributions the naritable, etc., purpose. Do not complete any of the cause it received nonexclusively religious, charitable.	t no such hat were received parts unless the		
		teneral Rule and/or the Special Rules does not file S			

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
MCCOY FAMILY PROVIDENCE FOUNDATION

Employer identification number 46-4342693

Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space is no	eded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RALPH O MCCOY 330 LAS COLINAS BLVD IRVING, TX 75039	\$13,000	Person 🖾 Payroll 🗍 Noncash 🗍 (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u></u>	-	\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-			Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
-		\$ 	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
			Person